RESEARCH ARTICLE

EFFECTS OF FEMALE GENITAL MUTILATION (FGM) ON GIRLS’ EDUCATION PERFORMANCE IN PRIMARY SCHOOLS. A CASE OF WEST POKOT SUB COUNTY, WEST POKOT COUNTY KENYA.

Susan Chematui, Ezine Enos, Simiyu Kefer, Ben Malesi, Salome Awinja, Rose Kisaka, Kellways Nyamanga, Maurice Mwalo, Murunga Joseph, Daniel Wamalwa, Beatrice Watiti and Nalondo Phanus.

Med Student (Leadership, Administration and Management) Northwestern Christian University Florida, USA.

Abstract

The purpose of this study was to investigate the effects of Female Genital Mutilation on educational performance of girl’s in primary schools in West Pokot Sub County. The study was guided by the following objectives; examine the effects of FGM on girl child, establish relationship between FGM and performance of a girl, determine the determinants of FGM, establish human rights adherence of anti-FGM on education performance. The study was guided by the role theory of Ralph Linton (1893-1953) on the relationship between an individual and the society. Emphasis was put on the structures of interaction in small groups, the maintenances of gender uniqueness and the development of commitment to deviant behavior and the construction of personal identity, that human behavior is guided by expectations held both by individual and other people. The study explains what happens when people act the way they do. Girls undergo FGM and the repercussion they face if they don’t. The study adopted mixed research method design whereby the researcher uses qualitative data as well as the quantitative strands formulating triangulation convergence design. The qualitative data was collected using questionnaires, interview schedules and documentation analysis. The study was done in West Pokot Sub-county, targeting a population of 1000 people from 50 primary schools with a sample size of 300 respondents. The study was conducted on 171 girls 57 boys, 15 old men, 29 women and 29 teacher respondents. Simple random sampling procedure and purposive sampling technique was employed. Simple random sampling procedure and purposive sampling technique was employed, validity and reliability of the research instruments was tested through piloting. Data from the questionnaires and interviews was analyzed by sorting, editing, classifying and coded into statistical package for social science version 21. Use of inferential statistics brought about comparisons. Pearson’s products of moment correlation co-efficient was applied to determine the relationship between FGM of girls in public primary schools and academic performance.

Copy Right, IJAR, 2019. All rights reserved.


**Introduction:**

The Chapter consists of the, statement of the problem, purpose of the study, research objectives, the research questions, justification of the study, significance of the research, scope of the study, delimitations and limitations of the research assumptions, theoretical framework and conceptual framework Female Genital Mutilation (FGM) refers to “partial or total removal of the external female genitalia including other injuries to the female genital organs for cultural and religious preservation (WHO, 2005).

The Clitoris is denatured and dismembered thus interfering with its natural functioning systems. This heinous act seems to interfere with the victims physically, psychologically, mentally and socially. Millions of girls and women who have experienced the female wrath (genital mutilation) internationally terminate acquisition of education. In addition to other reports released by (WHO, 2013) explains rampance of it in developed countries. Most industrialized countries such as France, Australia, Netherlands, Italy, Denmark, Britain and others have been reported practicing FGM on immigrants (world bank report on FGM 2005: 122). The highest percentage of countries circumcising women including Egypt (97%), Mali (94%), Sierra Leon (90% Somali (98%)) an indication that most African countries seems not to be abiding by laws governing women rights (United Nations, the world women 2000).

Irrespective of the studies that have been done by various scholars on the causes and factors that instigate the FGM on the girl child, many countries seem not to be using the research recommendations that are given by researchers on the mitigations of the FGM. Although a lot of attention is being paid to the health effects, much attention is not considering the effects of FGM on the girl child and the social effects seem to suppress the acquisition of knowledge and socialization of the girl child. In this respect, the power to enable the girl child improve on the academic level seems to be deteriorating leaving the girl child with no option. The traditional norms among the Pokot community regard FGM as one of the most significant points of reference and most conversations are done in social interactions that reflect their origin and unity among their communities. In the process of practicing it, it’s a powerful belief that is ramificated among the African communities such that it’s part and parcel of their lives (Murray, 1974). Any individual among the community who do not reflect the culture is referred to as a social misfit. This is the explanation as to why this practice is rampant and persistent (Aoko, 2010).

