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Kenya is having another go at passing a reproductive rights bill. What's at stake

Kenya's Senate is considering a reproductive healthcare bill, which seeks to address reproductive health gaps. This is the second time the bill has come before the senate. It has, once again, drawn fire from religious groups, some politicians and civil society lobbies opposed to its proposals. Anthony Ajayi and Meggie Mwoka unpack the bill and the lessons from previous failed attempts.

By Anthony Idowu Ajayi & Meggie Mwoka

The Conversation (12.07.2020) - <https://bit.ly/2ZqaoXK> - Kenyan women and girls face an array of reproductive health risks that can be addressed by comprehensive reproductive health care services. These include sexually transmitted infections, HIV, unsafe abortion and unplanned pregnancies.

Each year, 6,300 women die during pregnancy or childbirth in Kenya. Unsafe abortion contributes close to 17% of maternal deaths in Kenya.

The bill provides a framework governing access to family planning, safe motherhood, termination of pregnancy, reproductive health of adolescents and assisted reproduction.

It makes clear that every person has the right to access reproductive health services. It also stipulates that every health care provider is obliged to provide family planning information and services to women who need them.

There is also a provision in the bill directing the national and county government to provide free antenatal care, delivery care and postnatal care for women and girls in Kenya.

In addition, the bill sets conditions under which a woman can seek abortion services. These include when there is an emergency, when the pregnancy would endanger the life or health of the mother and where there is a risk that the foetus would suffer from a severe physical or mental abnormality. It is worth noting that the bill allows for conscientious objection on the part of health providers to perform an abortion as long as they refer the patients to a willing provider. This doesn't apply in the case of an emergency.

The bill also has provisions ensuring access to adolescent-friendly reproductive health services, but requiring parental consent.

Lastly, the bill also covers the issue of assisted reproduction services to address infertility. The sector is currently unregulated. The proposed bill sets out rules for providers as well as the rights of donors, surrogate mothers and patients.

Reproductive health has been enacted into law in different ways across the continent. A number of countries have similarly opted for a stand-alone law. They include Cameroon, Equatorial Guinea and Rwanda. But in many, various aspects of reproductive health are covered in a range of health-related bills, and sometimes in the constitutions of countries.

All countries in Africa have laws regulating the termination of pregnancy. Abortion is not permitted for any reason in seven out of 54. The rest permit abortion under certain circumstances ranging from; to save the woman's life, to preserve health, on broad social or economic grounds, and/or on request with variations on gestational age.

What are the main controversies around the current bill?

There are three main points of contention.

The first is termination of pregnancy. Opponents include religious leaders and civil society lobby groups.

There are three lines of argument against it.

The first is the assertion that the constitution of Kenya forbids abortion. This is in fact incorrect. The proposed bill simply reaffirms the legal basis for access to safe abortion, which is already in the Kenya Constitution.

The second area of contention around termination is that those who oppose the bill crudely characterise it as extending the legalisation beyond what's in the constitution.

And finally, opponents also erroneously allege that the bill mandates all medical providers to perform abortions irrespective of their religious beliefs or values. The bill in fact allows for conscientious objection.

The second controversial aspect of the bill is on sexuality education for adolescents. It provides for vocational training, mentorship programmes, spiritual and moral guidance, and counselling on abstinence, consequences of unsafe abortion, HIV and substance use. It also mandates the government to integrate age-appropriate information on reproductive health into the education syllabus.

From the look of it, this aspect of the bill has been watered down. For example, it's more abstinence focused than the earlier version. This flies in the face of research findings that this approach denies adolescents critical information to reduce their risk of unintended pregnancies and sexually transmitted infections.

Third is the controversy over the treatment of infertility. Opponents of the bill are against legalisation of surrogacy and "test-tube" babies, with the argument that it's an unnatural process.

Why have previous attempts to pass such a bill failed?

This is the second attempt in six years to guarantee reproductive rights in law. The first bill was introduced in 2014.

The failure was due to a variety of reasons. These included a lack of public awareness and political will, and misinformation by well-organised and coordinated opposition groups.

Most Kenyans were unaware of the scientific basis for the bill. They were also unaware of the magnitude and cost of unsafe abortion and maternal deaths. Also the case was not persuasively made that access to quality and comprehensive sexual and reproductive health information and services is in everybody's best interests.

This enabled local and foreign opponents to put out arguments not based on evidence. An example of misleading narratives is the claim that comprehensive sexuality education promotes high-risk sexual behaviour. This is contrary to scientific evidence which shows it delays initiation of sexual intercourse and reduces risk-taking, thus decreasing the number of unintended pregnancies and sexually transmitted infections.

