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EMPOWERING GIRLS THROUGH CREDO PROGRAM

Preventing Female Genital Mutilation in Kenya

ABSTRACT

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Empowering Girls through Credo Program – Preventing Female Genital Mutilation in Kenya

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Female Genital Mutilation (FGM) is a global health concern as a form of gender-based violence and a violation of human rights. United Nation's Sustainable Development Goal 5.3 focuses on eliminating all harmful practices towards girls and women, such as FGM and childhood marriages, and empowering girls and women at all levels. FGM has no health benefits, yet three million girls are at risk of being genitally mutilated each year. Among the Maasai and Pokot in Kenya, FGM is still traditionally practiced as a rite of passage into adulthood. Credo program was established by the Evangelical Lutheran Church in Kenya and the Lutheran Evangelical Association of Finland to help Kenyan girls by upholding their human rights in the prevention of FGM and childhood marriages. With the program's help the girls are given a chance to continue their education.

This study was done in collaboration with working life partner Credo program. The objective of the study was to gain insight into the experiences of the Kenyan girls about Credo program in relation to their health, well-being and future perspectives. The aim was on the multidimensional and holistic health and well-being needs of girls, and the possibilities that being well can bring to one's future. The sample consisted of eight girls from Credo program. Qualitative semi-structured interviews and art-based research were conducted to collect the data, and the data was analyzed with content analysis.

The findings indicate that according to the Kenyan girls' experiences, poverty, low educational level of their parents in the rural villages, and social expectations were risk factors leading to the threat of FGM and childhood marriages. Credo program improved the health and well-being of the girls by supporting their personal development, as well as spiritual and social life, leading to increased contentment and happiness in life. Education was important for the girls to achieve a better future. Education was also significant in improving the possibilities for the girls to be accepted as mature, respected and productive members in their community, and act as positive agents towards ending FGM.

The findings suggest that underlying and multidimensional factors including economic, social and cultural aspects matter and affect the overall health and well-being needs of girls. These factors are important to keep in mind when trying to help girls comprehensively to achieve their subjective good quality life. Furthermore, girls at risk of undergoing FGM need holistic support; physical, psychological, social and spiritual in order to be able to be well in their lives, to have the possibilities to achieve their goals, and reach their full potential in the society. Interventions focused on educating girls can be used to empower girls, but education also has an important role in the elimination of FGM.

Keywords: Female genital mutilation, Health, Well-being, Education, Kenyan girls, Credo program, Qualitative research

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1 INTRODUCTION

Global health focuses on improving the health of all people worldwide. Health and well-being are multidimensional and holistic concepts, where the determinants of health can impact individuals' health outcomes. Interdisciplinary understanding and action is needed when working towards ensuring health equity for everyone globally. This can be seen in the United Nation's (UN) Sustainable Development Goals (SDGs). (Sethia, Kumar, & Abdalla, 2018.) Goal number five of the SDGs for year 2030 "is achieve gender equality and empower all women and girls" (UN, n.d.). It is estimated that 200 million women and girls have been genitally mutilated. One of the goals for year 2030 is to end all harmful practices toward girls and women such as female genital mutilation (FGM) and child marriages, and empower girls and women at all levels. (UN, n.d.)

FGM is a harmful practice that still exists in thirty different countries globally. FGM may lead to severe complications and has no perceived health benefits, despite this, three million girls are at risk of undergoing FGM yearly. Some of the physical complications of FGM may include pain, bleeding, infections, and different kinds of urinal and vaginal problems. The psychological effects of FGM can be long-term and include low self-esteem, depression, anxiety and post-traumatic stress disorder. The harmful practice can be seen as a violation of human rights against girls and women. (World Health Organization, 2018.)

Kenya is one of the countries in Africa where FGM is still being practised. It is estimated that 21% of females between the ages of 15 and 49 have undergone FGM in Kenya. The prevalence varies within different ethnic groups and regions within the country. Among the Maasai, it is estimated that the prevalence of FGM is still high, about 78%. Among the Pokot, who are part of the Kalenjin ethnic group, the prevalence is about 28%. FGM is performed as a way to uphold traditional beliefs and social norms, and some of the reasons behind it are readiness to marry, social acceptance, religious reasons as well as perceived beauty. (UNICEF, n.d.) According to the Kenya Demographic and Health Survey (KDHS, 2014) about 92% of girls and women think that FGM should not continue in the future.

Credo is a program that sponsors Kenyan girls who have run away from their homes in fear of FGM and childhood marriages. It is maintained by the Evangelical Lutheran Church in Kenya (ELCK), but most of the funding comes from the Lutheran Evangelical Association of Finland (LEAF). Sponsors from Finland, found through LEAF, can give funds and act as godmothers and godfathers for the girls. The program aids the girls by upholding their rights in the prevention of FGM, and ensures they have a chance to continue their education and study until profession. Credo program also offers support, guidance and spiritual care to the girls. (ELCK, 2020.)

This study was done in collaboration with Credo program. The objective of this study is to understand the experiences of the Kenyan girls about Credo program in relation to their health, well-being and future perspectives. Qualitative research was conducted in Kenya to gather data in order to understand the girls' experiences from their social context. The focus is on the multidimensional and holistic health and well-being needs of girls, and the possibilities that being well can bring to one's future. The information can be used further in supporting and empowering girls at risk of undergoing FGM. The information can also be meaningful for the work of Credo program and involved stakeholders.

2 GLOBAL HEALTH

Global health can be defined as “an area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide” (Koplan et al., 2009). Health can be globally viewed as a human right that everyone should have access to. There are underlying factors that affect the overall well-being of communities, such as economics, social, behavioural and environmental factors. Therefore, a multidimensional and multidisciplinary approach is important when working towards the goal of global health. (Sethia et al., 2018.)

2.1 Health as a Human Right

According to World Health Organization (WHO), “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, n.d.). Naidoo and Wills (2016) define health holistically taking into consideration different dimensions that interact and affect the overall health of individuals. These six dimensions include physical, mental, emotional, social, spiritual and sexual health. Additionally there are broader societal, environmental and global dimensions or determinants that also affect the holistic health of individuals. These include factors such as income, shelter, sanitation, water, food, and peace which are needed to achieve and maintain good health. (Naidoo & Wills, 2016; WHO, 2017.)

Furthermore, health is a fundamental human right, and everyone should have the possibility to a high standard of health, despite factors such as race, religion, age, or economic and social conditions (WHO, n.d.). To view health as a human right comes from an understanding of these determinants of health, also including having access to education and health information, as well as gender equality (WHO, 2017). The figure below illustrates the relationship between health and human rights affected by physical and sociocultural conditions (Sethia et al., 2018).

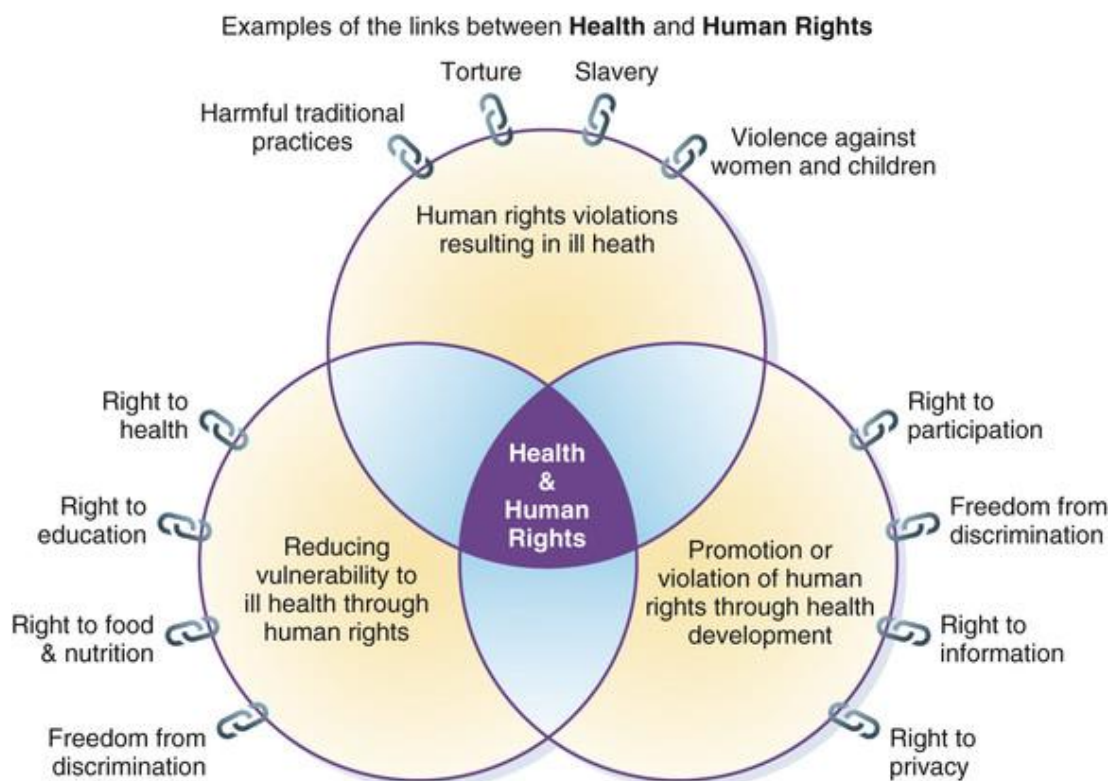


FIGURE 1. Links between health and human rights (Sethia, Kumar & Abdalla, 2018, p. 133)

Individuals cannot always control the determinants of health, for example the conditions or circumstances they are born into, and have to grow and live in. Additionally, the determinants of health can positively or negatively affect the health of individuals and communities. For example, the socioeconomic status of individuals is affected by factors such as education and income. More years of schooling and success in school are positively linked to health but also social status and occupation. On the other hand, children coming from low socioeconomic backgrounds are at risk of being less educated or having no access to education at all. In light of gender, especially girls who have been educated get married later and have less children, but also have improved decision-making possibilities in social and economic situations. Furthermore, the children of educated girls are also more likely to have access to education themselves. (Sethia et al., 2018.)

Overall, education can be seen as one of the strongest determinants of health. Access to education as a determinant of health can improve the health of individuals. Education can positively affect health choices and behaviours of individuals, as well as support social relationships, overall community well-being and bring changes to

inequalities. Education can also give opportunities to individuals to make informed decisions that have an effect of their health either directly or indirectly. (Sethia et al., 2018.) Finally, health as a human right also includes freedom, for example the freedom to make decisions concerning one's body, as well as sexual and reproductive rights. (WHO, 2017.) A part of reproductive health is a voluntary choice to get married and start a family, but also family planning in being able to decide the number and spacing of children. In order to understand health holistically, health has to also be viewed in light of cultural and religious behaviours, which are also linked to overall well-being of individuals and communities. (Sethia et al, 2018.)

2.2 Well-being as a Multidimensional Concept

“Well-being is the positive feeling that accompanies lack of ill health and illness, and is associated with the achievement of personal goals and a sense of being well and feeling good” (Naidoo & Wills, 2016, p. 3). Well-being is important for the positive benefits it brings to individuals and communities, like resilience, progressive relationships, and better health and health related behaviours. Improving the well-being of communities can be connected to an overall better quality of life, as well as higher education, occupation and economic outcomes. (Heginbotham & Newbigging, 2013.)

Well-being is also important for insight about how people perceive their own communities, but also to understand the possibilities for individuals to function well, and feel good or positive about life. In well-being factors such as self-acceptance, personal growth, purpose in life, situational competence, autonomy and relationships with others are important and significant. Well-being should also be viewed multidimensionally, taking into consideration factors such as income, gender, age, social status, culture and religion. (Heginbotham & Newbigging, 2013; Schmidt & Leonardi, 2020.)

According to Heginbotham & Newbigging (2013), well-being can be described through five areas of psychological, emotional, social and familial, subjective and economic well-being. Psychological well-being refers to having contentment and satisfaction in life. This can be achieved by gaining control, being able to function positively, and self-actualisation or feeling of achieving something. Peace, happiness, purpose,

and meaning in life are also essential to take into consideration in psychological well-being, as well as spirituality.

Spirituality has been linked to have a positive correlation with well-being. Spirituality can be defined as “meaning in life, inner peace and harmony, feelings of hopefulness, or having transcended experiences” (Schmidt & Leonardi, 2020, p. 19). Culture affects the way individuals perceive their own spirituality, but globally an important part of spirituality in light of personal well-being is understanding faith, but also interconnections with other individuals, and/or spiritual entities. Furthermore, the social support from religious or spiritual communities can be meaningful and important for individuals. A part of spirituality is also taking care of others, and virtues like kindness, forgiveness, generosity, and loving your neighbours. (Teinonen, 2007.)

According to Teinonen (2007) religion and spirituality can improve the well-being of individuals in the following ways. Spirituality can decrease fear and anxiety, and provide support, peace, courage and hope for individuals. Faith can give hope and make people feel whole. Viewing life through faith can give meaning to individual’s both negative and positive experience and is connected to finding meaning in life. For example, spirituality has been connected with positive emotions, like happiness and thankfulness, which can in turn decrease everyday life stress. However, challenges in life, like financial insecurity, poor health or losing a loved one, can also be faced better from a spiritual worldview.

Emotional well-being refers to having positive self-esteem and self-respect, to be able to cope and manage with the challenges of everyday life. This includes acknowledging one’s emotions and being able to use them in a positive way. In social and familial well-being positive relationships are formed with other people including the family but also the society at large. The feeling of social cohesion and interdependence are important. Having good relationships within the family includes also being able to grow, and have a chance for education with needed support from the family. (Heginbotham & Newbigging, 2013.)

Subjective well-being can be understood in personal experiences people have about their life satisfaction, contentment and quality of life. This also includes positive emotions and feeling safe and secure. Economic well-being includes necessary resources

such as food, shelter and clean water, which are basic needs for acceptable life. In the figure below these areas of well-being are reflected with Maslow's hierarchy of needs. (Heginbotham & Newbigging, 2013.)