The Star Magazine of 8th August (2018) highlighted on six girls aged between 12-15 years being subjected to FGM some bleeding profusely almost to death, two of the girls were taken to Kapenguria teaching and referral hospital for treatment while four of them escaped to unknown destinations with their parents. The report had it that one of the girls was a class 8 candidate. This act was condemned by Anti-FGM activists, thus the incident justifying its rampancy in the county.

Female Genital Mutilation is impacting negatively on pupils who are in public primary schools because the procedure prepares a girl for womanhood causing the girls’ mind switch off completely from classroom and become a candidate to marriage. Circumcision mood comes when learners and non-leaners initiates’ intensively interact, influence and motivate each other in the social life. This confusion may start well before the real FGM as it causes anxiety on the anticipated ordeal therefore distracting concentration in academics for scholars.

FGM in the Pokot culture was majorly regarded as a sign of maturity, ready for marriage, identity with the community, a way of minimizing high need for sex; it brought pride to the family of the initiate by boosting their self-esteem and acceptance in the society. Due to such factors, when a girl sees others undergoing the ‘cut’ they prepare psychologically knowing that their turn was on the way so the concentration in class work dwindles. Those who did not undergo the cut due to cowardice were mocked and would eventually follow their parents’ directive who do not take education seriously seemingly because of ignorance. When a girl is undergoing FGM, suiters present their proposals for marriage and this assures the parents of the girl being ready to generate wealth through dowry, this means that even the parents provoke their daughters to be circumcised. Due to economic constrains and social status, the girl may want to eliminate the poverty situation in their home by deciding to drop out of school and get married, this affecting academic performance in girls as compared to their male counterparts who benefit from such dowries and pursue their education to higher level. Seclusion period may take up to two months or so mostly during the holiday and may extend long into school days leading to poor coverage of the syllabus hence poor performance during their KCPE national examinations. This infringes into the right of the child as stipulated in the children’s Act (2012; 53) which protects the child from abuse, in human treatment and harmful cultural practices like FGM. The
very parents who should be caring and protective turn to be uncaring and exploitative especially to their minors under 18 years who are basically in public primary schools.

There are many primary schools established education laws passed, many Anti-FGM organizations preaching days and night to stop the vice, the religions organizations demonizing the act and elites sensitizing the learner though workshop and education days have since seen the practice taking a low profile. A community work formed at local level to safeguard children and to enable better learning at the local and national levels (CSWA 2017). In content, “children and social work 2017 is up to date with all changes known to be in force on or before 17th August 2019”. (legislation.gov. 2017) the UK nationals are offered with international child protection certificate to help better protect those vulnerable children (ICPE 2018). Although many studies on effects of FGM on health and social life of girl has been carried out, not much has been carried out to establish the effect of FGM on academic performance of girls in public primary schools in West Pokot sub-county hence provoking the thirst of the researcher to find out how FGM has contributed to low academic performance of many girls. Appropriate utilization of resources in school control dropout rates, maintains students discipline and makes students well motivated long enough Raw (2003). Most primary schools in west Pokot have the most descent learning facilities is affirming the 2011 economic report that moest takes the biggest share of the government budget but it disturbing that many girls do not hold long enough to complete their KCPE and if a few do, their academic performance are not appealing. This therefore, seems to contradict the bond conclusively agreed with the rendering the resources underutilized.

**Statement of the problem:**
History has it that FGM has been practiced since time immemorial in many parts of the world. Female genital mutilation in school going age girls has totally disoriented and tore them up between the societal norms and pursuance of education causing confusion and discontent as a big share of blame on the poor performance in academia especially when girls are subjected to KCPE examinations. There has been out cry from the county government, non-governmental bodies, churches and parents over the perpetual poor performance among girls in arid areas, semi-arid and marginalized areas especially those that practice FGM. There has been many researches on FGM in West Pokot by different researchers. However, there is no research that has particularly related FGM and academic performance in public primary schools in west Pokot sub County, being reason as to why the researcher has taken the task to establish the effect of FGM on academic performance.

**Purpose of the study:**
The purpose of the study was to assess the effects of female genital mutilation on girl’s education performance in public primary schools and the gap identified.

**Research objectives:**
The study will seek:
1. To examine the cultural attitudes and their impacts on academic performance.
2. To determine the determinants of FGM and their impacts on academic performance
3. To establish the human rights adherence amongst girls in public primary schools of West Pokot sub County.