Public apathy coupled with misinformation undermined the political will to push the bill through. While there were some politicians willing to champion the cause of women and girls, the vast majority were quick to withdraw their support in the face of the orchestrated public outcry.

Who suffers if the bill is shelved again or is watered down?

We know from evidence in demographic surveys and literature that socially, geographically and economically disadvantaged women and girls have worse reproductive health outcomes. They are least likely to access lifesaving reproductive health services and more likely to have early, unintended pregnancies, unsafe abortions, and die as a result of pregnancy.

Additionally, adolescents continue to suffer disproportionately from poor sexual reproductive health outcomes, as indicated by the high rates of teenage pregnancies and HIV infection.

HIV and pregnancy are the leading causes of deaths among adolescents and young women aged 15-24 years in Kenya. Over half of the 46,000 new HIV infections in 2018 occurred among adolescents and young people. Over 378,397 teenage pregnancies were recorded between July 2016 and June 2017 and 28,932 of these pregnancies occurred among girls aged 10-14.

The perception of adolescents as lacking political power often makes politicians reluctant to act in spite of the obvious need for intervention.

What to do?

Rather than shelving the bill, as recommended by the opposition, the senate must work with reproductive health experts to strengthen the bill in alignment with existing national laws and policies such as the National Adolescent Sexual and Reproductive Health Policy, 2015.

Learning from the previous attempt, it's imperative to improve public engagement and to communicate scientific evidence in a way that people can easily understand.

For love or land – the debate about Kenyan women's rights to matrimonial property

Kenya's Matrimonial Property Act, which is discriminatory towards women and inconsistent with the country's constitution, means few married women own land. Less than five percent of all land title deeds in Kenya are held jointly by women and only one percent of land titles are held by women alone.

By Miriam Gathigah

Inter Press Service (01.06.2020) - <https://bit.ly/2Yh2E8O> - Ida Njeri was a civil servant with access to a Savings and Credit Cooperative Society (SACCO) through her employer, and her husband a private consultant in the information and communication sector, when she began taking low-interest loans from the cooperative so they could buy up land in Ruiru, Central Kenya. She'd willing done it. Part of their long-term plan together for having a family was that they would acquire land and eventually build their dream home. But little did Njeri realise that 12 years and three children later the law would stand against her right to owning the matrimonial property.

"As a private consultant, it was difficult for my husband to join a SACCO. People generally join SACCOs through their employer. This makes it easy to save and take loans because you need three people within your SACCO to guarantee the loan," Njeri tells IPS.

"My husband had a savings bank account so we would combine my loans with his savings. By 2016, I had 45,000 dollars in loans. My husband would tell me the amount of money needed to purchase land and I would take out a loan," she adds, explaining that her husband handled all the purchases.

By 2016 the couple had purchased 14 different pieces of land, each measuring an eighth of an acre. But last year, when the marriage fell apart, Njeri discovered that all their joint land was in her husband's name.

"All along I just assumed that the land was in both our names. I never really thought about it because we were jointly building our family. Even worse, all land payment receipts and sale agreements are also in his name alone," she says.

Worse still, there was little she can do about it within the current framework of the country's laws.

Despite Article 45 (3) of the 2010 Constitution providing for equality during marriage and upon divorce, and despite the fact that Njeri's marriage was registered (effectively granting her a legal basis for land ownership under the Marriage Act 2014) there is another law in the country — the Matrimonial Property Act 2013 — which stands against her.

More specifically, it is Section 7 of the act that states ownership of matrimonial property is dependent on the contributions of each spouse toward its acquisition.

- “Ownership of matrimonial property rests in the spouses according to the contribution of either spouses towards its acquisition, and shall be divided between the spouses if they divorce or their marriage is otherwise dissolved,” Section 7 states.

Because Njeri had no proof of jointly purchasing the land, upon her divorce she is not entitled to it.

Hers is not an isolated case of married women struggling to ensure their land rights.

In 2018, the Kenya Land Alliance (KLA), an advocacy network dedicated to the realisation of constitutional provisions of women’s land rights as a means to eradicate poverty and hunger, and promote gender equality, in line with Sustainable Development Goals (SDGs), released an audit of land ownership after the disaggregation and analysis of approximately one third of the 3.2 million title deeds issued by the government between 2013 and 2017 — the highest number of title deeds issued in any regime.

Odenda Lumumba is a land rights activist and founder of KLA, which is a local partner for Deliver For Good, a global campaign that applies a gender lens to the Sustainable Development Goals (SDGs) and powered by global advocacy organisation Women Deliver. She explains that the data on land ownership is a pointer to the reality that gender disparities remain a concern, especially because of the intricate relationship between land tenure systems, livelihoods and poverty.