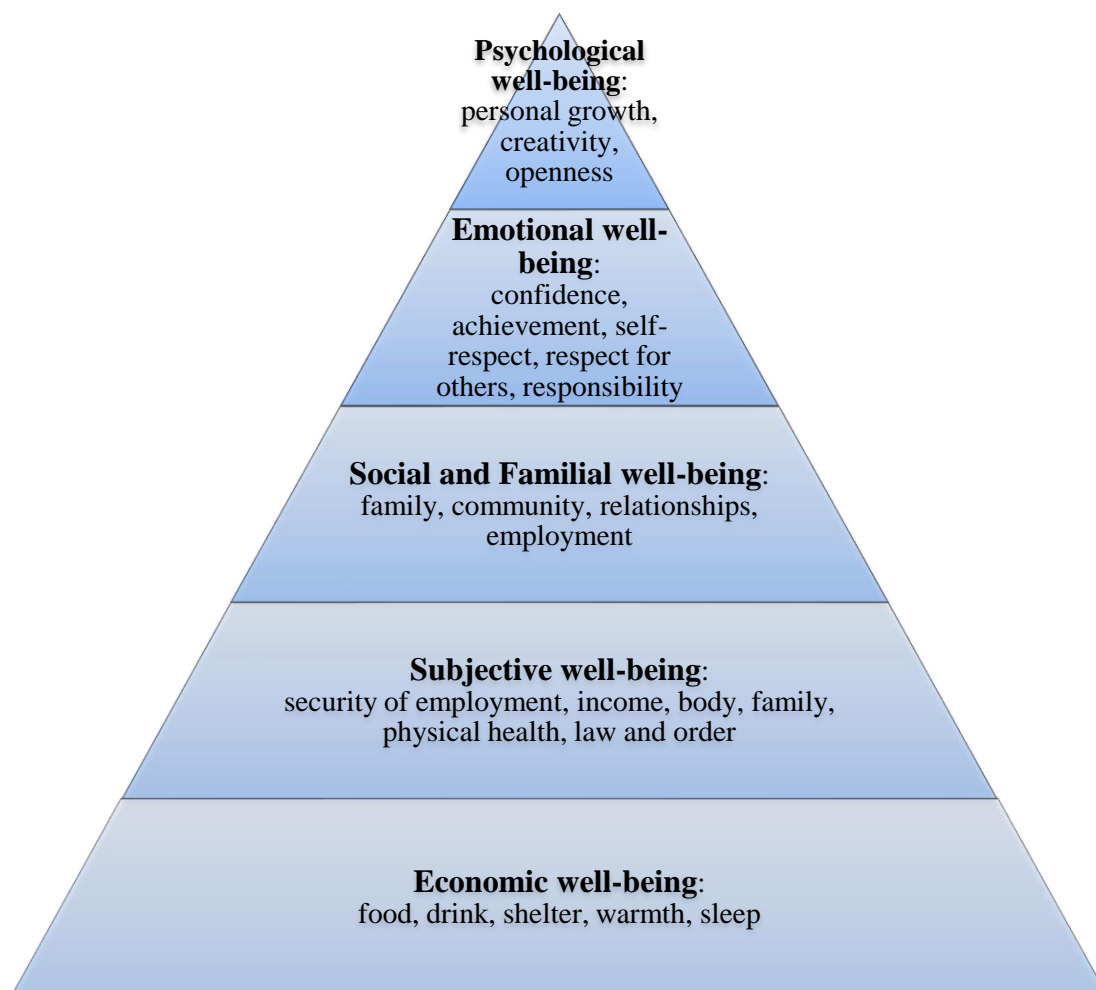


FIGURE 2. Maslow's hierarchy of need reflecting on well-being (Heginbotham & Newbigging, 2013, p. 37)

In summary, approaching well-being holistically and multidimensionally includes understanding of social, cultural, community, religious, economic and environmental factors, which all influence and interact affecting the overall well-being of individuals. The basic needs of individuals have to be met in order for them to be well. This can enable individuals in term to achieve their hopes and dreams, and to be able to function positively in their own lives, but also in the community at large. Therefore, comprehensive resources are needed to improve the health and well-being of individuals, keeping in mind factors such as inequalities, discrimination, based for example on gender or ethnicity, and lack of social justice. (Heginbotham & Newbigging, 2013.)

2.3 Sustainable Development Goal Number Five

United Nation's Sustainable Development Goals for year 2030 are closely linked to global health and improving the lives and prospects of every individual globally. Goal number five is to "achieve gender equality and empower all women and girls" (UN, n.d.). Target 5.3 focuses specifically on ending all harmful practices towards girls and women, such as FGM and forced childhood marriages, and empowering girls and women at all levels. When gender equality is viewed as a fundamental human right, legal, social and economic barriers to girls' and women's empowerment should be removed, so that every girl and woman can achieve their full potential. (UN, n.d.)

According to the UNFPA-UNICEF (2019) Joint Programme on the Elimination of FGM, empowering girls and women to act as agents of change and lead the change is important in the elimination of FGM. In the context of ending child marriages and empowering adolescent girls, empowerment can be defined as:

the process by which those who have been denied the ability to make strategic life choices acquire such an ability. This implies having material, social and human resources to make strategic choices, and the ability to exercise agency, participation, voice and negotiation in decision-making, in order to gain achievements or meaningful improvements in life and well-being (UNFPA & UNICEF, 2020, p. 1).

Furthermore, empowerment can be defined as gaining power or control over one's life, including both consciousness and collective action. Power relations are changed to allow individuals to have power or control over their own lives. Empowerment is a process or a journey, not something that can be bestowed by others, but coming from within. To consciously understand one's abilities, build confidence and expand the possibilities for one's life and gain control. For girls' and women's empowerment it is important to understand the structural framework of gender inequalities, and the context or situations where females are born into and live in, where they may face discrimination, oppression or injustice, but also political and economic environments. (Cornwall & Edwards, 2014.)

One of the central means to empower girls and women according to UNFPA is education. Already globally recognized in 1994 and currently in the SDGs, quality education is an important factor for improving the lives of girls and women. Knowledge, skills

and self-confidence can be gained by education to improve girls' and women's health, but also social, economic and political conditions. For women to be empowered it is important to secure factors such as equal access to all levels of education, women's livelihoods and possibilities to participate in public life, but also autonomy regarding women's sexual and reproductive health. (UNFPA, 1994.)

Empowerment can also be beneficial to the overall health and well-being of individuals. Control over one's life, increased awareness, self-confidence, making informed decisions, and being able to participate can improve individuals' health and well-being outcomes. (Naidoo & Wills, 2016.) Additionally, girls' and women's empowerment can further influence sexual, reproductive and health choices individuals make (WHO, 2008).

3 FEMALE GENITAL MUTILATION

FGM includes all procedures that involve the removal of external female genitalia for non-medical reasons. FGM has no health benefits. It reflects on inequality of girls and women, and can be seen as one form of gender-based violence (GBV) and a violation of human rights. FGM is still found in thirty countries in Africa, Middle-East and Asia, and is usually done between the ages of infancy and fifteen years of age. Some of the complications include pain, bleeding, infections, urinary problems, sexual problems, obstetric problems, and of course psychological problems. Cultural reasons and social factors are some of the reasons behind the continuation of FGM. (WHO, 2018.) Understanding these underlying factors is essential when working towards eliminating FGM globally (WHO, 2008).

3.1 FGM as a Human Rights Violation

FGM can be classified into four different types. Clitoridectomy refers to the removal of the clitoris or a small part of it. Excision refers to the removal of the clitoris as well as the removal of labia minora and sometimes labia majora. In infibulation the opening of the vagina is covered by a seal formed from the labia minora and labia majora often by stitching. The fourth type of FGM refers to pricking, piercing and any other harmful procedures done to the female genitalia. (WHO, 2018.)

FGM is a harmful practice and can initially cause massive bleeding, pain, infections, urinary problems, shock or even death. Over time some of the complications of FGM include scarring, and menstrual and sexual problems, such as pain and decreased sexual satisfaction. There are also dangers for childbirth in difficult and prolonged deliveries, tearing, and even risk of new-born deaths. The psychological problems of FGM can also be extensive, and many individuals experience some level of post-traumatic stress syndrome. Anger, depression, flashbacks, low self-esteem, anxiety and psycho-sexual problems are some other psychological impacts. (Burrage, 2015; WHO, 2018.)

The reasons behind the continuation of FGM are connected to social factors and behaviours, as well as culture. FGM can be seen as a social norm, this means there is

social pressure to undergo FGM in order to be accepted and respected in the society, and to prepare girls into marriage and adulthood. FGM has been connected to cultural views of beauty and cleanliness for girls and women, and a way to control female sexuality: to ensure virginity, purity and fidelity. In countries where FGM is still practiced, it is often accepted as a cultural tradition passed on for generations. Additionally, FGM has also been linked to religion, and in practice religion has been used to both continue and impede the practice. (WHO, 2018.)

Globally FGM is acknowledged as a form of GBV, because it is deeply rooted in gender inequalities and discriminates against girls and women. It is as harmful practice, and alongside forced and early child marriages can be seen as a form of violence against girls and women. FGM as a form of GBV not only inflicts harm, but brings challenges when FGM is accepted as a social norm: a way to social acceptance, inclusion of girls in the society, and a way to avoid stigma. Girls and women themselves are subjected to FGM as a form of violence, but it is important to understand that sometimes women themselves are the ones who perform FGM on younger girls and/or are a part of continuation of the practice. (UN Women, UNFPA & UNICEF, 2017.)

In 1990s the Committee on the Elimination of Discrimination against Women (CEDAW) globally recognized FGM as a violation of human rights (UNFPA, 2014). Because of the harmful and severe physical and psychological consequences FGM can lead to, it can be seen as a violation to girls' and women's right to achieve the highest possible standard of individual health. Some other human rights that FGM can be seen to violate are the rights of a child, principles relating to gender equality, right to security and physical integrity, the right to freedom from cruel or degrading treatment and the right to life. For example, FGM is a form of gender discrimination because it controls women's sexuality. It violates the rights of a child because it is usually performed on girls under 15 years of age. Additionally, FGM violates the physical integrity of girls to make choices concerning their own bodies before they are mature and can give meaningful consent. (WHO, 2008; UNFPA 2014.)

Furthermore, even if a girl seemingly makes the decision or accepts to undergo FGM, it cannot be seen as free or informed choice that is free of coercion, because of the direct connection to the underlying issues behind the practice. These include factors such as social expectations and norms, the feeling of acceptance as a full member of

the community, and social pressure. Finally, it cannot be argued that the benefits of the procedure can outweigh the risks, because FGM can result in death, and is such a risk to life. (WHO, 2008.)

3.2 FGM in Kenya

In Africa, FGM still exist because of multiple underlying reasons on individual, interpersonal, organisational, communal and societal levels. There are no health benefits of FGM, and no evidence showing that any of the three main religions associated with FGM; Christianity, Islam or Judaism, recommend FGM in their Holy Scriptures. (Schmöker & Nkulu Kalengayi, 2015.) A study from Sub-Saharan Africa shows that girls and women living in rural villages, who have less exposure to media are more likely to undergo FGM. Likewise girls coming from poor wealth quintiles, who are less educated, and whose parents have a lower educational backgrounds are at a higher risk to undergo FGM. (Ahinkorah et al., 2020.)

The map below shows the prevalence of FGM in Africa based on available data from Demographic and Health Surveys, National Surveys, Multiple Indicator Cluster Surveys and UNICEF databases from 2004 – 2020.

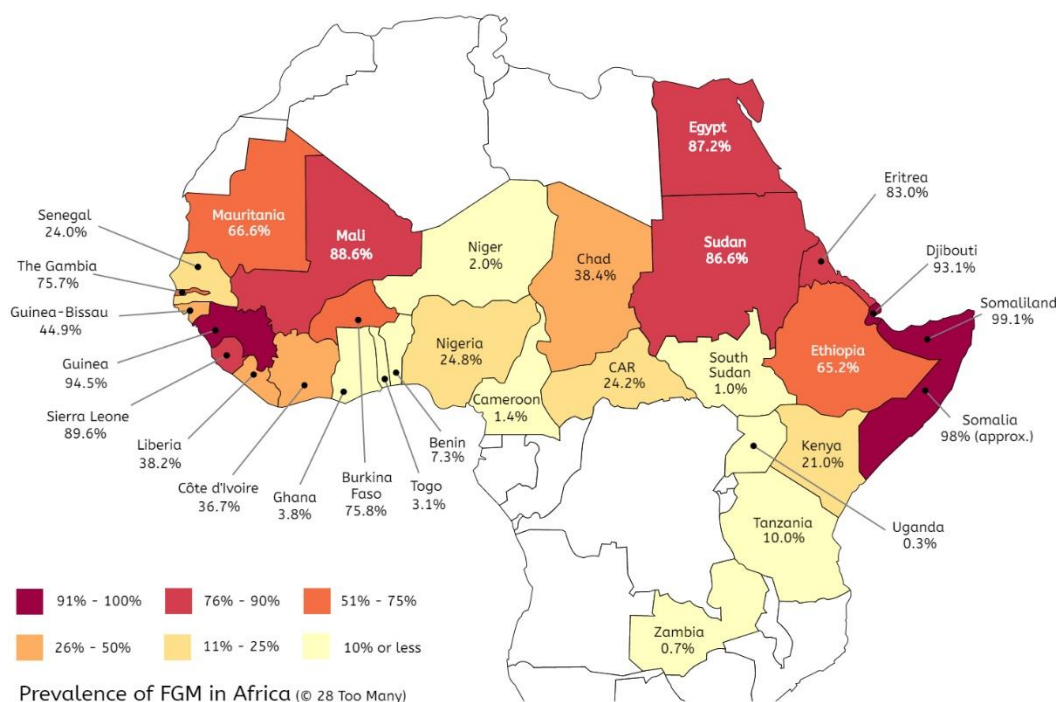


FIGURE 3. Prevalence of FGM in Africa (28 Too Many, n.d.)

Women in Guinea, Mali, Sierra Leone and Egypt, where the prevalence of FGM is still high in Africa, commonly think that FGM is socially acceptable, and is culturally and religiously necessary. Better economic status and higher education are seen to be two factors significant in decreasing rates of FGM in these countries. The subject can sometimes be sensitive, and legislations aimed toward its elimination should also incorporate raising awareness of the matter with young girls and women, as well as sufficient education. (Dalal, Lee, Ussatayeva & Gifford 2015.)

Kenya is one of the countries in Africa where FGM is still being practiced traditionally. Kenya is located along the equator in eastern Africa. The population of Kenya is ethnically diverse, and there are 42 different recognised ethnic groups. About 73% of the population live in rural areas of the country. Especially in these rural areas of Kenya, the family unit typically consists of the extended family, where the nuclear family is extended to include relatives such as grandparents, aunts and uncles. In the communal society, raising children is a shared responsibility and children are expected to obey and honour their parents and elders. Additionally, the elderly are also greatly respected within the society. (Cultural Atlas, n.d.)

Gender roles and responsibilities are also traditionally well-defined in Kenya. The man is expected to support the family financially, and is head of the household. (Cultural Atlas, n.d.) Women are seen to be as secondary to men. Especially in rural areas of Kenya, women still take responsibility for all household chores and take care of the children. Traditional practices and social norms also marginalize the rights of women. For example, men are generally the land owners in the families, and women rarely inherit property from their parents or husband. (World Trade Press, 2010.)

Additionally, the coming of age initiations are traditionally celebrated among some Kenyan ethnic groups by circumcision among both genders. Especially in rural areas of Kenya, FGM is still accepted as a social norm and is deeply rooted in gender inequality. Gender inequalities are often seen in this unequal distribution of power between women and men, in patriarchal communities, as well as in social norms that are seen in different countries and communities in the world. (UN WOMEN, UNFPA & UNICEF, 2017; UNFPA, 2017a.) Living in a country where gender inequalities are still clearly visible, brings challenges for girls and women to fight against FGM and make informed decisions concerning their own bodies. Additionally, girls who refuse

to undergo FGM are at risk of stigma, harassment, and even condemnation. (UNFPA, 2017a; UNFPA, 2017b.)