**Justification of the study:**
Female genital mutilation is largely practiced in west Pokot though secretly, (Amal K Halder et al 2015) and this has prompted the study. There are several factors that affect girl child progression rates in public primary schools, FGM being among others (Waswa, 2015). There is evidence that some learners have been put in various rescue homes for their safe custody to evade forced Circumcisions. The low population of Girl-Child in many schools is an indication of the way the girl-child is very much affected. A research by Chebitwey H. (2011) showed that FGM affected participation and standards of pupils in North Pokot, in West Pokot and that the percentage of girls who completed their primary level education was far much lower than their boy counterpart. These are the reasons for justification of the study because it will provide fresh knowledge to be used to mitigate if not complete eliminate this genita mutilational impacting negatively on her academic performance. It will help in the retention of the learners in school progression to next levels of education hence creating an elite society that will compete favorably in all spheres of life economically, politically and socially. Such knowledge may be disseminated to parents, education personnel and the learners.
Significance of the Study:
The study reckons will generate new knowledge on the effects of FGM on girls’ education in public primary school and how to mitigate or stop it complete in order to achieve the desired performance of a girl child. The outcome of the study will help the MOEST, school administration, the parents, the learner, the politicians, the provincial administration and non-governmental organizations to work hand in hand in order to alleviate the chronic ailment that has become a thorn in the flesh for decades in the education sectors. The scholars will put to task to fill in gaps that may be identified in this study and or use it for review. The Kenyan government act of prohibition against FGM will enforce laws through the provincial administration and the courts to prosecute perpetrators of the vice. The clergies through the wide spread religious organization in the county will spread the gospel to its congregation against the indecent practice, with all the interventions from the stakeholders, a girl child’s future academic achievement will be realized.

Literature Review:
A theoretical framework is the structure that can hold or support a theory of a research it introduces and describes the theory that explains why the research problem under the study exists (Abed, Gabriel 2008). The study was guided by role theory (Ralph Linton 1893-1953). From the perspective of this theory the relationship between an individual and society is paramount. Emphasis is put on the structures of interaction in small groups and the guiding rules, failure to which deviant character are meted with tough disciplinary measures all aimed at the constructions of human behaviors both by the individual and other people. This is to say that, it explains what happens when people act the way they do, the reasons that provoke girls to undergo FGM and repercussions faced if they do not abide by.

Symbolic Interaction Theory:
Symbolic interactionism tends to explain that many practices within the society is learned through interactions of individuals within the society (Arcidiacono, A Bancal, 2011). The pernicious act famously called Female Genital Mutilation (FGM) is such practice that is learned from generations to generations by the individuals within the society with the aim of showing loyalty and submissiveness which results to total acceptance in the mass. This heinous practice which may be termed as female genital “massacre” causes gravious physical harm and psychological damage to females who either voluntarily or involuntarily undergoes through it. Despite decades of pooled efforts to end it, change in behavior amongst communities practicing FGM is wanting and especially the impact it has on the academic performance of girl-child in public primary schools. Symbolic interactionism theory asserts on the important features of social life and the characteristics behavioral patterns (Biddle 2017). No individual decides on how she/he should act or live but rather live according to a social life characteristic of that society. According to Adam Philips reports by the U.S that carters for disease prevention says that more than 500,000 females have undergone or are at risk of the cut, more so, the UN estimates at least 200 million girls alive today have been subjected to FGM. In an effort, a federal law banning FGM unconstitutional is evidence enough that FGM is an active practice.

In Canada, FGM is a foreign procedure that not everyone knows about or cares to look into, unaware that it may be taking place in their own backyard Jackie Marchildon (2018) the anti-FGM organization Sahiyo (2016) revealed that women had undergone the practice within Canadian borders though insanely FGM was added to Canada’s criminal code in 1997 under section 268 in the form of “aggravated assault” a crime chargeable. Girls in this countries are protected by the millennium development goals (MDG) by United Nations Report (UN 2007), which emphasizes and focuses on education for all (EFA) and the target to ensure that by the year 2015 all children boys and girls in every country would be able to complete primary and secondary education.