“There is very little progress towards women owning land. There are so many obstacles for them to overcome,” Lumumba tells IPS.

- The KLA audit of land ownership found that only 103,043 titles or 10.3 percent of title deeds were issued to women compared to the 865,095 or 86.5 percent that went to men.
- Even greater gender disparities were found in terms of the actual land size. While men own 9,903,304 hectares in titled land, representing 97.76 percent of land, women own 1.67 percent or 10,129,704 hectares of land during this five year period.
- Further, this audit found that men own 75 percent of land title deeds of all allocated land settlement schemes.

In 2018, the Federation of Women Lawyers (FIDA) in Kenya petitioned Kenya’s High Court, arguing that Section 7 of the Matrimonial Property Act was discriminatory towards women and inconsistent and in contravention of Article 45 (3) of the Constitution.

The court dismissed the petition, ruling out a blanket equal sharing of marital property as it would “open the door for a party to get into marriage and walk out of it in the event of divorce with more than they deserve”.

Within this context, less than five percent of all land title deeds in Kenya are held jointly by women and only one percent of land titles are held by women alone who are in turn disadvantaged in the manner in which they use, own, manage and dispose land, says FIDA-Kenya.

But as gender experts are becoming alarmed by the rising numbers of female headed households — 32 percent out of 11 million households based on government estimates — securing women’s land rights is becoming more urgent.

"The Matrimonial Property Act gives women the capacity to register their property but a majority of women do not realise just how important this is. Later, they struggle to access their property because they did not ensure that they were registered as owners," Janet Anyango, legal counsel at FIDA-Kenya's Access to Justice Programme, tells IPS. FIDA-Kenya is a premier women rights organisation that, for 34 years, has offered free legal aid to at least three million women and children. It is also another Deliver For Good/Women Deliver partner organisation in Kenya.

Anyango says that in law "the meaning of 'contribution' was expanded to include non-monetary contributions but it is difficult to quantify contribution in the absence of tangible proof. In the 2016 lawsuit, we took issue with the fact that the law attributes marital liabilities equally but not assets".

- In 2016 FIDA-Kenya sued the office of the Attorney General with regards to act, stating the same issues of discrimination against women.

In addition to the Matrimonial Property Act, laws such as the Law of Succession Act seek to cushion both surviving male and female spouses but are still skewed in favour of men as widows lose their "lifetime interest" in property if the remarry. And where there is no surviving spouse or children, the deceased's father is given priority over the mother.

Women Deliver recognises that globally women and girls have unequal access to land tenure and land rights, creating a negative ripple effect on development and economic progress for all.

"When women have secure land rights, their earnings can increase significantly, improving their abilities to open bank accounts, save money, build credit, and make investments in themselves, their families and communities," Susan Papp, Managing Director of Policy and Advocacy at Women Deliver, tells IPS.

She says that applying a gender lens to access "to resources is crucial to powering progress for and with all during the COVID-19 pandemic, even as the world continues to work towards the SDGs".

And even though marriage services at the Attorney General's office have been suspended due to the COVID-19 pandemic, as have all services at the land registries, women like Njeri will continue to fight for what they rightfully own.

Kenyan cardinal blasts cult advocating female circumcision

Archbishop of Nairobi is concerned that sect is targeting Catholics.

La Croix International (10.03.2020) - <https://bit.ly/3d9gMr6> - Kenya's Cardinal John Njue has warned Catholics in his Archdiocese of Nairobi against the emergence of an outlawed group advocating for outdated cultural practices such as female circumcision.

Archdiocesan investigations have revealed that the group is also advocating for the reinforcing of male chauvinism and the subjugation of women within the Church.

The cardinal, 76, sent a circular letter to all parishes in the archdiocese, saying he's concerned that the group, Gwata Ndaĩ, is coercing Catholics to join it.

The group bears all the characteristics of a cult and the cardinal says it has adversely impacted individuals, families, the Church and society, Daily Nation reported.

Njue's circular letter was read out to Catholics in Kiambu and Nairobi March 8. The sect has its base in Kiambu County as well as areas in Nairobi County.

Female circumcision is common among certain ethnic groups in Kenya, even after a 2011 law made it completely illegal.

UNICEF reports that 21 percent of Kenyan girls and women aged 15 to 49 have undergone female circumcision.

Reasons for its continued practice range from initiating girls to womanhood to making them spiritually pure.

Who cares about Kenyan women?

Authorities remain silent despite rising public outcry on violence against women

By Audrey Wabwire

HRW (17.04.2019) - <https://bit.ly/2v8vBp4> - Kenyan media has recently been awash with reports of gruesome killings of women. So far in 2019, dozens of women have reportedly been killed by their partners. Many others have been gravely injured. On International Women's Day, Kenyan women took to social media and the streets with the hashtag #TotalShutDownKe, demanding that authorities do more to protect them. But instead of being supported, they are being blamed for the crimes against them, and further bullied online.