Even though the Kenyan government banned FGM in 2001, it is estimated that 21% of girls and women between the ages of 15 and 49 have undergone FGM (Burrage, 2015; KDHS, 2014; Muchene, Mageto, & Cheptum, 2018). From these, 87% have been cut with removing flesh, and 9% have undergone infibulation (KDHS, 2014). In a study published in 2014, 10.3% of women encouraged the continuation of FGM in Kenya. Most of these women had been cut themselves. (Achia, 2014.) In Kenya, especially uneducated women coming from the lowest wealth quintiles are more likely to believe that circumcision is required because of religious reasons and/or community reasons (KDHS, 2014).

Among some communities in Kenya, FGM is still performed as a way to uphold traditional beliefs and social norms (Schmöker & Nkulu Kalengayi, 2015). This is the case among the Maasai and the Pokot. The Maasai live along the Great Rift Valley in Kenya and Tanzania. They are semi-nomadic people who make a living by herding livestock. In the Maasai culture, polygamy is acceptable, children are seen as a gift, and families with many children are seen to be prosperous. (World Trade Press, 2010.) Traditionally rites of passage mark the important stages of life. Circumcision for both boys and girls marks an important milestone and elevates youngsters from childhood to adulthood, and it is usually performed after puberty. (Maasai association, n.d.) According to the KDHS (2014), 59.5% of Maasai girls are circumcised between the ages of 10 and 14, and 26.9% of the girls circumcised when they are over 15 years of age.

The FGM prevalence among Maasai women is still high, about 78%. In a study done among Maasai women in Kajiado, most of the girls and women between the ages of 14 and 20 were already married, and there is also a high prevalence of FGM among teenage Maasai mothers. (Muchene et al., 2018.) Additionally, FGM is also strongly linked to early childhood marriages within the Maasai community. Traditionally girls are circumcised before getting married, and drop out of school after the circumcision. Following this, the girls are soon married, and for some families this is seen as an economic motivation for girls to undergo FGM in order to get the dowry, which is paid to the girl's family. (Muhula et al., 2021.)

Concurring with this, in another study done among the Maasai in Kenya, FGM and early marriages hindered the opportunities for girls to participate in education. As the expectation for girls is to get married after FGM, parents do not see the importance of educating their daughters. As the daughters will be taken away from their family when they are married, the parents favour educating their sons instead. Especially families in the lower wealth quintiles, and parents who were not educated, did not have positive views on the importance of education for girls. (Mwaiko, 2017.)

Likewise to the Maasai, in Pokot communities of Kenya, FGM is still traditionally practiced as a rite of passage into womanhood. The Pokot are part of the Kalenjin ethnic group living in west-central Kenya. They make a living primarily on agriculture, while some are pastoralists. Among the Pokot polygamy is also acceptable. (Britannica, n.d.) In the Pokot community FGM is usually carried out between the ages of nine and fifteen. FGM is carried out as initiation to bring social recognition to girls to be allowed to marry, and to be accepted as mature and responsible members in the community. Circumcision is closely linked to early and forced marriages, where the families of the girls also receive a dowry. Families continue to practice FGM in order to get an income when the girls are married, and to uphold the traditional Pokot identity. (Halder, Harun & Das, 2015; 28 Too Many, 2014.)

The prevalence of FGM among the Kalenjin is 27.9% for females between the ages of 15 and 49. 27.2% of Kalenjin girls are circumcised between the ages of 10 and 14, while 70.9% are circumcised after 15 years of age. (KDHS, 2014.) Pokot women or men who marry women who have not undergone FGM, are at risk of social shaming, discrimination, stigma and exclusion from the community. Marrying an uncircumcised woman can be seen as a curse and can lead to illness, unhappiness and even divorce. Marrying a woman who has been circumcised is connected to receiving blessings from the ancestors, and ensuring wealth in the future. (Brown, Mwangi-Powell, Jerotich & le May, 2016.)

3.3 Eliminating FGM

Eliminating FGM is a long-term process as it requires behavioural changes relating to the underlying factors behind the practice. According to the WHO (2008), action

towards eliminating FGM globally requires interdisciplinary and sustainable action, that begins from the community to make a collective choice to end the harmful practice. One way to bring change is through empowering education, which is culturally sensitive and focuses on the community finding solutions from within, without feeling coerced. Empowering education can be used at community levels to examine FGM, and the beliefs and feelings around the issue in an open way. Empowering education should be based on evidence and can focus on matters such as human rights, sexual and reproductive health, general health and problem solving skills. Empowering education focuses on the whole community, while keeping in mind the importance of girls' and women's empowerment. Eliminating FGM also requires a reform of laws and policies dealing with health, education, and legislations on national and international levels.

More specifically focusing on Africa and Kenya, studies show that education, involving men, alternative rites of passage (ARP), and enforcing laws and legislations have been seen to have an important role when working towards ending FGM. Many studies show the importance of holistic approaches, where more than one intervention is used. First of all when trying to eliminate FGM, the matter needs to be approached from both social and cultural context (Achia, 2014). For campaigns and programs that are aimed toward the elimination of FGM to be effective, there needs to be respect of both culture and human rights. The will to end FGM should rise from the community, and education in addition to empowering of women seems to have a fundamental effect in decreasing gender inequality and also ending FGM. For this reason, it is important that younger generations are educated about FGM and human rights from an early age. (Schmöker & Nkulu Kalengayi, 2015.)

Secondly, many studies show the benefit of educating girls and women when working towards eliminating FGM. Better educated women have a possibility to seek alternative opportunities for their girls, and may have more influence in their homelives to make the choice of not letting their children undergo FGM. Education can also be seen as empowering, because women can make informed decisions concerning their individual rights, health and well-being. (Achia, 2014.)

Another study done in Meru, Kenya collaborates that education is a key factor towards ending FGM. Educated girls are more likely to know their rights, and also learn about

the risks and dangers of FGM. The study also suggested that especially grandmothers who were not educated were acting as perpetrators towards FGM in their communities. Especially grandmothers who were not aware of the risks of FGM, were supporting the continuation of the practice and wanted their granddaughters to get circumcised. Because elderly individuals are respected and influential in the Kenyan society, it is important to note that they can conversely also be valuable in the interventions focused on eliminating FGM. (Mwendwa, Mutea, Kaimuri, De Brún, & Kroll, 2020.)

Furthermore, in a study done among the Maasai and Samburu in Kenya, education was seen as a way to make girls more valuable to their families, because of the possible income they will be able to earn in the future. Education can make the girls more valuable than the one-time dowry received at marriage. (Graamans, Ofware, Nguura, Smet & ten Have, 2018.) Mwaiko (2017) concurs that the dowry price of a girl can vary depending on their education. An educated girl can be worth more, and they can also be appreciated more in the community as well.

A study conducted among Maasai women in Kenya, shows that women in the community were empowered through a literacy class, and were also able to improve the well-being of their families and close relations in the village. Through the education the women received, they were empowered to make choices for themselves, and start businesses to provide income for their families. Additionally, the women were able to act as agents of change in their communities, and raise their voice in the community to help other women. The study further proposed that empowered women working together in solidarity can bring positive changes in the society, for example in matters relating to gender inequalities. The self-esteem and confidence to be a part of the change can be enhanced by educating women. (Takayanagi, 2016.)

In addition to educating girls and women, health education can also be an effective intervention in prevention of FGM. For health education about FGM to be effective, it is important to take into consideration socioeconomic factors, tradition and beliefs. Health interventions should be personalised to fit the target population, and also need to be integrated into the community to have a greater influence. (Waigwa, Doos, Bradbury-Jones, & Taylor, 2018.) Educating men is also important in the prevention of FGM. More years of education and knowledge about the complications of FGM are affecting men's views to abandon FGM. Men like women can be empowered through

health education to make informed decisions concerning their families, such as family planning and reproductive health. (Varol, Turkmani, Black, Hall, & Dawson, 2015.)

Thirdly, involving men is important in the abandonment of FGM in African communities (Varol et al., 2015). Especially in patriarchal societies, men can play an important role in eliminating FGM. In Kenya, fathers were the decision makers for their daughters to undergo FGM in 46% of the cases. Men raising their voices has been shown to have an impact on social norms and decisions made by families. Especially men in powerful positions, such as respected elders and cultural chiefs, can have an important role in the elimination of FGM. (UNFPA, 2017b.)

In another study, one of the reasons to question the practice of FGM among young, modern Pokot men was also education; to have a wife who can contribute economically. Other justifications for not undergoing FGM were complications during childbirth, but also the challenges FGM can bring to sexual relations. Individuals who were Christians, also opposed FGM. Interventions aimed towards ending FGM in Pokot should be neutral, culturally sensitive, and led by local men, who are respected in the community, in order to have the power to work towards ending FGM. Dialogue between different age groups, for example, children and their parents is also important. (Brown et al., 2016.)

Fourthly, alternative rites of passage have been seen to effective in decreasing the prevalence of FGM. As a rite of passage into adulthood, FGM has been traditionally celebrated within the community. ARP can be used to replace these ceremonies of transition into womanhood without the girls having to undergo the cutting/mutilation. In Kenya, ARP have been done on community level to engage the people and prepare girls for adulthood. Participatory education accompanies the ARP, where girls have been educated on matters such as life skills, employability skills, family relationships, self-awareness, character and spiritual development, sexuality, GBV and human rights. The purpose of this alternative ritual is for girls to be able to become role models in their communities to work towards eliminating FGM. (UNFPA, 2014; UNFPA, 2017a; UNFPA, 2017b.)

A study conducted in Kajiado, Kenya among the Maasai shows that especially community led ARP were interlinked to a decrease in prevalence of FGM, early and forced

child marriages and teenage pregnancies. Additionally the ARP had a positive impact on the educational outcomes and empowerment of girls in the area to protect their social and human rights and improved their lives. (Muhula et al., 2021.)

According to Mwendwa et al. (2020) in addition to ARP, other factors bringing change towards ending FGM was action from within the community at grass root level, and also religious organizations. For example, the moral teachings of the Christian church were respected and offered a place for the community to learn about the negative consequences of FGM. For the education about FGM to be effective, it has to be contextualized to fit the social and cultural norms of the community.

Other studies show the importance of holistic approaches in the prevention of FGM as well. In a study done among the Maasai and Samburu tribes in Kenya, providing education, raising awareness about the harmfulness of FGM, ARP, and enforcing the law were seen to be four important interventions to abolish FGM. (Graamans et al., 2018.) Likewise in a study conducted among the Maasai in Tanzania, fear of prosecution as FGM is illegal, education, seminars organized by non-governmental organizations (NGOs) and globalisation, were some of the reasons bringing change towards ending FGM. Especially individuals from the younger generation, who were educated, had a negative attitude towards FGM, and were also able to share this view with others in the community. (Van Bavel, Coene, & Leye, 2017.)

To conclude, according to KDHS only 6.2% of girls and women between the ages of 15 and 49 think that FGM should continue in Kenya. Among the Maasai the percentage is higher at 22.6%, while among the Kalenjin the percentage is lower at only 1.9%. (KDHS, 2014.) Despite efforts from different stakeholders, eliminating FGM in rural areas of Kenya is a long and painstaking process. Interventions to end FGM in communities are being done through civil society partners, NGOs, faith-based organizations, different grass root organizations and local organizations. The aim is to protect and help girls in the communities through different kinds of interventions, so that their bodily integrity is maintained and they can reach their full potential in the society without the harm of FGM. (UNFPA, 2017a; UNFPA, 2017b.)

4 CREDO PROGRAM

Credo program in Kenya was established in 2003 to help girls who have run away from their homes in fear of FGM and childhood marriages. The vision and mission of the program are as follows: “Vision- To break the cycle and eliminate FGM in our communities. Mission- To help maintain our girl’s dignity and make Christ known” (ELCK, 2020). The program works to promote girls’ and women’s rights by helping to prevent FGM and early marriages. Credo helps girls by making sure they remain uncircumcised and have a chance to attend school. The girls usually study in boarding schools and have the possibility to continue their education until profession. Credo program is carried out within the Evangelical Lutheran Church in Kenya, but most of the funding comes through the Lutheran Evangelical Association of Finland. (ELCK, 2020.)

LEAF finds sponsors for the girls from Finland; people can help, give funds, and act as godmothers and godfathers for the girls. Sponsors can keep in touch with the girls through letters or emails, and are also encouraged to pray for the girls. In addition to this, a missionary from LEAF keeps in touch with the sponsors from Finland and is in contact with ELCK when needed. The program personnel consist of this Finnish LEAF missionary, and an ELCK deaconess from Kenya. The ELCK deaconess is in charge of making sure the girls’ school fees are paid, as well as other needed finances, such as traveling costs, school books, accommodation, and needed medical bills are taken care of. She keeps in touch with the girls regularly, offers guidance, and is their support person on ground 24 hours a day if needed. The Credo personnel also do preventive work in the communities by visiting schools and congregations spreading word about the work of Credo, and upholding the mission of the program. (ELCK, 2020; Sley, n.d.)

Furthermore, when needed Credo works with the staff of boarding schools and rescue centers to make sure all concerned parties are aware of the girls’ situations. One of the program’s aims is also to work in mediation with the girls’ families, so that after completing their education, they could have a chance to go back to their homes without fear of FGM. Credo’s personnel are grateful to report that in many cases this has been achieved, and the girls have been able to return home after reaching adulthood and

completing their education. (Pyykönen, 2018; Sley, n.d.) Finally, Credo program also gives spiritual care to the girls. There is a yearly Bible Seminar where the girls have a chance to come together, spent time with each other, learn about Christian values, and are also given basic health education. (ELCK, 2020; Satu Arkkila personal communication, January 28, 2019.)

As of the beginning of 2021 there are 45 girls in the Credo program. Fifteen are completing their primary education, sixteen are completing their secondary education, twelve are in colleges and universities, while two are waiting for a study place. Mainly the girls in the program are Maasai, but additionally there are two girls from Pokot. Credo program also extended its work to Samburu in 2019, where six girls were able to join the program. (ELCK, 2020; Satu Arkkila personal communication, January 28, 2019.)

According to the LEAF missionary, one of the challenges the personnel of Credo face in their work is keeping in touch with the girls after their studies are completed. The girls seem to get lost in life, and contact is lost with some of them during the process. Because of this, there is no exact record of the number of girls that have completed school with the help of Credo program over the years. However, the estimate is that over a hundred girls have been able to complete their studies until profession. Sometimes the girls themselves also choose to leave the program. Furthermore, while underage there may be instances out of the girls' control affecting their possibilities to continue with their education. For example in 2017, four girls were dropped out of the program as they got married, and were not able to proceed with their studies. (Satu Arkkila personal communication, January 16, 2019.)

During the Covid-19 pandemic, the work of Credo program has continued as normal as possible within the limitations brought by the pandemic. Schools in Kenya were closed for about nine months in 2020, but have been able to open as of the beginning of 2021. According to the LEAF missionary, the girls have been able to return to their schoolings, and only one girl has not been reached and did not continue with her studies. (Arkkila/Sley Mediakirjasto, 2021; Satu Arkkila personal communication, May 27, 2021.)