Article 39 of Ghana’s constitution provides in part that cultural practices that are detrimental to a person’s health and well-being are abolished and that circumcisers can be sentenced up to 3 years of imprisonment. However, this practice is still practiced especially in groups of upper East region in spite of 1994 legislation. A study comparing the districts of Baruku and Pusiga showed that circumcision of girls in Bawku had greatly reduced and this is attributed to many girls having attained primary education and woman alike have attained secondary and tertiary education, meaning that the educated tend to oppose the practice as compared to girls and women in Pusiga that are less educated and have high population of circumcised. This could also be as a result of the Pusigan’s crossing the borders to Togo to be circumcised as its out lawed in Ghana (BMC women’s health 2018).

School based FGM prevention joint programme has reached 6,517 school going girls aged 8-12 at risk of undergoing FGM that holistic pay implement in upper Egypt quarter Cairo. The program targeted parents, teachers,
religions and community at large, such efforts improved academic performance of girls because they have protection from all corners of their interactive life. A study published in BMS Global Health noted that FGM among girls aged 14 East Africa has dropped from 71.4% in 1999 to 8% in 2016 and this age is the primary school bracket, however in February 2018, the United Nations population fund warned the number of girls and women could rise to 4.6 million by 2030 due to population growth in communities that practice FGM. It’s however antagonizing that this study which included girls aged 14 and below feared that such girls could undergo the cut at a later age because some of the girls who had not undergone FGM had not reached customary age (Nafisatou Diop 2018). The age at which girls are circumcised varies from community to community or ethnic group. The Somali community practice FGM on girls aged three and seven, the masai community have their girls undergo FGM at a teenage age 12 and 14, (Rebecca Ratcliffe 2018), the Pokot community have their girls undergoing FGM at age 12-16 most of who are in primary school and are likely to underperform academically or even drop out of school to be married off. Factors which mostly make this girl who are learners embrace FGM are poor quality of education amongst their parents, poverty in the families, identity and belonging and cultural influence.

The international community guided by concerned UN organizations and larger donor bodies defined FGM as a violation of human rights and set a uniform goal to completely eliminate all forms of FGM. (Kyung Sun Lee 2008). Despite all the methods used to stop FGM amongst the communities practicing it many communities seem to be avoiding it but pokots have remained adamant. It seems the effectiveness of the messages used to preach against FGM is not well understood. The case of introducing human rights as a campaign tool hit a snare because the human right argument did not match the local’s reasons for practicing (Alexander 2018) because their reasons were guided by societal norms and deviant behaviors of individuals faced reprimand and consequences of practicing FGM. This calls for alternative approaches. In 2012 Somalia introduced a new constitution that aimed at banning FGM but died a natural death a few years later due to little or lack of government commitment (Siobhan O’Grady 2018). As put by UNICEF, the estimates are up to 98 percent of females who underwent the cut. An incident of a ten-year-old girl died two days after the cut due to excessive bleeding and since there was no law that would ensure the circumcision was punished, the culprit went scorch free. (Hawa Aden 2018) in Somalia, FGM takes many forms including the removal of the clitoris and some parts of the labia causing infection health problems including deaths. The cutting procedure is typically performed by people who are not medically trained.

An article for CNN wrote that two thirds of girls who undergo FGM in Somali are subjected to infibulation, “the most extreme form which leaves girls with their labia stitched together following excision of the clitoris”. “This leads to urination and menstruation almost impossible”. (Mohammed 2017).

A research team visited girls at community’s rescue centers in 2009 and found that FGM was a popular practice among the Pokot community. The community fight to maintain the custom as it is a need and responsibility to maintain (Halder AK et al 2015). The government of Kenya and development agencies have worked against the harmful practice but Kenyan Government’s Act of prohibition against FGM was not being enforced. In the 2009 survey by UNICEF, 85 percent of Pokot females underwent the cut mostly at the age of 12-16 percentage compared to other communities in their neighborhood and this greatly affected them pursuance of basic education. It’s sad that this girl does not enjoy the cut but are compelled to by the urge to safeguard the norms of the community and the fear of the penalty on deviance because they are property of the community. Practices within the society is learned through interactions of individuals and others within the society. When a Pokot child is born within an environment that FGM is practiced. Some of the first practices like worshipping, respect and the many dos and dont’s, they see the elder girls go through it amidst enjoyment of dances and other activities during preparations. They hear the praises and heuristic sentiment made towards the initiates, the ridicules made by the elderly and peers all act like a grinder sharpenily their sense towards FGM. It’s not a surprise then that they take it as part of their lives. This however impacts negatively on their academic performance other than identity, FGM among the Pokot community may be influenced by factors such as poverty, a parent sees ready wealth in his girl child because one of the reasons for FGM is a symbol of maturity hence marriage despite the age. At age 9-13, a girl start admiring and wishing for the ritual other than her education.