One of the most prominent cases involves the murder of a 26-year-old university student, Sharon Otieno. Otieno, who was seven months pregnant, is said to have been abducted, raped, and then killed. The personal assistant of a senior politician she was in a relationship with has been arrested for questioning. But instead of mobilizing people to act against the rising scourge of violence against women, her death sparked victim-blaming and a debate narrowly focused on so-called transactional romantic relationships, instead of the terrible crime committed.

But violence continues. Last week, after another university student, Ivy Wangechi, was killed by a man she knew a few days before her 25th birthday, a popular local radio station ran a segment mocking her death. Three days after Ivy's murder, Peninah Wangechi, 30, was rushed to hospital after she was stabbed 17 times by her husband who had repeatedly threatened to kill her. The police are investigating both incidents, but there is little faith that the cases will lead to justice thanks to Kenya's dismal record of punishing these types of crimes.

Violence against women is endemic in Kenya. A recent national health survey found that almost half of Kenyan women aged between 15 – 49 say that they have been beaten, harassed, or raped, often by someone they know.

Kenyan women are overcoming social and other barriers to speak out against this violence.

Shortly before Women's Day, President Uhuru Kenyatta said that he values the contributions that women make to Kenyan society. But one month after the women's

protest, why hasn't he sent a strong message to assure women that their lives matter? Kenya's women cannot wait a day longer for protection – and justice.

Kenya committed to end FGM - CS Sicily Kariuki

By Magdaline Saya

The Star (11.02.2019) - <https://bit.ly/2X5Ym2C> - Kenya remains committed to Africa's common goal of ending FGM, Health CS Sicily Kariuki has said.

The CS spoke on behalf of President Uhuru Kenyatta on Monday in Addis Ababa during the launch of the African Union Initiative on ending FGM. She said Kenya will continue to take relevant measures towards the total elimination of the harmful practice.

The initiative dubbed Saleema Initiative was launched by Burkina Faso President Roch Marc Christian Kabore, who is the African Champion on the elimination of FGM.

"We have also enhanced community involvement through capacity building targeting law enforcement officers and traditional Council of Elders," the CS said.

Kariuki said the government is implementing various policies among them the National Policy on Prevention and Response to Gender-Based Violence, the National Policy on Human Rights and the National Policy for the Abandonment of Female Genital Mutilation.

"The involvement of elders in the fight against FGM has brought on board more men as champions of the rights of girls," she said.

The CS highlighted that the practice has no medical benefit but instead contributes to health complications relating to maternal and infant health.

Kariuki said communities that practice FGM have poor maternal, child and infant health statistics and noted that the majority of women who have been "cut" required medical attention at some time in their lives for problems caused by the procedure.

"Investing in solutions that protect and fulfil girls' sexual health and rights creates a ripple effect that benefits families and communities," she said on behalf of the President.

The CS said female circumcision is also a precursor for child marriages, and to safeguard the rights of children in particular girls, Kenya launched the campaign to end child marriage in 2016.

Schoolgirls in Kenya to face compulsory tests for pregnancy and FGM

Girls in Narok County will be made to reveal identities of babies' fathers and tell police about female genital mutilation

By Rebecca Ratcliffe

The Guardian (04.01.2019) - <https://bit.ly/2saO2YU> - Plans to subject schoolgirls in Kenya to mandatory tests for female genital mutilation and pregnancy are a violation of victims' privacy, campaigners have warned.

All girls returning to school this week in Narok, Kenya, will be examined at local health facilities as part of a countywide crackdown.

Girls found to have undergone FGM, which is illegal, will be required to give a police statement. Those who are pregnant will be asked to identify the man involved, according to George Natembeya, the Narok County commissioner.

Narok County has the highest teenage pregnancy rates in Kenya, while FGM is prevalent among the Maasai community. But campaigners say the tests are humiliating for girls, do not tackle the root causes of teenage pregnancy, and are unlikely to improve prosecution rates for FGM.

“One of the biggest gaps in the prosecution of FGM cases is lack of evidence. It’s not [a lack of] evidence of girls being cut, but evidence of the actual act,” said Felister Gitonga, programme officer of an Equality Now team devoted to ending harmful practices.

Gitonga said that the county’s efforts to tackle FGM were welcome, but added: “We need a different strategy ensuring we respect the girls’ right to privacy and also that we have a clear plan of what we do with the information.

“When we find out that a girl has gone through FGM, what will be the consequences? Will there be psycho-social support? Or does this mean that she will be denied permission to go to school?”