5 STUDY OBJECTIVE AND RESEARCH QUESTIONS

The objective of this study was to gain insight and describe the experiences of the Kenyan girls about Credo program in relation to their health and well-being, and to understand what kind of possibilities the girls have faced in their life with and after Credo.

The main research questions proposed to meet the objective include:

1. What kind of experiences do the girls have of Credo program in relation to their health and well-being?
2. What are the girls' future perspectives?

The aim was to focus on the multidimensional and comprehensive health and well-being needs of girls, and the possibilities that being well brings to one's future. As discussed above in chapter two, holistic health and well-being are multidimensional concepts. There are underlying needs or determinant that have to be met first of all in order for individuals to be able to achieve and maintain good health and well-being; to be able to reach their full potential in the society, and achieve their goals of a subjective good life. (Heginbotham & Newbigging, 2013; Sethia et al., 2018; WHO, 2017.) In addition to this, the information can be useful for Credo program in further supporting and empowering girls at risk of undergoing FGM, as well as for future developmental work. The information can also be used when trying to find new sponsors for Kenyan girls to understand what kind of support Credo provides and encourage people to continue assisting the cause.

6 IMPLEMENTATION OF THE STUDY

This study was done in cooperation with working life partner Credo program in Nairobi, Kenya. The timeline of the study can be seen in the figure below.

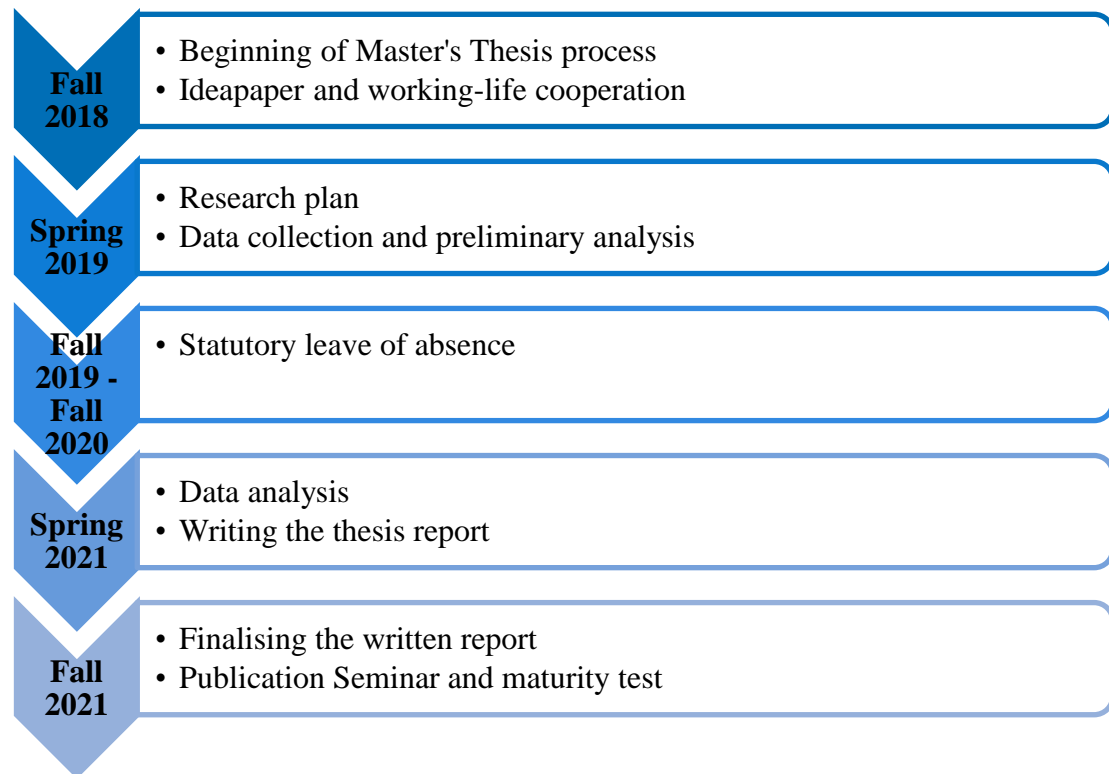


FIGURE 4. Master's Thesis Timeline

This chapter will cover the implementation of this study through research methodology, data collection, and data analysis. Ethical considerations were kept in mind during the whole process in light of maintaining the autonomy of the informants and following responsible scientific practices (Kynäs, Kääriäinen & Mikkonen, 2020).

6.1 Research Methodology

Qualitative research aims to describe and understand individuals' experiences. To understand the meaning people have in their lives; experiencing life and reality as they see it personally. In qualitative methodology, the researcher's aim is to create descriptive data, this can be achieved by observing people, and by people's actual written words, spoken words or documents. People should be seen holistically and everyone's

perspective is important. (Kynge et al., 2020; Taylor, Bodgan & DeVault, 2015.) As the objective of this study was to understand Kenyan girls' personal experiences in life with and after Credo program, qualitative research was chosen as the research methodology.

Furthermore, as qualitative research aims to show in-depth insights and understanding of real life situations, the sample size is generally quite small. The purpose is to have enough data in order to meet the study objective and aim, while still obtaining a broad range of perspectives from the individuals. (Kortsjens & Moser, 2017; Taylor et al., 2015.) Sampling should continue until the point of saturation is met, this means that the interviews are not yielding new insights, and the information starts to come up repeatedly (Kortsjens & Moser, 2018a; Kynge et al., 2020).

Purposive criterion sampling was used in this study to find individuals with shared experiences to meet the objectives set by the research questions in the best ways possible. The inclusion criteria for the informants of this study were adult Kenyan females who were in the middle of completing their bachelor level studies with the help of Credo program, or females who had already completed their studies with the help of Credo program and were currently working. Nine informants were proposed and chosen by Credo's staff, who were 18 years of age or older, and voluntarily willing to participate in the study. Initially the informants were intended to be Maasai, but the criteria was altered to include girls from Pokot as well, to get the richest understanding of the Credo girls' experiences in regards to the study objective. Informant characteristics are described in detail in Findings section 7.1. (Aurini, Heath & Howells, 2016; Kortsjens & Moser, 2018a.)

6.2 Data Collection

The data collection methods in qualitative research can include interviews, observation, and materials or products that the informants have created. Face-to-face interviews give a possibility for in-depth discussion to interact with the informants, as well as to listen and understand their experiences holistically. Art-based research can be used to collect data, as artwork can be used with the written results to provide insightful meanings that words alone are not sufficient to portray. The informants should also be

given a chance to explain their artwork's meanings, so that the researcher will not interpret the artwork on their own. (Kylmä & Juvakka, 2014; Saldana, Leavy & Beretvas, 2011.)

Face-to-face qualitative interviews and art-based research were used dually in this study to collect richer and versatile data in order to understand the informants' experiences. Face-to-face qualitative interviews were used with an intention to collect narrative data from the girls' individual viewpoints. Doing the interviews face-to-face also gave a possibility to interact with the informants, and ask defining questions when needed. A brief literature review on FGM was done before formulating the research questions and questionnaire. (Kylmä & Juvakka, 2014.) The web pages of WHO and the UN Agencies were used as a base for the literature review. EBSCO Academic Search Premier, including CINAHL and Medline, and ProQuest databases were used additionally to find articles relating to FGM.

The formation of the research questions and questionnaire was done with an inductive approach of open-ended questions, with the aim to understand how the informants perceived their own life, health, well-being and future perspectives. (Kyngäs et al., 2020.) This semi-structured questionnaire with open-ended questions was used as a guide during the interviews allowing flexibility for the informants to explain their experiences in their own words, and to focus on things that they felt were important and meaningful for them. (Kylmä & Juvakka, 2014.)

The researcher travelled to Kenya to conduct the face-to-face interviews, which took place at the end of March, 2019 at ELCK's Credo office in Luther Plaza, Nairobi. Working life partner had chosen nine informants from Credo program and set the times for the interviews beforehand for the proposed dates. Three interviews were planned per day with enough time, about two hours, set aside for each informant. Additionally, there was one extra day set aside in case of cancellations or need of further data collection. Before starting the interviews, researcher went over the letter of intent together with each informant, and received written consent for participation in the study. Letter of intent can be found in Appendix 1. All of the informants were willing to have the interviews recorded with an audiotape, and the interviews were conducted individually. (Saldana et al., 2011.)

Before starting the actual interview questions, the researcher tried to make the informants feel welcome and appreciated by offering some small refreshments. The location was a private office for the interviews to take place without disruption. The researcher first explained the background and objective of the study in detail. After this, the interviews proceeded using the questionnaire in Appendix 2 as guidance. (Saldana et al., 2011.) The verbal interviews were conducted in English and varied in length between 13 and 55 minutes. The majority of the interviews were about 30 minutes. All the informants were willing to answer all of the asked questions, and shared their experiences of Credo program.

Altogether eight face-to-face interviews were conducted. One informant had to cancel due to the timetable, as they were unable to be away from work. After the verbal face-to-face interviews, the informants were given materials to proceed with the art-based data collection. Two informants felt that they had been able to share their experiences comprehensively during the verbal interviews, and did not want to continue with the art-based research. Six of the informants were willing to participate in the art-based research. From these, five informants felt it was difficult to share their experiences of Credo program through drawings, and proceeded to write a thank you note for the program. One informant drew a picture portraying her experiences. After all the interviews were completed, it was deemed that no new information was coming up concerning the research questions, and saturation point was met. As part of the data collection process, a research diary was kept, where notes were made after each interview.

Transcription of the recorded face-to-face interviews began after the interviews were completed in the spring of 2019, and continued after the statutory leave of absence in the spring of 2021. Transcription was done personally by the researcher word-to-word from the recorded data, without including pauses, laughter, hesitations or irrelevant fillers. The following table shows the quantity of data from the recorded interviews and art-based research.

TABLE 1. Quantity of collected data

Duration of recorded data	254 minutes
Pages of transcribed data	39 pages (Times New Roman font, font size 12, line spacing 1.5)
Art-based research	6 pages (paper size A4)

6.3 Data Analysis

Qualitative interviews often produce a large amount of data, that needs to be organized and analysed. Data analysis is often the most difficult part of qualitative research to explain and justify to others. (Kortsjens & Moser, 2017; Taylor et al., 2015.) Qualitative data is generally analysed through content analysis that can be inductive or deductive. The formation of the research questions and questionnaire can already determine what approach can be used. Inductive content analysis is used while trying to create theoretical concepts, categories or themes from the data, while in deductive analysis a theoretical matrix guides the analysis of the data. (Kyngäs et al., 2020.)

Inductive content analysis was used in this study, because the intention was to identify concepts and patterns within the data into different categories (Kortsjens & Moser, 2018a). The objective was to understand individual experiences of the girls from their own point of view and social context, and attention was paid to an inductive approach when formulating the questionnaire. Inductive content analysis was conducted in four stages; data preparation, data reduction, data grouping and abstraction. This process is shown in the figure below as presented by Kylmä & Juvakka (2014).

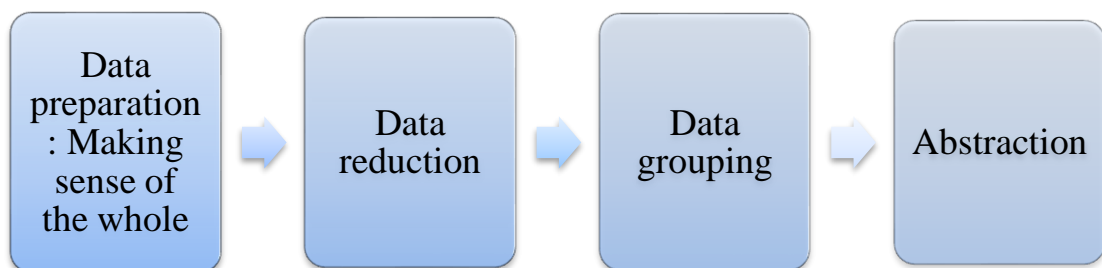


FIGURE 5. Main stages of inductive content analysis (adapted from Kylmä & Juvakka, 2014, p. 116)

The data from the thank you notes was analysed alongside the transcripts. The sole picture that one of the informants created emphasized her verbal interview without bringing new insight to the objective of the study, and was not presented in the findings further. During the preparation stage, the researcher became immersed in the data by listening multiple times to the recorded data, and reading and rereading over the transcripts, and thank you notes from the art-based research. By doing this, the researcher

aimed to get a deeper understanding of the Credo girls' experiences and the underlying meaningful concepts raising from the data. (Elo & Kyngäs, 2007; Taylor et al., 2015.)

After getting familiar with the data, researcher proceeded with data reduction while keeping in mind the research questions. This was done by creating simplified expressions from the raw data. In this data reduction process, original expressions from the raw data were simplified, and researcher paid attention to remain objective in order to make sure the informants' voices were heard and original meanings were not lost. After this, researcher further grouped these simplified expressions by finding similarities and differences in the content to create sub-categories. Sub-categories were named by defining the shared concept of each group. (Elo & Kyngäs, 2007; Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

Finally in abstraction, sub-categories were grouped together into categories and main categories by finding similarities in the categories' content. Likewise, the categories and main categories were named by defining the shared concepts in each group. Overall through abstraction, the researched aimed to summarise the findings with the categories to form general descriptions and/or theoretical relationships of the research topic. During this process, the researcher's background in health care influenced the formation of the categories regarding the first research question. (Elo & Kyngäs, 2007; Kylmä & Juvakka, 2014; Kyngäs et al., 2020.) Appendix 3 shows an example of inductive content analysis from this study relating to personal development.

Altogether two main categories were formed during the analysis in correlation with the two research questions. The table below shows the sub-categories grouped to form five categories during the analysis of the first research question.

TABLE 2. Sub-categories, categories and main category

Sub-categories	Categories	Main Category
<ul style="list-style-type: none"> ➤ Finding out who I am ➤ Personal growth ➤ Gaining self-esteem and finding own voice ➤ Self-actualisation and accomplishments ➤ Control over own life (autonomy) 	Personal Development	Experiences of Credo Program

<ul style="list-style-type: none"> ➤ Life satisfaction and finding meaning in life ➤ Happiness and positive emotions 	Contentment in Life	
<ul style="list-style-type: none"> ➤ Spiritual growth and guidance in life ➤ Finding peace and hope in life through faith 	Spiritual Growth, Peace and Hope in Life	
<ul style="list-style-type: none"> ➤ Credo support network ➤ Peer support ➤ Gaining social acceptance and respect in the society 	Meaningful and Positive Relationships	
<ul style="list-style-type: none"> ➤ Increased participation ➤ Positive agency in the community 	Community Participation	

During the analysis of the second research question, sub-categories were grouped together into four categories. These are shown in the table below.