The parents who would otherwise encourage them to pursue education may be illiterate so they see no value of the same. Seclusion period normally after the cut is two months or so thereby eating into school days leading to reduced interaction with learning environment hence poor performance being effects of female genital mutilation on girl child.
World Health Organization (WHO) is opposed to all forms of FGM and is emphatically against the practice being procured by health care personnel. It has categorized it into four main types of FGM:

1. Clitoridectomy or removal of part or whole of the clitoris.
2. Excision or removal of part or whole clitoris, and Labia
3. Removal and position of both Labia and Labia Majora
4. All other harmful procedures on the female i.e. pricking, piecing, incising, burning etc. (WHO, UNICEF, UNFPA, 1997)

FGM has both short and long term risks. Short term risks include severe pain as the nerve ends and sensitive tissues are cut affecting them for years, (WHO 2019). Excessive bleeding, shock, genital swelling due to infection as result of unhygienic tools and environment, HIV infection, trauma and death. Long term effects of FGM includes chronic pelvic infections, urinary and tract infections and birth complication (Kathryn Reid 2018).

To establish relationship between FGM and performance of girl child:
This practice hampers advancement of education for girls since they are pinned down with management of those initiations rather than being engaged in education matters (family health international 2002). Furthermore girls perceive schooling as a waste of time after FGM because their minds geared towards marriage as the next goal in life (Wamaliu 1995) instead of focusing on education outcome, the girls especially from poor families take upon themselves the burden of their homes and believe that they are the rescuers of their family image so they switch off from class to prospective husbands that will bring bride prize programme advisors for USAID Somalia Mary Beth McKeever said that the connection of FGM and education is twofold. Education awareness about the practice and its risks, and general educational attainment due to the pressures of FGM which leads to dropout its likely that the children of this dropout will undergo the cut. On the other hand, those who will attain a higher education are most likely not to let their girls cut. Research show that fathers with a higher level of education are less likely to support FGM (Olivia Bradley 2018). This shows that education exposes both male and female to alternative choices of practices that are more acceptable and less harmful.

Kahoro Hellen (2009) FGM exposes girls to sexual activities leading to pregnancies, infections, psychological effects and even death. In case of pregnancies, they waste a lot of time babies this losing momentum in education. This means that FGM drifts them away from education.

The established human rights adherence of anti-FGM:
Chapter 4:20 of Kenya constitution- (bill of rights 2010) states that human rights and fundamental freedoms is to preserve the dignity of individuals. Everyone has interest dignity and the right to have that dignity respected and protected. A girl deserves her dignity and should enjoy the freedom of being a child to the fullest. The children Act chapter 141 (2012) has been advocating for protection of girls from harmful cultural rites. Joint work at local level to safeguard children and enable them have better learning at the local and national levels. Parents have been urged to extend responsibility of their children beyond 18th birthday to ensure their pursuance of basic education. All children deserve the right to education (education act 2013). Therefore, girls should be left alone to learn in an effort to tackle barriers to girl child education in Kenya action Aid Kenya (2018) has put emphasizes that children are expected to go to school for early childhood education by age of four. This ensures that at least both boys and girls would have passed though primary education by age 12 before they get disoriented by FGM. West Pokot leaders march 2018 reiterated that education was key to ending malpractices like FGM and cattle rustling. All these efforts are aimed at mitigating or totally eradicating FGM, unfortunately the practice still go on behind the curtains within the Kenyan Pokot communities and others. Amal K Halder (2015).