Mandatory examinations risked further victimising girls who have experienced abuse, warned Gitonga.

All forms of FGM were criminalised in Kenya in 2011, as was discrimination against of women who have not undergone the procedure. Failing to report a case to the authorities was also made unlawful, together with aiding the performance of FGM or taking a Kenyan woman abroad to perform the procedure.

The practice is becoming less prevalent across the country, where one in five women and girls aged 15 to 49 have undergone FGM.

Campaigners say tackling FGM is crucial to stopping teenage pregnancies and child marriage. “For girls who have undergone FGM, the community believes that those girls become a woman. Therefore every other violation that happens at that point happens [after] the FGM,” said Gitonga. “If they are having sex even with older men the community does not recognise it as defilement.”

In Narok, four in 10 girls become pregnant as teenagers, according to Kenya’s most recent demographic and health survey, produced in 2014.

Efforts to reduce teen pregnancies will fail unless gender-based violence and poverty are addressed, added Gitonga.

“For girls living in informal settlements, it is very hard; there is a risk of sexual violence. Sometimes they have to do sex work to help with educating their siblings. So you need to understand their situation,” she said. “You can’t just punish people for getting pregnant.”

Kenyan woman jailed for six years for circumcising twin daughters

By Nita Bhalla

AllAfrica.com (23.11.2018) - <https://bit.ly/2QfR4ts> - The mother said she wanted her daughters to undergo female genital mutilation to avoid a curse from her deceased grandfather

A woman in central Kenya was jailed for six years for forcing her 13-year-old twin daughters to undergo female genital mutilation (FGM) in a rare conviction in the east African nation, a charity which helped rescue the girls said on Friday.

Florence Muthoni from Tharaka-Nithi county was arrested on Wednesday after a tip-off from the charity Plan International. She was sentenced by a magistrates court in Chuka on Thursday after admitting to taking her daughters to a circumciser.

A senior aid worker at the charity said Muthoni told the court that she wanted her daughters to undergo FGM to avoid a curse from her deceased grandfather who had instructed all girls in the family undergo the procedure.

"A community member alerted us when they had heard the mother was organising the girls to undergo the cut, so we informed the local authorities," Mercy Chege, a director at Plan International, told the Thomson Reuters Foundation.

"Unfortunately, we were not able to prevent the circumcision as by the time the police conducted the raid and rescued the girls, they had already been cut."

The twin girls are receiving medical treatment and counselling while police are still investigating as the mother had refused to name the circumciser, said Chege.

According to the United Nations, one in five women and girls aged between 15 and 49 in Kenya have undergone FGM, which usually involves the partial or total removal of the genitalia.

In some cases, girls can bleed to death or die from infections. FGM can also cause lifelong conditions such as fistula as well as fatal childbirth complications.

Kenya outlawed the practice in 2011, but it continues as communities believe it is necessary for social acceptance and increasing girls' marriage prospects.

While some arrests have been made and cases brought to court, campaigners say implementation of the law remains a challenge, largely due to a lack of resources and capacity of law enforcement agencies and difficulties reaching remote areas.

U.N. data shows 75 cases of FGM were brought before Kenyan courts in 2016 but only 10 cases resulted in a conviction.

Campaigners said this week's conviction proved that public awareness campaigns run by charities were essential to curbing FGM as they could lead to community members reporting the crime.

"It is very important that FGM laws are properly implemented as this sends a message out that FGM will not be tolerated," said Ann-Marie Wilson, executive director of 28 Too Many.

The U.N. estimates 200 million girls and women worldwide have undergone FGM. It is practised in about 27 African nations, parts of Asia and the Middle East - and is usually carried out by traditional cutters, often with unsterilised knives.

Kenyan religious leaders fight to rescue young girls from child marriage

By Tonny Onyulo

RNS (11.09.2018) - <https://bit.ly/2QqqtX9> - As she sat outside her hut making jewelry to sell to tourists, 9-year-old Sajon Lengupayi pleaded with passers-by to rescue her from an early marriage that she said her parents arranged without her consent.

"It pains me a lot," said Sajon as she broke down in tears. "I want someone to help me move out of this marriage so that I can go back to school."

Sajon's husband "beaded" her when he was 20 and she was 7 years old. He placed traditional beads around her neck, declaring his possession of her, and gave her family a dowry of cattle, goats and sheep.

They were married against her will in early 2017.

Beading in the Samburu tribe of northern Kenya is a form of sexual enslavement in which girls as young as 6 can be claimed by older men. The ritual lets the men — often warriors — engage in sexual intercourse with young girls even when they do not intend to marry them. In some cases, the men and young girls are related.