TABLE 3. Sub-categories, categories and main category

Sub-categories	Categories	Main Category
<ul style="list-style-type: none"> ➤ Making own decisions ➤ Learning life coping skills ➤ Building character ➤ Building resilience ➤ Being responsible ➤ Helping others 	Journey to Responsible Womanhood	Credo Girls' Future Perspectives
<ul style="list-style-type: none"> ➤ Education as a means to a different future ➤ Hopes for a better future ➤ Dreams 	Education as a Means to a Better Future	
<ul style="list-style-type: none"> ➤ Hope towards ending FGM ➤ Slow change and hidden FGM in the society 	Slow Change Towards Ending FGM	
<ul style="list-style-type: none"> ➤ Further personalized support ➤ Further financial guidance ➤ Expanding Credo ➤ Continued communication with Credo 	Enhancing Credo Program	

7 FINDINGS

The objective of this study was to understand and describe the experiences of Kenyan girls about Credo program in relation to their health, well-being and future perspectives. In this chapter these findings will be presented with direct quotations from the transcripts. The quotations are written in *italics* to set them off from the text and will be referenced as informants 1 to 8 corresponding to the eight females who participated in the study. The informants will be at times referred to as girls in the findings and discussion, because they were underage at the beginning of their experiences when joining Credo program. However, it is important to note respectfully that the informants reached adulthood during their journeys with Credo program and were adults at time of the interviews.

7.1 Informant Characteristics

To fully understand the informants' experiences, their background and circumstances of coming to Credo program will first be described in this section. The eight informants who participated in the study were females in their twenties and thirties. Six of the informants were Maasai and two were Pokot. Four of the informants were in the middle of completing their university bachelor level studies in different colleges and universities in Kenya. The other four informants had already completed their studies and were employed or had their own businesses.

The informants joined Credo program between 2002 and 2011 in the middle of their primary education when they were about eleven to fourteen years old to escape FGM and early marriages.

In my area, even small girls can be circumcised and then forced to marriage. That is something that was almost affecting me, and that is why I left home. Because my parents wanted me to be circumcised and get married. (informant 5)

I came to Credo when I was very young, but I remember the situation we went through. In our area ladies are forced to be circumcised at some point, and when you are circumcised, then you get married. You are forced to get married to someone. You are not even aware, but the person

comes, and they finish with your parents, and then, then you are given out to someone. (informant 8)

The informants grew up in rural villages, where their parents were making a living by agriculture and/or pastoralism. Three had grown up in smaller families with three or four siblings, but four came from large families with up to seven or ten children. One informant explained that her father had four wives, so she had endless brothers and sisters. Some of the informants from the larger families explained that at times only affording food and shelter for the whole family was a challenge.

Additionally, four of the informants came from families where there was only a single parent. One informant explained how her father was terminally ill, and it was expensive for the family first of all to pay for his treatment. After he died, his wife was left alone to struggle with almost ten children. Coming from these circumstances, the informants explained how their parents didn't have money to educate all of their children.

My dad never wanted to give me out, but he never had otherwise. When I reached class 5, my dad now said, I don't have money. I don't have someone to help me here at home, so he was to give me out of exchange of cattle. (informant 6)

I remember my parents gave me out of poverty away to a man. I've never seen him, not talked to him. And the reason why they are doing that is so that they can get those cows, and maybe use for other things. It's like selling your own daughter for food or something. (informant 7)

As the above informants explained, their parents were agreeing to the early marriages in order to get the dowry, which is paid to the girl's family. In addition to this, especially the informants who had ran away from their homes before 2006, explained that their parents did not prioritize educating their girls in the rural villages.

Those days only boys could go to school. But for the girls once you reach class 4, 5, your destiny should be in the kitchen, and you are married and everything. (informant 5)

So you don't know anything, actually in those times in our area, educating a girl was like a history. So we never saw any girl who went to school. (informant 7)

Growing up, gender inequalities were visible in the informants' everyday lives. Most explained that their mothers were not learned: "my mom didn't even step into any

school” (informant 5). Their mothers were taking care of the children, doing household chores, and helping with the farm work. Making matters harder for the teenage informants, was the fact that they had limited say in matters concerning their own lives. The informants said that even though their families were poor, they still hoped their families would let them continue with their education.

I used to perform well in school in class, and I used to be a hard working girl. (informant 2)

Since class 1, I have always been number 1 or number 2. When I actually got number 3, I used to cry. Actually if you want to see a motivated person, when you fail, you feel bad. And there are people who don't care, but me I care. (informant 1)

Even though the above informants had been successful and motivated in school, their families were still not able to support their schooling further. Another informant simply stated: *“So dreaming of education was really hard” (informant 7).*

Furthermore, the informants explained that girls are sometimes not included in decisions regarding their planned marriages. That the parents arrange the marriages and the girls are not even aware of it. After circumcision, they are just given out to marriage to some man they might not even know. Or that they have to marry an older man without their consent, or a say in who they want to marry. As the informants explained, in the Kenyan culture it is expected that children obey their parents:

You can't just say, you have to stay like an African girl. That girl that someone wakes up and tells you, I want you to marry that person, and you do that because you are from somewhere. (informant 7)

Parents have to be taught, not only girls. Because when a parent says no, a child has no right to say I will do it. (informant 7)

In instances where the informants' fathers had died and they were left alone with their mothers, the situation was also difficult. One informant's uncles were forcing her to undergo FGM. While for another, her grandmother was really pressing the matter for her to undergo FGM. Both of these informants explained how their mothers were not able to decide for their girls themselves, but were under the influence of the extended families. Overall, the informants expressed that they were initially being pressured by their parent/s or relatives to undergo FGM.

Additionally, it became clear during the interviews that FGM as a rite of passage is deeply rooted in the Kenyan culture and society. If not circumcised, girls can be seen as babies, unfit for marriage and immoral. The informants explained that traditionally it was taught a man from their community cannot marry you if you are not circumcised. Or when you get married people will start laughing at you, or you will not stay in the marriage. Some of the informants had also initially been blamed, cursed and even shunned by some of their family members for not undergoing FGM when they first ran away from their homes.

It took seven years for my dad to talk to me, seven good years. It was terrible and he was even cursing me saying everything worst in the world. That I will die, I will not complete class 8, I will not complete form 4. He was telling my mother prepare to cry, because she will not even go anywhere. (informant 7)

Even my grandmother she told me, she will not accept me until I will be circumcised. Up to now, I will not accept you until you undergo circumcision. I told her never, just refuse to accept me, I will not be circumcised. (informant 4)

The informants also explained that in rural Kenyan villages, after the girls get circumcised, they are expected to get married immediately, and will not be able to continue with their education.

Early mutilation can lead to early marriage. Early marriage will mean that that girl cannot get education again. That is the end of your school. (informant 2)

And the worst thing about if you get circumcised is that you get a man definitely, immediately, and you get married. (informant 7)

From these conditions, four of the informants came to Credo program by coming in contact with Credo's staff or by being directed to Credo by someone familiar to the program. In many cases a pastor or evangelist from the Lutheran church assisted the girls to Credo. Two informants had escaped to rescue centers/schools for girls, who were at risk of FGM and early marriages and came to Credo's sponsorship from there. Two were staying in a children's home where Credo's staff found them. One informant explained her story in the following way when a staff member of Credo program came to her village:

And --- came and actually we went overnight. No one knows, just me and my mom and ---. No one else. So they came to know when they come to find I was not there. (informant 1)

Her close male relatives only became aware that she had ran away to join Credo program, when they could not find her at the family home. For another informant the situation was different, as she did not have to run away from her home without her father's knowledge. She explained how Credo's staff heard about her situation from her neighbours when they were visiting the Lutheran congregation in her home village. When the staff members heard about this, they talked to her father and explained:

Instead of giving out this girl, just give her to me. We will sponsor as a Lutheran church, and then she will continue with her studies. And I love my dad because he reacted and changed his mind very fast for me to gain. (informant 6)

In her case the father agreed, and she was able to join Credo program to have chance to gain something in her life.

7.2 Experiences of Credo Program

During the interviews it was evident that Credo program had made an impact in the informants' lives.

Before we joined this program, I thought that was the end of life. I think Credo has really changed my life. Yes, Credo is everything to me. (informant 5)

But actually Credo it has assisted me so much, because whatever I have now, it is because of Credo. (informant 4)

Correspondingly the informants wanted to voice their thankfulness for Credo program. This became clear during the interviews and was one of the essential aspects of the experiences as well. This thankfulness towards the program will be further described in section 7.4.

The first research questions aimed to understand the informants' experiences of Credo program in relation to their health and well-being. In this section these findings will be explained through personal development, contentment in life, spiritual growth,

peace and hope in life, meaningful and positive relationships, and community participation. These are displayed in the figure below.

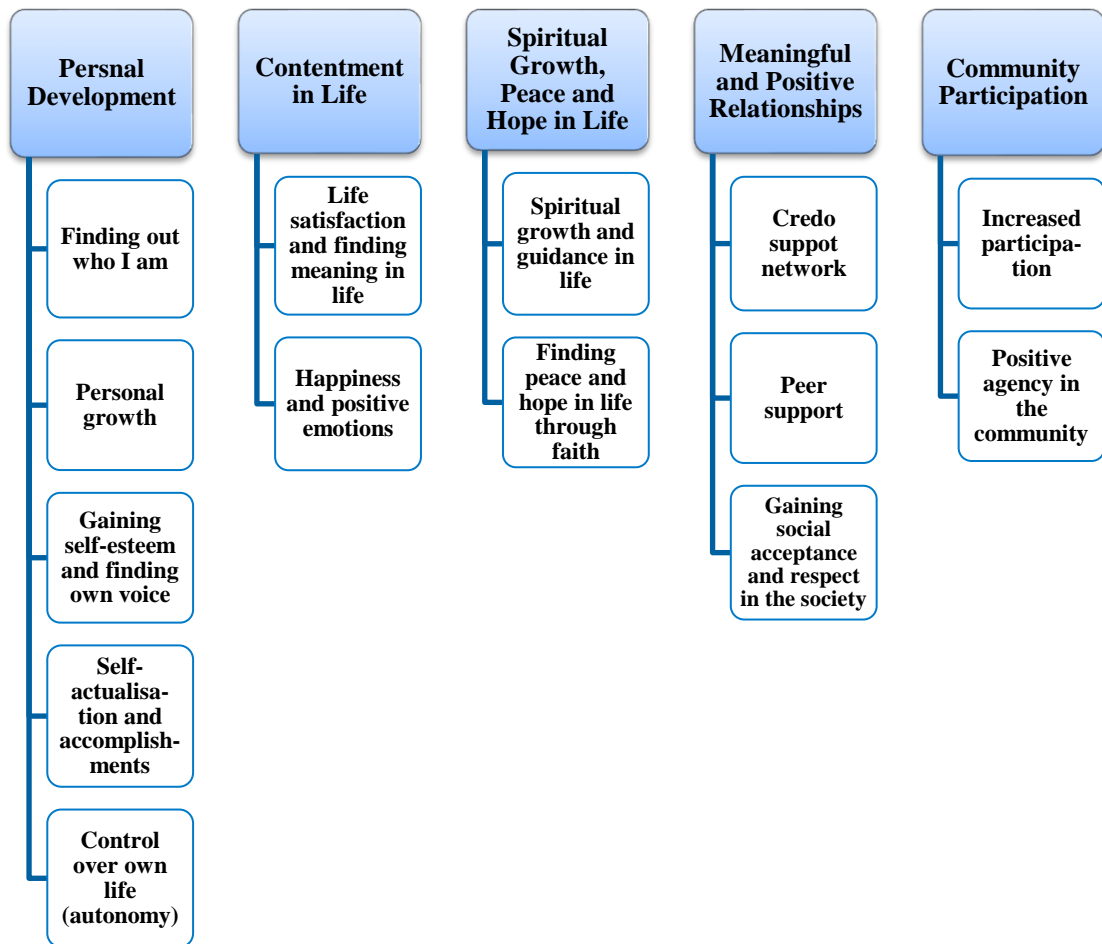


FIGURE 6. Experiences of Credo program

7.2.1 Personal Development

Credo program supported the informants on their journey of personal development. Personal development was expressed as finding out who I am, personal growth, gaining self-esteem and finding own voice. A part of personal development was the possibility for self-actualisation and accomplishments as well as control over one's life.

During the interviews, the informants explained how Credo helped them to find themselves, *to know who they are* today.

So I am just proud of them all, because they have helped me. That is why I am who I am today. Yes, because of Credo program. (informant 6)

Not only educating us, but making us know who we are and focus. (informant 7)

Additionally, the informants expressed *personal growth* in means of becoming more self-aware of themselves and their rights. Credo helped the informants to become aware of girls' and women's rights to make decisions concerning their own bodies: "My mind has become so sharp because of what I underwent. That is why I cannot tolerate any nonsense" (informant 4). The informants also brought up the importance of self-motivation as a part of personal growth.

Even if you have the help of Credo, if your mind is not focused, you can still not going to make it. So 1st you put yourself in the right direction, knowing what you want and where you want to reach. And then with the help of the organization, you can get all that. Because Credo can be there to support you, and you are not ready. (informant 7)

Credo program additionally supported the informants to *gain self-esteem*, so that they were able to *find their own voice*. Socializing with the other girls helped the informants to build their own self-esteem and confidence. The informants also explained how Credo had helped them to know that girls and ladies have a say in the world. That girls can have a say in the world relating to matters concerning themselves, like marriage, education and family.

For now I have a voice to say that Credo brought me far away. (informant 2)

It is also giving us a chance to know that girls have a say everywhere in the world. (informant 7)

Furthermore, the informants were able to *achieve and accomplish* things in their life. One informant explained that through the possibility to study what she wanted, she was seeing opportunities to even help Credo program and other girls in matters dealing with sexual offenses. Because of this, she really felt that she had achieved something at the end of the day. Others explained:

Like now I don't see anything that will hinder me from achieving my goals that I wanted. (informant 1)

I was like the history, because I had refused FGM and succeeded with my education. (informant 5)

The above informant had completed or achieved her education, and felt that she had made the right choice when escaping FGM to pursue her education. Additionally, the informants explained how Credo helped them to accomplish things and go somewhere far in life, where they can for example, help their siblings financially to proceed with their education and support their parents.

They take us to another level. (informant 6)

Credo helped me to be where I am now. To be somebody who I am now. (informant 2)

That somebody is a person who can help other girls who are being forced to marriage.

The final area of personal development was *autonomy*, which was connected to knowing oneself and possibilities to achieve personal goals in life. The informants felt that they were able to take control over their own lives by being able to make their own decisions. They expressed that they were able to do what they want, by first of all choosing for themselves what to study.

Since I did the course that I wanted, it has really motivated me. (informant 1)

And I will get the money that I want for myself, not that the people choose for you. (informant 1)

Education also helped the informants to have autonomy over their lives by giving them the opportunity to have financial freedom, but also make choices for themselves, for example concerning marriage and their children.

It has helped me to marry a better person. Through education I have been able to get married to a learned man, just the way I also went to school. (informant 7)

An employed informant explained how she can help herself when she gets her salary. She will also be able to educate her children, and they will not have to suffer. Another informant wrote in the art-based findings that she has been able to achieve her education, and is now married to a man she loves and has peace with.