Determination effect of determinants of FGM:
Girls who live in a poverty stricken families would automatically work hard to rescue their sibling and parents by getting married off and earn dowry at the expense of education performance. Their male siblings would then benefit from the wealth and pursue education even beyond primary level. This is because right from colonial government, men were needed to undergo education to provide the much needed labor to the settler economy but not girls (Eshiwani 2007). This brought forth an attitude that boy should be educated to provide for their families and take up leadership roles. This stereotype idea has since stuck permanently in the community. The belief has a girl can’t who has undergone the cut earns a better price pride has fueled the urge both by the parents and individual child to do it.
Everyone would love cleanliness, so FGM is believed to keep a female, clean and more accessible. The assumptions that FGM increases marriage prospects and less pain during childbirth continues rekindling the barbaric act (Jane Kaman 2004). In general social-economic factor which include lack of finances to support education family status, cultural expectation, peer pressure, parental illiteracy level, religious belief and ignorance (Kimondo 2007) have impacted negatively on the education performance of a girl child. The international community guided by concerned UN organizations and larger donor bodies defined FGM as a violation of human rights and set a uniform goal to completely eliminate all forms of FGM. (Kyung Sun Lee 2008). Despite all the methods used to stop FGM amongst the communities practicing it, it seems the effectiveness of the message used to preach against FGM is not well understood. The case of introducing human rights as a campaign tool hits a snack because the human right argument did not match to the local reasons for practicing FGM.

Children in the UK enjoy international child protection certificate CRB (2018) to help better protect those vulnerable children from FGM and give them an opportunity to access education.

Research Methodology & Design:
A research design refers to the overall strategy that one may choose to integrate the different components of the study in a coherent and logical way (RV Labaree 2009), it’s the yardstick as well as the heart of a research. It’s a plan, a roadmap and a blueprint strategy of investigation conceived so as to obtain answer to research questions (Kothari, 2004).

A research methodology is a strategy used to implement that plan. (Kothari 2004). The researcher used descriptive method or design whose major purpose is to describe the state of affairs as it exists the researcher reports the findings as obtained from the field of studies and not only confined to fact findings, but may often result in the for mutations of important facts of knowledge and answers to significant problems (Kerlinger 1996). However, they do not make accurate predictions or determine cause and effect. The design involves measurement, classification analysis, comparison and interpretation of data. This design involves collecting information by interviewing and or administering a questionnaire to a sample of individual (Orodho 2003) people’s attitudes opinion, habits and social issues are presented descriptively (Orodho and Kombo, 2002).

The research chose descriptive research design to answer the what, when, where, and how questions but no why questions (Jo Balucanag 2015). The purpose of descriptive research and design is to secure evidence concerning an existing situation, identity norms with which are to be compared are in order to go next step and how to make next step (Good 1966) in the current research, descriptive method is used to explore and describe relationship between FGM and educational performance of a girl child. In public primary schools. The variables in this study were divided into independent and dependent. The independent variable is the female genital mutilation and dependent variable is the consequent such as school dropout and poor performance.

Target population:
The largest population in the larger group to which the researcher hopes to generalize the findings called target population (Nankel and Wilen 1993). The researcher targeted a population of 1000 people. In primary schools within the west Pokot sub-county because the practice is carried out during puberty stage. 570 for girls, 95 for teachers, 190 for boys, 50 for old men and 95 old women. The respondents were girls, teachers, boys, old men and old women. The 30% of each target population was sampled.

Cross cultural design:
Cross cultural design is a scientific method of comparative research which focuses on systematic companions that compare culture to culture in an attempt to answer questions about incidence, distributions, and cause of cultural variations worldwide (Oluwatoyin Olatudun 2009).

The researcher used this design to compare behavioral patterns of different cultures to that of Pokot in west Pokot county. The researcher perceived the elements on how various cultures perceived educational and social outcomes in relationship to Pokot cultures. This informed the researcher of how the FGM culture has led to detrimental development of the Pokot girl child’s education acquisition.
Purposive sampling technique:
The researcher visited the respondents who had the knowledge of FGM among the Pokot’s this was because they had extensive and intensive information about the FGM.

Convenience sampling technique:
The researcher in the research field pumped into the respondents accidentally and interview them on the issues of FGM unknowingly. The respondents gave into the researcher with comprehensive information about FGM. The researcher prepared the research instruments that included questionnaires and interview schedules, after which the researcher went for pilot study on five respondents to test the validity and reliability of the research instruments. The five respondent to pilot the study were chosen using random sampling technique.

Data analysis:-
Data was coded, sorted, classified, and put into spas machine for refining
57% for girls, 9.5% for teachers, 19% for boys, 5% for old men and 9.5% for old women.