"The culture prepares these young girls for marriage in the future," said John Lengoros, an elder in the community. "But we do not allow these young girls to get pregnant. In case of pregnancy we advise them to abort because we consider the baby as an outcast, being born as a result of people of the same family sleeping together."

The practice of beading "exposes young girls to physical, mental and sexual violence," according to the Helsinki-based KIOS Foundation, which is working with a local group that assists girls who have been beaded.

In Sajon's case, Lengoros said she was lucky. The man who placed red beads on her neck was from a different family. He then married her. Other young girls are often abandoned by the men who beaded them because they come from the same family.

Sajon is one among thousands of Samburu girls living in the dry heartland of northern Kenya around 350 miles from Nairobi. Many are at risk for beading.

A few miles from Lengupayi's home, Agnes Lempeei, another victim of beading, said a close relative approached her parents in 2016 with red Samburu beads and placed the necklace around her neck.

A few months later, she was pregnant and aborted the baby by taking poisonous herbs. Access to health care and contraception is minimal in the region.

The warrior abandoned her and married a girl from a different family, she said.

"I felt very bad because my parents allowed it to happen," said Agnes, now 13. "My mother built a hut for us where we used to sleep with the warrior. I was not allowed to go back to school, and later the (warrior) went ahead and got another lady, leaving me alone."

Child beading is a major cultural practice found in the Samburu community. But religious leaders are battling to end the practice.

Last month, the Rev. Francis Limo Riwa, a priest of the Diocese of Meru in northern Kenya, rescued a Samburu girl from an early marriage after he negotiated with elders to return the dowry the man had given the girl's parents. The dowry was eight cows and \$500.

The girl, Lilian Nabaru, was married in 2015 to a 50-year-old man. She was 12 years old and became his fourth wife. Though this older man allowed Nabaru to continue with her education, the girl had to spend the school holiday with her husband.

"I didn't know the girl was married," said the bearded priest, who has founded several schools in northern Kenya to help orphans and poor nomadic children access education. Riwa said he confronted the girl's husband and demanded she be released.

Lilian's husband finally agreed to set her free from marriage but demanded his cows and money back. Riwa said the girl would continue with her education. He called on elders to stop the practice of beading and to allow girls to go to school.

"I want to urge the government to sensitize the community on basic rights and elders to allow girls to access education," said Riwa, who said he has rescued hundreds of other beaded girls in the region. "We'll continue to save other girls against this brutal act that denies them basic rights."

Local leaders contacted by Religion News Service had no comment about the plight of Samburu girls. But observers said the politicians in the region are afraid to go against the elders, fearing repercussions at the polls.

"They can't do more about the issue. It's our culture and they embrace it," said Lengoros, the elder. He said local politicians also engaged in beading when they married.

"How can they fight the culture that gave them wives?"

Meanwhile, Sajon is waiting for help. She wants to go back to school and achieve her dream of becoming a teacher. To do that, someone will have to pay back dowry, said elders.

"I can't help myself. I will be disobeying my parents," she said. "But I want to go school and still be a small girl."

How outlawing female genital mutilation in Kenya has driven it underground and led to its medicalization

By Damaris Seleina Parsitau

The Brookings Institution (19.06.2018) - <https://brook.gs/2MqJVQx> - The fight against female genital mutilation/cutting (FGM/C) has been fraught with both success and failure,

resistance and acceptance. Since Kenya banned the practice in 2011, FGM/C is now increasingly conducted underground, secretly in homes or in clinics by healthcare providers and workers.

The medicalization of FGM/C—defined by the World Health Organization (WHO) as any “situation in which FGM/C is practiced by any healthcare provider whether in public or private, clinic or home or elsewhere”—has received recent media and public attention. Earlier this year, a doctor filed a court case asking the Kenyan government to declare the Prohibition of Female Genital Mutilation Act 2011, which outlawed and criminalized FGM/C, unconstitutional. Further, she wanted the Anti-FGM Board, a body created to help eradicate FGM/C and early marriage, also declared unconstitutional.

The doctor, Dr. Tatu Kamau, argues that the dignity of traditional practitioners of female circumcision is disregarded by the law which has failed to stop FGM/C in the country. She claims that FGM/C is still largely practiced in Kenya and is increasing due to medicalization. In Kenya, there is evidence that scrupulous medical personnel collude with parents to circumvent the law by cutting girls in their homes or in their private clinics away from public view.

This trend is evident in both rural and urban Kenya where 15 percent of women and girls have been cut by a medical practitioner. The practice is especially prevalent in Kisii counties in Western Kenya where FGM/C is nearly universal. Drawing on interviews with girls and women who have been cut by health providers, my research shows that parents are increasingly having their girls, some as early as 5 years old, cut by nurses or other healthcare workers either in homes or in health clinics.