7.2.2 Contentment in Life

Contentment in life was described through life satisfaction, having a meaningful life, happiness and positive emotions. The informants expressed that they were feeling more *satisfied* in their lives now and Credo program had opened a good life for them: “*I am happy always, because I am in a life, in a good life. I am in a good life, because I am not lacking anything*” (informant 2). They explained how they had not lacked anything in their lives with Credo. Because the Credo ladies are in a good and beautiful lives now, since they have good jobs, and have been able to complete their education before getting married.

The informants also explained how Credo has changed their *lives to be better and meaningful*: “*It has changed my life from nothing to something*” (informant 6). From nothing to something; instead of having to drop out of school to get married, the above informant was able to complete her education and is employed now. She is employed and can help herself and her children. She can work and get something she is proud of.

Additionally, with the help and possibilities brought by Credo, the informants felt that they were *feeling happy* in their lives, and can see a bright future ahead.

In my life I am feeling happy. (informant 1)

And they bring me out of the darkness, up to the, up to the where there is a light. (informant 2)

The informants also explained how they were smiling and having *positive emotions*, because of the strength and help they get from Credo program. They expressed how they were not stressed and did not have any problems, because Credo helped to pay the needed shopping and fairs for their school and field trips, in addition to giving them pocket money. In college Credo had even helped to pay for their house allowances.

Because when I was in school, I never stressed myself. Because I know Credo is there to help me. (informant 6)

Moreover, through Credo’s help the informants were able to access needed medical care, which was important for decreasing worries and being physically and emotionally healthy.

Or even if I fall sick, I tell Credo workers and they organize medication for me. (informant 2)

At that time I underwent through some surgeries, so they assisted me even to pay the hospital bills. (informant 3)

Credo program paid the informants' medical bills when needed, but also supported them when they were sick. As one informant explained, when she was in a lot of pain, the Credo workers were able to talk with her, which helped her to get through the pain.

7.2.3 Spiritual Growth, Peace and Hope in Life

During the interviews the informants expressed how Credo program had helped to support their spiritual growth and provided spiritual guidance for their lives. They also felt that they were able to learn about Christianity with Credo programs' teachings, and this helped them to find hope and peace in their lives through faith.

During the yearly Seminars, the informants had a chance to learn about Christianity and were able to *grow spiritually* as well as receive *spiritual guidance*. Through Credo program the informants learned more about being a Lutheran, how to pray, the act of giving, and also about the spiritual way of life. For example, one informant stated she had learned about the Holy Spirit and how the Holy Spirit can direct you in life. Others explained:

Because I am a prayerful lady and with prayer through Credo, they used to give us books where we can see and you can pray, and through that prayer I learn many things. With prayer, anything, everything is successful. (informant 2)

Spiritually I am very strong, because of the lessons in Lutheran. It has kept me who I am today. (informant 4)

Some of the informants also mentioned how Credo's staff and the sponsors had an important role in their spiritual growth, and had taught them about God and spirituality. Their sponsors had even encouraged the girls to forgive their parents and show them the love of Christ.

They have been supporting me academically and even spiritually, because since we joined Credo, we are also members of the Lutheran

church. She had been advising us about the church, the Holy Spirit and the baptism. (informant 8)

Spiritually, I can say the most the person who has really helped me is my sponsor. She encouraged me to have a heart of forgiveness. She told me despite that your father has wronged you and the family members, you should always learn to have this heart of forgiveness. Because without forgiveness, you can't even progress. She talk to me, and every time she sent me a message advising me, I feel like something is changing. (informant 7)

Through forgiveness the above informant had been able to heal emotionally and spiritually, despite the fact that her family had shunned her when she ran away from home to escape FGM. Now she is one of her dad's favourite daughters, and even her family are seeing what God has been able to do in her life: "And they are seeing that actually what God has done is great." Another informant explained that even though her family is still not friendly with her, she is showing them love and appreciation, because she is a Christian and more learned than them.

Furthermore, the informants felt that coming closer to God and learning about Christianity was an essential and meaningful part of their journey with Credo. Through their faith in God, they had been able to find meaning, peace and hope in their lives. As one informant stated that she had been enlightened religiously. Others explained:

Credo has transformed our lives, because here we also come to church. (informant 5)

To be a Christian, it can change your life also because you can able to stop such kind of things of FGM. Even when you come from the darkness to the lightness, you can able to know the importance of prayer, praying, the importance of education, the importance of being one with Christ. So I know when you stay with Christ, you will stay with peace. (informant 2)

God's power and provisions were also seen in the informants' lives through Credo as explained below:

That if it's not God, nothing can happen here in Kenya. We could not have been in school. But God searched those hearts and they receive us and they agree to take us to another level. (informant 6)

An important part of *faith was the feeling of hope* that life is better with God, and He will provide and take care of His own, even if they sometimes face struggles in their lives.

I shouldn't worry. God will provide. And He will always provide for me. (informant 1)

So when you have God, your God can give you the right way and the right principles. So I know bad things and good things, and when I know good things, I follow the truth of good things. Though there is many challenges, but we try to persevere, to be patient. Even when you are praying day and night, you will get good things from God. (informant 2)

Despite the struggles the informants stated that it is important to come near God, so that everything will be ok. One informant explained that she is seeing light for herself in the future when she is asking God to walk with her to the end of this journey. In the art-based findings, another informant thanked God for all the opportunities He had given her, “*because of His grace that is sufficient for us*” (informant 1).

7.2.4 Meaningful and Positive Relationships

The informants were able to form meaningful and caring relationships through the Credo support network and peer support played an important role in motivation. Peer support was also seen important for helping younger girls in rural communities to aim for better lives. Furthermore, through education the informants were able to gain social acceptance and respect in the society.

The *support network Credo* offered was seen in the positive, meaningful and caring relationships with Credo’s staff and sponsors.

Those are people who want to know more about our lives, and who want to help. They have those hearts that we want to help. (informant 6)

But when they called me, they only said we want to know how you are doing. And that encourages me, at least you have people who care. (informant 8)

Many had received personal guidance from Credo’s staff. As the informants explained that if they have any problems, they can just go to see the workers and talk with them and ask for help. For some informants, the Credo sponsors had also played an

important role as they had encouraged the informants through letters and emails, and had even formed close friendships with them. Additionally, the informants expressed how Credo had become like their family over the years: “*So we can say Credo is our father, Credo is our mother. Credo found us and we had a family again*” (informant 5).

Continuing with this, the *peer support* from other Credo girls motivated many of the informants as they were able to learn from each other, and share experiences. One informant explained how she saw older girls during a Seminar when she was still at the beginning of her studies. They were beautiful, and were explaining this is what I am doing now in my life, and she felt that:

I want to be there also. So they motivate you, when you see them. They are shining you. (informant 1)

We are taught how to cope with life, sometimes we go for Seminars, we learn from others. (informant 5)

Being an example to others was also seen as an important part of peer support for the informants. Many had not only been motivated by other Credo girls, but had also been able to show the way to younger girls in their own home villages. To show them by example that we are studying here, this is how we did it, and this where we are heading.

And they used me as an example for the other girls and the younger ones, so that they cannot be going for FGM. It if weren't for Credo, maybe even my younger brothers would even suffer the same thing, and my younger sister. Now I am showing them the way. (informant 5)

To teach them and to give a good example, so that they can have that attitude of working hard in school, and know that there is challenges. To see the way I am is all ok, so that they can copy my lifestyle, and leave such kind of practice of mutilation. (informant 2)

The informants expressed it was important to show the younger girls the example of education and the possibilities that it can give them, so that they will be motivated and will also want to reach for better things in their own lives.

Furthermore, for many of the informants the circumstances of leaving their families as youngsters and the journey with Credo was not an easy one. Despite this, only one informant expressed that she had not been able to establish a good relationship with

her family even now. She was one of the very first Credo girls who came to the program, and explained that her family is still not friendly to her. Her father died and the other family members are still not completely accepting her. For some of the informants, their family members had been more supportive during their education already. As mentioned earlier, one informant's father actually gave her permission to join Credo program, and he was supportive of her during the entire education journey: *"Now my dad is proud, I have no problem. Even when I come from school, he asks me how I have done with my studies"* (informant 6).

Another informant explained that her mother didn't want her to be circumcised, but her close male relatives were forcing her to undergo FGM and get married. Therefore her mother was also on her side and encouraging her from the beginning of her education. She stated: *"And my mom, she knew the potential in me. This girl is bright, I don't want her to get married. I know she will really help me. So yeah, she had that belief in me"* (informant 1). For another informant, her family started supporting her, but only after she got sponsorship for her education. Then her parents were supportive: *"They were so happy about sponsorship from Credo. They were so happy, because in my home I am the first one to enter university, because my parents they were not able to"* (informant 2).

Altogether seven of the informants were currently at least at speaking terms or good terms with their families back home in the rural villages. Being able to *gain this social acceptance and respect* from one's family was seen as an important part of their lives: *"Because if my mother respects me at this point and I am not yet done with school, then it shows an improvement in my life"* (informant 8).

Some of the informants explained how they had not seen their families in almost ten years while completing their studies. After reaching adulthood and returning home, they were accepted back to their families, who were now respecting their opinions.

And we were received, and we were happy that our parents are also welcoming us back again. They were treating us as mature, educated. (informant 5)

My mother almost crucified me a long time, back in ---. Just because I refused to go to FGM. But now she has changed. She doesn't tell me that

I am supposed to go right now. She has just kept quiet. She is now respecting my opinions. (informant 5)

Other informants explained how their families are proud of them now that they are educated, and can help and support their own families.

Now my dad is proud. Now he is caring and he understands that Credo program helped children. Now he has given me all the opportunity that I want. (informant 6)

And God has been there, and after I completed education, right now I think I am now one of the favourite daughter for my dad. (informant 7)

7.2.5 Community Participation

The informants explained how they had hopes for *increased participation* in the community after completing their education. Some had already been able to *participate and act as positive agents in their communities* to help end FGM, as well as help young girls to know their rights and proceed with education. One informant explained that after completing her education she has dreams of calling a meeting in her family to discuss about the issues of FGM, so that the younger ones can really gain from her experience and example. And this example can bring hope in the community that change can happen; that girls can go to school and do something with their lives to help the community, even if they are not circumcised. Others explained:

But for now I thank God, because I know when I finish school, I will help them. I have to go back to the community to bring, to even empower those girls who are still young. To empower, to tell them the truth about the path of FGM, about the importance of educating a woman, about empowering woman, about being a responsible woman. (informant 2)

I will be able to help these girls. I will be able to reach out to my area. Those things are important, because somebody really helped me. It is not easy to forget. (informant 5)

The informants also shared concrete examples of how they had been able to help other girls to escape FGM by directing them to rescue centers or NGOs. One informant explained how she had told some young girls to run away from their homes when they were going to be circumcised, so that they could continue with their education. They had succeeded, and were able to continue their schooling with the help of an NGO.

Another informant had the opportunity to work with World Vision in her community, and she was used as an example to show younger girls how she had escaped FGM. Now she is employed and helping to provide for and help her family. A third informant had worked in an organization that arranged seminars for girls from her home area. During the seminars the girls were taught about FGM and the importance of ending the harmful practice.

Additionally, some of the informants explained how they had been able to concretely help their families and community after completing their education.

So by then, my father started loving me. He was like if this is how to educate a girl, and she come and change home, then it is good.

The above informant had been able to help her family to change and to have a better life. Coming from poverty where affording food was a struggle, to helping her family to get out of poverty, to become a family who can even help others in the community who are starving and need food. She was able to help her family by building a new house for her parents and assisted in cultivating their farmland with different crops. Other informants who were already working, had already had a chance to help their families by paying for their siblings school fees, and helping their parents monthly with their shopping.

7.3 Future Perspectives

The second research question focused on the Credo girls' future perspectives. In this section these future perspectives will be explained through journey to responsible womanhood, education as a means to a better future, slow change towards ending FGM and enhancing Credo program. These are displayed in the figure below.

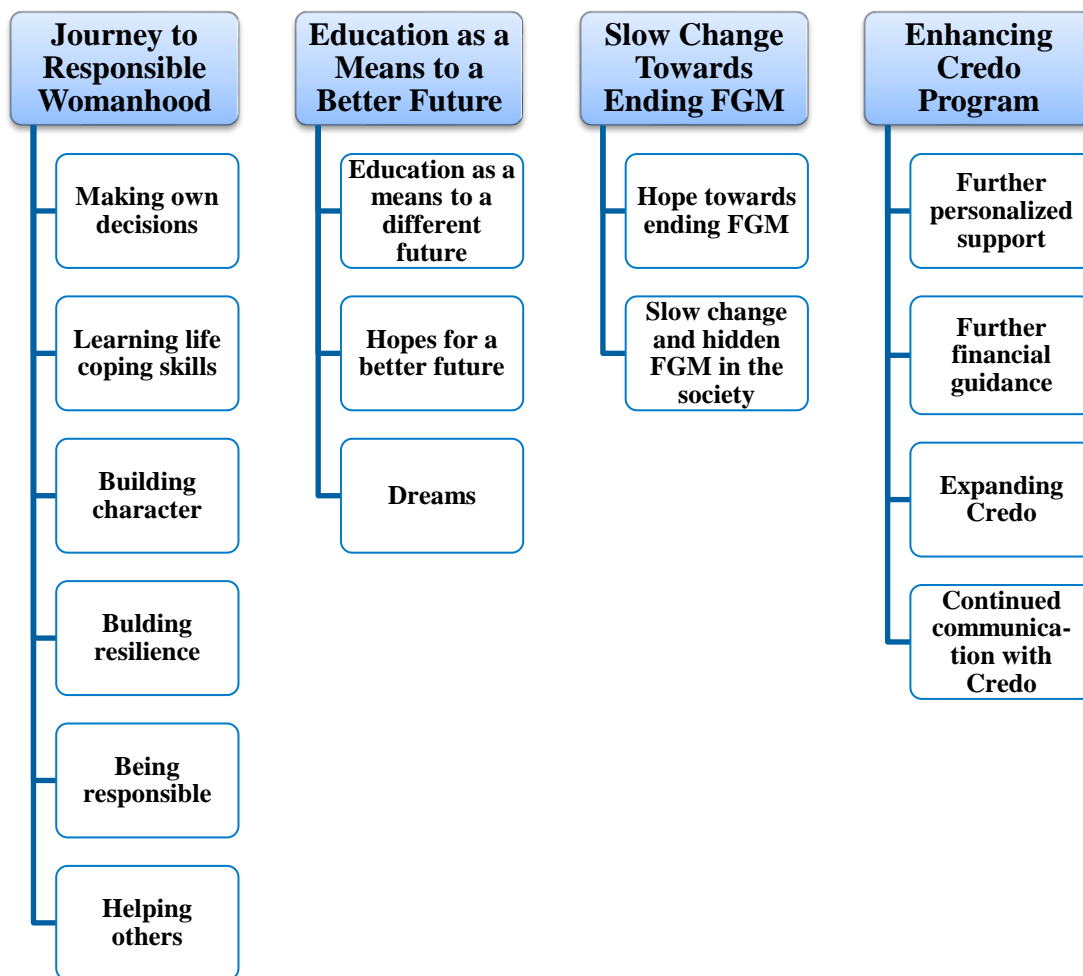


FIGURE 7. Credo girls' future perspectives

7.3.1 Journey to Responsible Womanhood

As mentioned above, the informants came to Credo program when they were still teenagers or even younger. The informants explained how they were so young, they did not even completely understand the situation of FGM. After escaping from home, their teachers were talking on their behalf until they really understood. As one informant explained she was very young, and her parents did not explain to her FGM and what was expected of her after. She was rescued by her school teacher after her elder sister underwent FGM and had complications.