Table:- target population (N=1000)

| Population category | target pop | sample size | percentage |
|---------------------|------------|-------------|------------|
| Girls               | 570        | 171         | 57%        |
| Teachers            | 95         | 29          | 9.5%       |
| Boys                | 190        | 57          | 19%        |
| Old men             | 50         | 15          | 5%         |
| Old women           | 95         | 29          | 9.5%       |
| Total               | 1000       | 300         | 100%       |

Source:- Field data

Findings And Discussions:-
According to the study, it’s evident that FGM was practiced either openly or secretly. The investigated relationships, causative factors, relative correlates for FGM and education performance gives a prove
It was observed that many girl’s participations in school was thwarted by female genital mutilation along with early marriages and child labor hence dismal performance in West Pokot. Controlling female sexuality and ensuring sexual chastity are among the common reason for practicing FGM yet some communities perform it as a rite of passage from childhood to adulthood. The implication of this is that the girl is viewed as ripe for marriage (Avalos 2015), world vision 2014) it’s not strange then to find prospective husbands advancing their proposals immediately after the cut no matter the age of the girl. These means that the concentration of education performance engages a reverse gear.

The study established that FGM and education performance correlates basing on an interview from respondent who testified to have boldly abused and demeaned her female teacher from a community different from her’s and who do not practice FGM calling her ‘clitoris’ in mother tongue. Her relationship with the victim teacher, and all other was unbearable and so led to many and dropout of school.

This shows that FGM disillusions a girl child with real life expectation. The practice has gracious effects on the child physical and psychologically. Most of the respondents swear not to be cut if the whole process thing was to be reversed because because of the excruciating pain.

"I just remember screaming" Toronto FGM survivor recalls the day she was cut (Jayme poison Aug, 21, 2017). Amidst laugher, a survivor said she kicked the surgeon, but elderly women held her tight and the blade pierced through her life mercilessly. Many of the respondents narrated their ordeal. Some of the determinants of FGM were cultural perspective of the practice. The perception that the cut clitoris and the Labia would reduce libido saw many girls undergo the cut. The community view circumcised girls as clean and with small opening good for the male enjoyment. When a girl in Pokot community is circumcised, she should put her feet together to enhance narrow opening as the wound heals and the hard scar formed.
In case of the first encounter with a man, a lot of bleeding occurs due to forced penetration because a scar does not stretch like a normal tissue thus traumatizing the girl. (Gibson et al 2015) states that girls whose mothers have formal education are always present in school. This shows that a mother’s education determines her daughter’s performance. Headteachers report reduced number of girls in class 7 and 8 and this cause a low allocation of FPE funds to schools. Furthermore, the few that remain proceed to high school with a high risk of teenage pregnancy. This is because men now admire more the ‘educated and cut’.

The engagement in FGM tend to deprive a girl school contact hours leading to poor performance (Gibson et al 2005) teachers reported that many girls were frequently absent because some looked after animals or their siblings as their male counterparts went to school. The chief’s reports indicated that FGM was an ongoing exercises and several girls have been rescued in many occasions and the perpetrators of FGM brought to book this shows that the practice is illegal and discouraged, it also shows there are efforts employed to end the vice. The education act, 2013:11) states that children at 6 years to thirteen should be put to school so as to enhance good academic performance.

Conclusions and recommendations:-
In conclusion, the study highlighted the possible indicators which shows that FGM has negative effects on education performance in public primary schools therefore, the law enforcers from the office of the president should put more effort to stop FGM in their areas of jurisdiction. This could be done though public barazas and seminars. Parents should be sensitized on the importance of education and their responsibility to make sure that girls go to school always without subjecting them to FGM. NGOs to take a lead in sensitizing girls on the need to end FGM. The churches should also teach the flock on the need to keep the ‘temple’ holy. This can work so well because religion is widely impressed by many in the west Pokot county. The county government to give a stern warning to those openly or secretly practicing it that they will be meted with tough penalties.

The elites in the community should also visit the girls in primary school and encourage them. This girl could also be taken for tours outside the county to visit schools and see how girls elsewhere embrace education. More rescue centers be erected for those who run away from FGM. The parents could be economically empowered or capacity built so that they engage in legal wealth creation activities than dowry. Boarding schools can be better homes for girls so that they don’t interact with negative ideas. often the researcher acknowledges Mrs. Katina who showed video clips on FGM while in high school, this should be a regular practice in primary school too.