Moraa (not her real name), an 18-year-old college girl from Nakuru in the Rift Valley, explained to me how her mother, a primary school teacher, brought a nurse to their home during school holidays to cut her at dawn when she was barely 8 years old. Moraa feels resentful and bitter towards her parents, especially her mother for colluding with a nurse to have her cut without her consent, and has considered suing her parents for violating her rights. Moraa’s story is just one of many cases of medicalized cutting.

The commercialization and medicalization of FGM/C

Throughout my larger research on FGM/C and early marriage, I came across many stories of medicalization of FGM/C both in rural and urban areas in Kenya. A nurse I spoke with told me that she carries out the cut for money. “Look,” she said, “when parents call me to perform the cut on their girls, both in urban and rural areas or even in my clinic, I respond because they pay me handsomely. Some even pay for my bus fare and accommodation; I travel widely to cut girls and women. I see no reason why I shouldn’t do this. I have not forced anyone to undergo the cut. I simply provide my services to those who need them.”

Medical professionals who perform cutting services claim that they are fulfilling the demands of communities and that they help enhance women’s values and marriageability in communities that do not want to abandon the practice. They believe that by doing so they respect patients’ cultural rights since some are of a mature legal age.

However, the real reason driving this is its economic value. Medical professionals are cutting girls and women for payment, replacing the traditional cutters in rural villages. Additionally, the commercialization of FGM/C helps parents and guardians to avert the law and authorities. The medicalization of FGM/C not only provides legitimacy to the cut but it continues to put millions of girls at risk from the consequences of the cut. It also continues to perpetuate and give tacit approval of the harmful practice by discouraging

changed behavior and attitudes, thereby leading to the normalization of the cut in medical spaces.

While the medicalization of FGM/C is not a new phenomenon, its growing popularity is worrying and points to emerging shifts and tensions in the war to end it—a cat and mouse game between resistant communities and authorities. And while the medicalization of FGM/C went under the radar as authorities and stakeholders focused on traditional cutters in rural villages as well as alternative rites of passage, it is now emerging as a new frontier in the war against the harmful practice. Global, regional, and local focus should now shift away from traditional cutters to medical practitioners.

Poverty drives some Kenyans to rent out their wives

Poverty and unpredictable tourism industry forcing men on the east coast to send spouses into prostitution.

By Osman Mohamed Osman

Al Jazeera (28.03.2018) - <https://bit.ly/2umTEDa> - It's a cloudy Sunday morning in Kenya's Kwale county and Sande Ramadan just woke up to get ready for another weekend of work.

Wearing a green vest and khaki shorts, he washes his face and proceeds to the living room where his wife Janet Wambui serves him breakfast.

"Thanks for waking me up, I hate being late for my client," the dreadlocked father of three tells his wife. "She asked me to be with her until next weekend," he adds as he sips black tea.

Ramadan is a male sex worker.

Wambui, his tall dark-skinned wife, works in the same industry. She came back home two nights ago after spending 10 days with a German tourist in an expensive cottage house, a few kilometres from Maweni village where the couple resides.

Ramadan and Wambui have been married for 20 years now.

But it wasn't always like this. One day in 2006, Ramadan was hawking clothes to tourists along Diani Beach in Kwale town, 30km southwest of Mombasa, when a German tourist approached him. He wanted a lady to spend some time with until his holiday ended.

The 37-year-old, who speaks fluent German and teaches his wife the language, promised the man he would introduce him to his sister.

"My husband came home that evening and asked me if I can act as his sister and take up the offer. After a few days of deliberation, I agreed," says Wambui, 38, sitting near Ramadan while tightening her black turban.

Wambui saw how life changed for other women who entered prostitution. She was a housewife who depended on Ramadan's income, which was too little.

"Life was tough for us. My husband's unpredictable income was not enough and when he asked me to accept, I had no choice," she says.

The family can now afford three meals a day and the children's school fees.

In Kenya's coastal towns, such stories are not new, especially in poor neighbourhoods such as Maweni. Husbands agree to rent their wives to rich tourists, mostly from Europe, without them knowing the women are their spouses.

"Why would I make another woman rich while I have a wife at home?" Ramadan said. "This was an opportunity for us to make some cash to pay our bills."

Tourism reliance

The East African country received more than one million tourists in 2016, according to the Kenya Tourism Board, a government corporation. This number translated into \$100m earned in taxes, making Kenya one of the top tourism destinations in Africa.

In 2017, TripAdvisor, the world's largest travel website, ranked Kenya's Diani Beach in Kwale, where Ramadan and Wambui live, the seventh-best beach in Africa.