So for me, I did not even understand what was FGM, because I even got scared. (informant 8)

So actually when I was in high school that is when I realized, oh so this was serious. That is when I got really to understand Credo. (informant 7)

Many stayed with Credo program through their primary, secondary and even college/university education, for a duration of about eight to thirteen years. During this Credo journey, the girls reached adulthood and became women. For the informants womanhood meant being able to make their own decisions, having enough life coping skills, building character and resilience, being responsible and helping others.

Becoming women came with the possibilities and duties to *make their own decisions*. As the following informant explained, she is over 18 years now and:

I just see myself as a lady. Right now I can make my own decision. It's not a must I include someone to make, we have to do this. I have to make my own decisions. (informant 1)

I was not able to make good decisions, I was thinking life is not good. But now at least through Credo I am able to make these decisions and do something. (informant 5)

The journey to womanhood also meant *learning enough life coping skills* to be able to face the challenges and demands brought by life. The following informant shared from her own experiences about the challenges in life and explained how she has been able to talk to younger girls as well:

I just tell them, life is hard. Learn and get the skills in life and come near to God. Everything will be ok. (informant 4)

I used to see myself as an able woman, because I got enough skills. I can even be able now to look for employment or for job. I can even learn to stand for myself. (informant 2)

As the above informant expressed a part of womanhood was also learning skills through education and having the possibility to be employed. Additionally, the informants explained how they had been able to gain more social skills through Credo program. Especially the yearly Seminars had given them a chance to communicate with others, and in so learn more social skills.

I got skills for life, like how do you live with people, like socialising with people, the way you can stay with people, the way you can communicate

with people. I got that skill through Credo, like how to have respect. (informant 2)

Moreover, the journey to womanhood helped the informants to *build their character*. One informant explained that she has upgraded in her character as a woman, because of her journey and the struggles she has been able to overcome:

And even the things I have been doing, they are very different up to this point. And I have also upgraded in terms of character. (informant 8)

I have my own principle, I know what is bad and what is good. Now I know working hard in school can enable you to go far away and to get good things. (informant 2)

The above informant had also been able to develop her character through the challenges in her life, and by learning good principles. She was attempting to follow the good principles in her life, which were closely connected to Christianity and the Christian way of life. Additionally an able woman can learn to stand for herself and can have a say.

Many of the informants also explained how the journey to womanhood had not been easy, but a journey of personal growth, of overcoming challenges and *building resilience* on the way.

I can say I am proud of myself, for real. I am really proud of myself, but for everything you have to be patient. Nothing comes easily, nothing. (informant 7)

Though there is many challenges in my life, but we have to overcome challenges. Don't give challenges to overcome you. You overcome challenges. (informant 2)

For one informant overcoming challenges meant finding ways to complete her college education without having a computer for her studies. For another overcoming challenges meant being able to trust God for provisions in life, such as food. Coming from a large family, it was sometimes challenging to afford enough food for everyone. Another informant explained how she grew up in poverty until she became strong, and came to understand her own rights as a woman. She gained self-esteem as a member of the society who can be proud of her achievements.

Finally, womanhood brought further *responsibilities* for the informants to take care of their own families and children, but also help their families back home in the rural villages. One informant explained how she had been able to learn more about responsibility during Credo Seminars: “*About being a responsible person in the future, being a responsible woman in the future. And then I able to acquire that knowledge*” (informant 2). For her responsibility meant being able to manage her child, but also volunteering in the community to help vulnerable individuals. She also had dreams of being a responsible woman in the future by being able to sponsor a needy child to get their education, like Credo program has been helping her.

Another informant was hoping to continue further with their studies, but currently her responsibility was with helping her brothers and sisters to complete their primary and secondary education.

Like right now my worries are that I am already supporting my brother and sister. So I have to stop first, so if for example, I didn't have those responsibilities, then I could have continued. But now I am working to support them. That is a new challenge, but I have to go on. (informant 5)

The final part of womanhood for the informants was the responsibility of *helping others*. All of the informants talked about helping someone; their own family, fathers, mothers, community, younger girls, neighbours, orphans, brothers and/or sisters. For example, the informants wanted to help their parents come out of poverty, but also to empower other young girls to be able to escape FGM and early marriages to find their potential in the society.

Now I am just a proud woman, or a proud lady. I am just trying to help my parents to come out from where they were. To go somewhere else in life. (informant 6)

Credo has changed my life so very, very much. Even I don't know how to say. Credo helped me to be where I am now, to be somebody who I am now. Because now she brought me from unknown area, up to the area where I can now say, I can be somebody who can help other children or other rescue girl. Because Credo help me 1st of all to get education. (informant 2)

7.3.2 Education as a Means to a Better Future

The informants were able to see a brighter and better future for themselves with the possibilities and opportunities education and escaping childhood marriages had brought for them. With Credo program's help, they were able to escape circumcision. Some of the possible complications of FGM as described by the informants were bleeding, difficulty during childbirth, infections and sexually transmitted diseases like HIV/AIDS if the cutters use unclean equipment, and even death. As the following informant explains, she was saved from circumcision:

Credo workers took me in, so I was saved. My dad came to know the rights of a girl. Now I never passed that. (informant 6)

Because to cut someone's, some private parts, it is not good, it is not good. Because you will not even be proud of yourself again. (informant 6)

Many of the informants shared stories of their relatives and other girls in their villages who had undergone FGM, and the complications it had caused for them. The Credo girls themselves felt that FGM is not important. They were feeling fortunate that they were able to escape FGM and early marriages, because it can be very miserable and hurting to give out a young girl to marriage.

Even last year my own cousin got circumcised, and she bled until someone was asked to donate blood. (informant 8)

I met a girl and I started crying. Being forced to old, old man. Not even grandfather, but grand of grandfather. They stop like after being circumcised, they stay like two weeks, and after that given out for marriage. Even the wound it was not healed. How do you feel? For me I cry, and then I tell God enable me to stop this. (informant 2)

Without Credo's help, the informants explained their destiny could have been forced into arranged and early marriages to men they might have not even known. After getting married they would have had to drop out of school to take care of the household, and would have started a family immediately. The informants said they might even have up to ten kids by now if not for Credo program's help, or might be some old man's sixth wife.

In fact the guy who came to ask for my early marriage hand, died. So I could have been right now a single mother, with no education, with nothing, so the poverty will continue. (informant 7)

So you can now imagine a person at 21 having 5 kids. They go there, you will be given an old man, who don't even have anything to give you. Just giving birth, and that's the work that you will do. (informant 1)

With the support from Credo program, the informants were able to see to face their future as educated, inspired, working females in the society with the skills to get through life, not only housewives. The best part of Credo program for the informants was the possibility to continue with their education, and *education was seen as a way to have a different and better future.*

So I think there are many opportunities in my life. Now they all came true after my education. After my education maybe that is the time I will get maybe a husband. Or I will get back to my family and help them. So that is really the major one leading to the rest. (informant 1)

I can see when you have education, life is better. (informant 4)

Education was seen as being important and empowering. For example, with education it is possible to help other younger girls, and to know that girls and women have say in the world also. Additionally with education it is possible to become successful. Education had made a different life possible for the informants.

So that they can see they have empowered me with education and heard a lesson. Even I have received that education from them and I have produced fruits. (informant 2)

Now I can say my children's future will be good, because now I am learned, and I want my children to be learned like me. It's not the way our parents were. (informant 6)

Education provided the informants with the possibility and *hopes for a better future.* Education was seen as a means to a better and brighter life; of getting employed and having the possibility to support one's family and children financially. Education was also seen as a means of going far in life and achieving one's goals and dreams.

Credo have helped me to be where I am. I have my work, I can get something of what I am proud of. (informant 6)

My future life, at least I am seeing some light for me. When I am just asking God to walk with me up to the end of this journey. So that some people can believe that people finish school, and even whether circumcised or uncircumcised, people achieve their goals. (informant 8)

The informants' *dreams* for the future consisted of completing their studies and getting employed, getting married, and having a good and better life for their family.

I have big dreams. Sometimes I can even think overnight, and I'm like oh God. Just finishing this school and getting employed. And I really want to live a good life, or for my kids not to have to live the life I have led. Maybe me I went through some sad challenges, so I don't want to imagine my kids going through the same. (informant 1)

Furthermore, some of the informants hoped for financial stability, especially having enough money to have the possibility to continue further with their studies to a higher degree. One informant explained her financial needs as follows:

I was thinking maybe next year, God willing. Maybe 1st my child to go to good school, that is one thing. And then also I buy plot and then I build. Car maybe, car is later when I am stable, when I have my own home. (informant 4)

Some of the informants wished to travel the world, and especially to come to Finland to thank their sponsors in person. They wished to share with the sponsors concretely what they had been able to achieve in their lives and also to bless the sponsors.

And even me I want to go and see Finland one day. Not just people from Finland coming to see us and we have never went there. We want even those people to be proud of those people who have gained education from them. (informant 6)

In addition, the informants mentioned dreams of expanding Credo program to more marginal areas of Kenya to help more girls and/or having the possibility to help younger girls in their own communities in other ways to escape FGM and have better lives through education. For example, Credo could open a rescue center for girls who are orphans.

Even God will enable me to finish my studies. If I got job, we have to return hand to Credo. If to contribute something for other girls, we will contribute. So that we can help all to expand, to expand this program to be bigger. (informant 2)

We can also do a helping hand as Credo. We can also fight to the FGM activities by us who are here. I will be able to help these girls. I will be able to reach out to my area. (informant 5)

Finally, the informants also mentioned dreams of helping their own families; their siblings and parents to have a better life. A better life meant possibilities for their siblings to get education, and also helping their families to have good living conditions and needed resources for a good life.

So my motivation is just to work hard and get my degree, and also get somewhere to work and also help someone in the future. (informant 1)

When you get helped, you have to help others, that is how the circle goes on. (informant 7)

In addition to a better future for themselves, the informants also saw and hoped for a better future for the coming generations. Many of their younger sisters and female cousins have been given the possibility to continue with their education and their parents are paying for their school fees. This is bringing changes in cultural norms of girls and women as primarily housewives. As the following informant explained, she was really angry with her relatives who were pressuring her to undergo FGM, and blaming her for not being circumcised, and wanted to prove them wrong: *“I have to be a good example to them. I want them to come back and say sorry” (informant 1)*. After completing her secondary education with good grades, her relatives started following her example: *“Now my --- saw the good thing about not going through FGM, so they are now following the same path for their girls not to go through FGM” (informant 1)*.

7.3.3 Slow Change Towards Ending FGM

The informants were also having hopes and seeing changes of ending FGM in their communities. These changes are however happening slowly, and FGM is still taking place hidden especially in the rural villages of Kenya.

The informants stated that attitudes towards *changing the society and ending FGM* are seen in their rural communities. Especially in families where the children are educated and have college degrees, the girls are not undergoing FGM. The parents are respecting and listening to their educated children to learn about the risks of FGM.

Because we have families there where the first kids who went to school are still the young ones. They don't have anyone who has gone to college or university or high school. So no one is having that mind set, broad mind set of not to go through FGM. But if you get some families who have a college student, they will talk to their parents; this is not good, and this and this, we should do this. Girls are still good not to go through FGM, and they will really change. (informant 1)

And since my dad saw me at home, actually he has changed. He doesn't have that hard heart when you tell him something. Dad I don't like this, this one you are doing it wrong, he just says ok, we change it. (informant 7)

Additionally, an important factor for bringing change in the communities is concretely seeing the possibilities that educated girls and women have to earn a living, help their families and participate in the society, as explained previously in the sections above.

I am just proud of who I am today. I am a mother of two, and Credo have helped me to be where I am. I have my work, I can work. I can get something of what I am proud of. (informant 6)

For some of the informants World Vision had played an important role in their communities in teaching about the risks of FGM and also educating the people about alternative rites of passage. This has brought at least some change in the area towards ending FGM, and has improved girls' chances to continue with their education. For the informants personally, ARP did not have a major role in reaching adulthood. One informant explained that she could say her education and the yearly Seminars Credo organizes could be seen as alternative rites of passage into her adulthood. Or that celebrating birthdays could be an alternative way of replacing ceremonies dealing with FGM. Some other informants had heard about ARP, for example, during their studies at their campus or through the television, but didn't have any personal experiences relating to them.

In Kenya they are, but I have never associated myself with them because they don't deal with Christianity. (informant 4)

Despite having hopes and seeing changes towards ending FGM, these *changes are happening slowly*. However, the informants themselves and their colleagues are not practicing FGM, and are showing this example to younger girls. That FGM is not important, it can harm them physically. And that early marriages can lead to difficulties as well.

Circumcision is not the only solution for the future, because circumcision will end one day, because it is now illegal in the government. (informant 4)

Though there are some few other people who are still practicing it, but not like the past when we were really suffering. It was something that should be must those days. But the level it is right now, it is really reducing. (informant 5)

The slow change is seen especially in the rural villages, as the informants expressed that they had to help younger girls discretely, because they can be seen as bad for talking about ending FGM or directing young girls to get help.

The situation is still a bit challenging, because sometimes their parents are harsh, and if they get any information that you are the one who directed them, you will be in trouble. For sure. (informant 3)

So it is dying, but it is not dying fast. It is dying slowly. (informant 7)

FGM is also taking place *hidden or secretly in the society*. As the informants explained, FGM is illegal in Kenya, but sometimes girls go and secretly undergo FGM without telling their parents. Because they still believe it is important for them, or their circumcised friends or boyfriends pressure them until they eventually give in and are circumcised.

The situation about FGM is that it is still there, and people are doing it secretly. Secretly, I mean the girls, there are girls who want to undergo that. Because it is the culture, most of them they still believe it, they still believe, that it is very important for them. (informant 4)

Those things are still going on, but silently. People are still doing circumcision. Girls themselves they agree and do it at night. They believe that if you are not circumcised a --- man cannot marry you. Or you will get married and people will start laughing at you. Or you are a baby. Those tradition things. It will take some other years for the thing to disappear. (informant 7)

7.3.4 Enhancing Credo Program

The informants also had an opportunity to share their needs and views to further enhance the work of Credo program. They expressed their needs for further personalized support for finances, career planning and one-to-one psychological support. The

informants also brought up the importance of financial guidance for all the girls. Additionally, they also shared their views on expanding the work of Credo program. Communication with Credo could be continued by personal interactions and by extending the yearly Seminars. Finally, the informants expressed their huge thanks and gratitude towards the program.