References:-
1. AfriKids. N.d.a. "Introduction to AfriKids." [Accessed 24 Aug. 2006]
2. ______. N.d.b. "Harmful Traditional Practices and Festivals." [Accessed 24 Aug. 2006]
3. Ardayfio-Schandorf, Elizabeth. April 2005. University of Ghana, Family and Development Programme. Violence Against Women: The Ghanaian Case. Paper presented at the Expert Group Meeting of the United Nations (UN) Division for the Advancement of Women in collaboration with the Economic Commission for Europe (ECE) and the World Health Organization (WHO) held in Geneva, Switzerland from 11-14 April 2005. [Accessed 30 June 2006]
4. Eke, Ndubuisi et Kanu E.O. Nkanginieme. June 2006. Vol. 367, No. 9525. "Female Genital Mutilation and Obstetric Outcome: WHO Collaborative Prospective Study in Six African Countries." The Lancet. (World Health Organization Web site). [Accessed 3 Oct. 2006]
5. Equality Now. N.d. Annual Report 2004. [Accessed 24 Aug. 2006]
6. Freedom House. July 2005. "Ghana." Freedom in the World 2005. [Accessed 22 Aug. 2006]
7. Ghana. 12 January 1961 (last amended 2003). Criminal Code, 1960. (Office of the United Nations High Commissioner for Refugees/Refworld). [Accessed 17 Aug. 2006]
8. References
9. Moore HL (2013) Female genital mutilation/cutting. BMJ 347: f5603.
10. Yount KM, Abraham BK (2007) Female genital cutting and HIV/AIDS among Kenyan women. Stud FamPlann 38: 73-88.
11. Kaplan A, Forbes M, Bonhoure I, Utzet M, Martin M, et al. (2013) Female genital mutilation/cutting in The Gambia: long-term health consequences and complications during delivery and for the newborn. Int J Womens Health 5: 323-331.
12. Kaplan A, Hechavarria S, Martin M, Bonhoure I (2011) Health consequences of female genital mutilation/cutting in the Gambia, evidence into action. Reprod Health 8:26.
13. Pesambili JC (2013) Consequences of Female Genital Mutilation on Girls’ Schooling in Tarime, Tanzania: Voices of the Uncircumcised Girls on the Experiences, Problems and Coping Strategies. Journal of Education and Practice 4:109-119.

14. Coyne CJ, Coyne RL (2014) The identity economics of female genital mutilation. The Journal of Developing Areas 48:137-152.

15. Johansen RE, Diop NJ, Laverack G, Leye E (2013) What works and what does not: a discussion of popular approaches for the abandonment of female genital mutilation. ObstetGynecolInt 2013: 348248.

16. Oloo H, Wanjiru M, Newell-Jones K (2011) Female genital mutilation practices in Kenya: the role of alternative rites of passage: a case study of Kisii and Kuria districts. Feed the Minds.

17. WHO study group on female genital mutilation and obstetric outcome, Banks E, Meirik O, Farley T, Akande O, et al. (2006) Female genital mutilation and obstetric outcome: WHO collaborative prospective study in six African countries. Lancet 367: 1835-1841.

18. UNICEF (2013) Female Genital Mutilation/Cutting:A statistical overview and exploration of the dynamics of change.

19. KNBS (2010) Demographic and Health Survey, Kenya, 2008-2009. In. Calverton, Maryland USA: Kenya National Bureau of Statistics (KNBS) and ICF Macro.

20. O'Dempsey TJ (1988) Traditional belief and practice among the Pokot people of Kenya with particular reference to mother and child health: 2. Mother and child health. Ann Trop Paediatr8: 125-134.

21. O'Dempsey TJ (1988) Traditional belief and practice among the Pokot people of Kenya with particular reference to mother and child health: 1. The Pokot people and their environment. Ann Trop Paediatr8:49-60.

22. Towle A (2012) Pokot tribe. Midwifery Today Int Midwife : 56-58.

23. Keverenge-Ettyang GA, van MarkenLichtenbelt W, Esamai F, Saris W (2006) Maternal nutritional status in pastoral versus farming communities of West Pokot, Kenya: differences in iron and vitamin A status and body composition. Food Nutr Bull 27:228-235.