But all these accolades do not translate into success in the villages where locals survive solely on tourism.

Ramadan Juma, 43, has been a beach operator for more than 20 years. It's a sunny Saturday afternoon and Juma is at Diani reflecting on existence with his colleagues.

"Life is becoming difficult by the day," he said, wearing his black sunglasses to fend off the glaring sunlight.

On a good day, he earns about \$40 by helping out tourists navigate the blue waters of Indian Ocean. But nowadays, he complains the situation has become desperate.

"We have been neglected. We depend on tourism as a source of living. Since most of us do not have a constant income, my colleagues go to the extreme and give away their wives to have a good living," said Juma, who also chairs the Diani Beach Boys Association.

Kwale County's chief tourism officer Anthony Mwamunga says the local government is training beach vendors and guides to gain skills to help them earn a decent living. He adds there's not much that can be done about prostitution.

"These cases are from poor men and women who have nothing to do," Mwamunga told Al Jazeera. "Tourists come here to have a good adventure and having a partner is part of it. This makes it hard for us to stop these cases."

Back at the spectacular white-sand beaches on the Indian Ocean, Tobias Juma, 42, woke up one day to find his wife had packed up and left him.

In 2012, he was working for an Austrian man who asked Tobias to hook him up with a lady.

"That is how I connected my wife to the Austrian man. All I wanted is my family to have a better life. But they fell in love along the way and they agreed to move to Europe," he said.

Before she left, Tobias' wife was providing for him and their daughter.

"She was our family's breadwinner. She would bring an average of \$400 every month for my daughter and me after staying with the Austrian tourist. I have been struggling since she left," he said.

Tobias hasn't heard from his wife since, and now takes care of his daughter on his own.

Dangerous risks

Communities along the Kenyan coast have seen a dramatic increase in HIV cases annually.

The National Aids Control Council estimates that Kenya's coastal counties reported 5,335 new HIV/AIDS cases in 2016, surging from 325 reported in 2014.

Faith Mwende is the Kenya advocacy manager for AIDS Healthcare Foundation, a global non-profit creating awareness about HIV prevention.

"The danger is when such women engage with more than one sexual partner, the chances of getting sexually transmitted diseases and infections are very high, especially when she doesn't know the status of the other person," Mwende said.

Despite these dangers, Ramadan and Wambui are not about to give up on the sex trade. The rent for their house is about \$80 a month, and they have three children to feed and educate.

"I am doing this to have a better life. It sounds immoral, but my husband is aware and supports it. So why not?" Wambui said as she bid Ramadan goodbye.

Trivializing sexual abuse is not entertainment

Media should champion an end to widespread violence against women

By Agnes Odhiambo

Human Rights Watch (22.11.2016) - <http://bit.ly/2f0g8Y0> - "You are so beautiful; everybody wants to rape Pasis.""

Those words, directed by a man at his female political rival on a popular, national TV show, have deeply shocked Kenyans and renewed the debate here about the treatment of women in the country.

The comments – made by Miguna Miguna, a former aide to opposition leader Raila Odinga who plans to run for governor of Nairobi next year – were directed at a fellow guest Esther Pasis, who is also eyeing the same seat.

Miguna also made disparaging comments about Pasis's looks, and openly mocked her. "A woman who has absolutely no integrity. A socialite bimbo whose only claim to fame is because she is looking for billionaire sponsors [sugar daddies]."

Jeff Koinange, a former CNN correspondent, hosts the show, which has been criticized by Kenyans for tolerating misogynist and hateful talk.

The heated exchanges between Miguna and Pasis may have deeper roots. Miguna has come out to say Pasis had earlier on called him a rapist during a commercial break,

according to media reports. But for Kenyans who watched and listened to his remarks, the background narratives are not important. They find his remarks deeply offensive. Many took to social media to express their anger and repulsion.

Women in Kenya face widespread violence. According to the 2014 Kenya Demographic and Health Survey, 45 percent of women ages 15 to 49 have experienced physical violence, and 14 percent have experienced sexual violence. The same survey shows high rates of acceptance of wife beating in Kenya among both men and women.

The media has a role to play in combatting gender stereotypes that discriminate against women and promote respect for women.

It is outrageous that Miguna, who aspires to be a political leader who will bear responsibility for addressing violence against women, would publicly joke about the rape of the woman running against him. It is also outrageous that he was able to do so on air without being challenged by the show's host. His comments reinforce a culture of misogyny and abuse often directed toward female candidates.

Kenya is set to hold general elections next August. The government should take all necessary measures to ensure that women can participate freely as voters and aspirants, free from violence and intimidation. Miguna owes Kenyans an apology. A stronger response from the government condemning intimidation of women political aspirants is needed.