For *personalized support*, the informants wished for more financial assistance from Credo program. One informant was staying in an apartment off the college campus, because she felt it was safer for her. She was hoping for assistance from Credo program to pay her rent. Another informant needed a laptop to be able to access the learning materials online from off campus as well. A third informant hoped that if she is not able to find employment herself after completing her studies, Credo could help to connect her with a job if possible.

Actually it was the one that I was saying about me paying the rent. It's just what is really challenging me right now. So that is the only thing, I have nothing else to complain about. But actually I was just requesting, if it is not possible for them, then good. I still really appreciate them. (informant 1)

As for me, according to the way I am studying now in university. So the challenge I am passing through now, you see the phone I am using. That cannot work in studies. So the help I need is just a better, something for the studies, like laptop. So that I can be able to access my studies. (informant 2)

Additionally another informant felt that she would have needed concrete one-on-one psychological support, and advice from Credo workers during her studies when she was still completing her primary education. She was suffering a lot because of verbal abuse from her superiors in boarding school, and hoped that Credo workers would have asked her how she is doing and given her advice during this hard time:

So there are some people, especially those who come from terrible, I don't know, very harmful ground, they need one-on-one. Sometimes they might be suffering even if they are here, but they are afraid to say it. Or they feel like those people in Credo, they don't even know where I am staying, if I am okay, or I am facing what. (informant 7)

She felt that for some reason her suffering as a young student was not heard during the yearly Seminars and would have needed more personal support keeping in mind confidentiality.

Furthermore, the informants also expressed the importance of teaching the girls about *finances and saving* while also keeping in mind their life after education. Because Credo program supports the girls financially during their studies, but they should also have something in store if they don't immediately get a job after graduating.

Nobody talks to you about, you have to save. And after all we believe that when someone reach that level, after form 4, you start now depending on yourself. So suppose now you have nothing. Because I know how --- community is. If those girls cannot get someone to motivate them to do something, it is very, very hard ahead. (informant 7)

The informants also expressed their views on *expanding and developing the work of Credo program* to help boys also and reach the more interior places of Kenya.

I was thinking about Credo, because boy child and girl child, they are passing the same problems. If it is possible, why can't Credo also support the boy child. Because most of them they undergo problems, even if it is not circumcision. We should not just focus with the girls, because the boy child also they undergo many problems which are so painful. (informant 4)

I think the program now should go to interior places, because there are those children who are suffering there. To go and check, when they come to church, tell them to ask who has a problem, because many people has problems, but they cannot speak out. (informant 6)

An important part of developing the work to reach more community members was involving the Credo girls themselves in raising awareness about the program.

When we were here last year, we pray that God will give us good jobs, and give us good health, so that even us we don't only depend on those who are in other countries to support our girls. We can also do a helping hand as Credo. We can make Credo famous by us who are assisted to coming out and speaking about Credo. (informant 5)

Finally, one of the challenges for Credo's staff is the possibility to keep up and *continue communication* with the girls after completing their education. The informants unanimously agreed, and felt that the best way to stay in touch with them after

completing education is by personal phone calls, emails and social media. They also asserted that the yearly Seminars are also an essential way to stay in touch. And that if possible, the workers could organize Seminars where the elder girls are also invited and can tutor, mentor and encourage the younger girls. The informants also acknowledged that Credo has become like their family, and they keep in touch especially with the ELCK deaconess. Therefore, it is also on their part to actively reach out to the workers and keep in touch.

It has been my family, so I don't even feel like going out of them and not seeing them anytime I come. I just feel like remaining in touch with them. And also help someone if I get something. I can also procure to help, and even if I don't have something to help them with, I can even talk with them. (informant 1)

7.4 Thank You Notes for Credo Program

Finally, all of the informants expressed their *gratitude, appreciation, and huge thanks to Credo program*, Credo's staff and all of the sponsors for their support. The best part of Credo program for all the informants was the possibility and financial support to continue with their education.

It has motivated me now, that I feel like someone have really sacrificed his salary or his properties to meet me in school. It is not everyone who have that heart to help. No, it's not everyone. Even your own relative, they can't help you. But you get that person, who have really sacrificed a lot. They have never seen you, they just saw your pictures in the computers. But they are paying everything for you. It's not easy. It's really only God who knows how the heart beating. So you really don't want to disappoint them. (informant 1)

My point is to thank Credo for what they did. May God bless you day and night, I stay blessing these people. We also remember our sponsors and our missionaries. I thank them because they did something which is so good, so good. Because they have to know that they have a young lady who is now very, very happy, and very proud because of them. They have brought me from far away up to where I am now. So mine is to thanks only. (informant 2)

As mentioned above, art-based research was also used to collect data alongside the face-to-face interviews. The data from the art-based research enhance this gratitude and thankfulness the informants felt towards Credo program, and they expressed their

thanks and blessings through the thank you notes also. The informants first of all proceeded to thank the program and Credo's staff in their notes:

The most thing I would like to say to the organization is thank you a million times. (informant 7)

For the Credo family, thank you so much for always being there for me when I needed you. (informant 1)

Secondly, the informants also blessed their sponsors in Finland through the notes:

May God our Father in heaven bless you day and night, from your first generation to fourth one. May God protect you always with His blood and give you good health. May you stay in peace with your families. (informant 2)

I appreciate it, thank you so much. For those who have been sacrificing their finances for the girls, God bless them. (informant 4)

Thirdly, the informants wished God to bless Credo program through the notes:

May God expand your territories and also bless the work you guys are doing to help the less fortunate in the society. (informant 1)

May God keep Credo long so that they can keep on changing the lives of girls. (informant 3)

8 DISCUSSION

The objective of this study was to gain insight into the experiences of Kenyan girls about Credo program in relation to their health and well-being, and to describe what kind of possibilities the girls have faced in their life with and after Credo. The focus was on the holistic and multidimensional health and well-being needs of girls, and the possibilities that being well can bring to one's future.

According to the Kenyan girls' experiences, Credo program improved their health and well-being and enhanced their possibilities to achieve their subjective goals of a better future. Credo program supported the girls' personal development, as well as spiritual and social life. Credo made a better and good life possible for the girls as they were feeling more content, satisfied and happy in their lives. Credo also supported the girls' journey into responsible adulthood, where they were able to make choices for themselves socially and economically, learn life coping skills, find employment and help others. Education was important in achieving this better future for the girls, and also significant in improving the possibilities for the girls to be accepted as mature, respected and productive members in their communities, and act as positive agents towards ending FGM. There is hope towards ending GFM in the girls' communities, but this change is happening slowly.

8.1 Discussion of Findings

This study provides insight into understanding comprehensive health and well-being needs of girls at risk of undergoing FGM and childhood marriages. The determinants of health affected the holistic health outcomes of the girls. External constraints out of the girls' control limited their possibilities to achieve good health that having access to education despite of their gender could have improved, such as making positive health choices concerning their reproductive and sexual rights. Due to the circumstances, the girls were at risk of human right violations in violence against girls and women, and harmful traditional practices that can result in ill health, affecting their health and well-being indirectly. (Sethia et al., 2018; WHO, 2017.)

It was important to understand these multidimensional circumstances of the girls, including socioeconomic factors, culture and traditions when considering their comprehensive health, well-being, life and future perspectives. The girl's health and well-being needs were holistic; in addition to the financial support to continue with their education, there was also need for psychological, spiritual and social support. One of the further needs for the girls was personalized and individual psychological support. Possible psychological support should be presented with an understanding of each girl's individual context, as well as sensitivity, because some girls may not be willing to speak out in group settings during the Seminars.

Credo program supported and enhanced the girls' psychological, emotional and subjective well-being as they were feeling more content and satisfied, and were able to achieve and accomplish things in their lives. (Heginbotham & Newbigging, 2013; Schmidt & Leonardi, 2020.) Additionally, gaining self-esteem and confidence to understand one's possibilities can be an important part of empowerment to take action (Cornwall & Edwards, 2014). The girls were also able to take action in their lives, and had possibilities and needed self-esteem to build resilience and function in the society towards their goals and dreams.

Further enhancing the girls well-being according to their experiences was the spiritual support Credo program provided through Christian teachings and personal growth in faith to find meaning, peace and hope in their lives. The girls were thankful for the blessings from God, and hopeful for His provision and guidance in their lives. Even though there were challenges in their lives, it was important for the girls to come near God. These findings coincide with previous literature where spirituality has been linked positively to well-being, but can also give understanding to the negative experiences and challenges in life as a whole. (Schmidt & Leonardi, 2020; Teinonen, 2007.)

Additionally, the girl's expressed that through Credo program they were able to form meaningful, caring and positive social relationships. These findings are supported by Heginbotham & Newbigging (2013), where social cohesion and interdependence are important for social well-being. Credo's support network provided a place for the girls to belong, be included, supported and to know their rights as girls and women. Peer support was important for motivation, but also gave possibilities for the girls to further help younger girls back home in their rural villages. Being able to participate brought

responsibilities of taking care of oneself and family, but also contribute to the community.

It is noteworthy to mention that the want to help one's family was constant through the findings, even though some of the girl's family members had originally pressured them to undergo FGM, and had even cursed some of them. An important part of social and familial well-being according to the girls was the feeling of being accepted and respected by one's family and the society at large (Heginbotham & Newbigging, 2013). It is possible that these findings may partly be explained by the Kenyan communal society, where the well-being of families and communities as a whole is valued, and the extended family has a meaningful role in everyday living. Interdependence is seen in the collective lifestyle, for example, the household chores and taking care of the children is a shared responsibility among females of the house. A sense of belonging, co-operation and unity are additionally important in communal societies. (Cultural Atlas, n.d.; Takayanagi, 2016.)

Eventually, some of the girls' families were proud of their achievements and supportive of their future prospects. The girls experienced that education played an important role in achieving this, as well as being able to help one's family financially after employment. This is supported by Muhula et al. (2021), where educated Maasai girls have been successful in their careers, and have been able to help their families financially. Education overall has been found to be an important factor as a determinant for one's ability to earn an income (Mwaiko, 2017).

Graamans et al. (2018) also propose that educated girls can be more valuable to their families economically than the one-time received dowry. However, the girl's value should be seen as problematic. The value suggests that girls should somehow compensate their choice of not undergoing FGM, while physical integrity should be every human's right. Moreover, according to Muhula et al. (2021) and Mwaiko (2017), the value of a girl has been seen to vary depending on if they are circumcised. The dowry of a circumcised girl can be higher compared to the dowry of an uncircumcised girl. These factors raise risks for girls to get circumcised later on in their lives (Graamans et al, 2018).

Therefore, addressing the well-being of communities as a whole is also important. According to Varol et al. (2015) having access to basic needs such as water, food, security, education and health services as basic human rights in low-income communities is a step forward in the elimination of FGM. This is due to the fact that having access to basic human rights, as well as stable economic and social living options can decrease the need for circumcision and childhood marriages as the economic limitations are removed. This shows the need for multidisciplinary and interdisciplinary approaches in the area of global health, where the focus is on health equity on a global scale (Koplan et al., 2009).

Overall, the findings support insight into understanding why education can be seen as one of the strongest determinants of health, including possibilities to make informed decisions, bring changes to gender equalities and supporting community well-being in general. Education is also important for the empowerment of girls and women. (Sethia et al., 2018; WHO, 2017.) Credo program gave the girls a chance to continue with their education. The girls expressed how education in turn made hopes of a better future possible for them and enhanced their possibilities to be well. The girls were able to build resilience, and face their future as educated, employable, working females in the society with enough life coping skills and possibilities to make economic and social decisions for themselves. The possibilities for educated women to make decisions for themselves is supported by Sethia et al. (2018) and Takayanagi, (2016). Similar results have also been reported by Achia (2014), where educated women have been able to make informed decisions concerning their individual rights, health and well-being.

Autonomy in this study was, for example, expressed in the possibilities to make decisions for oneself financially, and also within the family in the possibilities to educate one's children, including girls. These findings are consistent with previous literature. According to Achia (2014), Muhula et al. (2021) and Mwendwa et al. (2020) educated women are more likely to have a say in matters relating to their own homelives and matters relating to their children, for example to seek other possibilities and not continue the practice of FGM. The findings of this study also further confirm that educated women are more likely to discontinue the practice of FGM (Ahinkorah et al., 2020; Schmöker & Nkulu Kalengayi, 2015; Van Bavel et al., 2017).

Furthermore, increased decision-making power has been seen to be empowering for women in order to protect their social and human rights (Muhula et al., 2021). The economic empowerment of girls and woman through education has also be seen in financial independence of individuals. (Muhula et al., 2021; Mwendwa et al., 2020.) In rural areas of Kenya, the financial contribution of educated women has improved their possibilities to make socio-economic decisions concerning their households, but is also bringing changes in gender relations as males are not the sole breadwinners in their families. These factors are bringing changes to power relations in the Kenyan society in the well-defined gender roles, where the man is the head of the household. Educated women have had more possibilities to participate in working life and earning income for their families, instead of primarily staying at home to take care of the household and the children. (Mwendwa et al., 2020; World Trade Press, 2010.) Therefore, education and empowerment of girls and women are also fundamental in decreasing gender equalities and thus are important in ending FGM (Schmöker & Nkulu Kalengayi, 2015; Takayanagi, 2016).

The hopes towards ending FGM in their communities and the possibilities to act as agents of change to help younger girls in similar situations to escape FGM and childhood marriages was another essential part of the girls' future perspectives. Education was seen as one of the main ways to have the possibilities and respect to talk about the risks of FGM in the rural communities. Similar findings have been reported by other studies, such as Dalal et al. (2015) and Takayanagi (2016). Educated community members can play a big role in sharing information about FGM to their relatives and friends to raise awareness which can lead to sustainable change towards preventing the harmful practice (Van Bavel et al., 2017; Waigwa et al., 2018).

Another factor bringing change towards ending FGM in this study's context were the examples the mature girls were able to set to their families in being able to find employment and help their parents, siblings and communities financially. A study conducted in Pokot concurs that real life examples can be helpful for bringing social change and counter traditional norms concerning FGM. In the study educated, wealthy men were married to uncircumcised women in the community and had happy and successful lives. This showed other members in the community that marrying an uncircumcised woman had not been a curse, and did not result in sickness or unhappiness. (Brown et al., 2016.)

Overall, there are changes happening in the Kenyan rural communities towards ending FGM, but this change is happening slowly. According to the informants' experiences, this change is slow due to the traditional customs and beliefs. Especially elderly people with low educational backgrounds still believe that FGM is important, and uncircumcised girls are still at risk of stigma, discrimination and rejection in the community. However, because FGM is illegal in Kenya, it is secretly performed in the communities. (Muhula et al., 2021; Mwendwa et al., 2020.) This study's findings are in agreement with this secrecy surrounding FGM being a factor in the slowly dying practice, and one of the challenges for girls and women to be positive agents in their communities. As Van Bavel et al. (2017) collaborate, FGM is deeply rooted in tradition and cultural identity. This brings challenges to the those working towards ending the practice who may face opposition from within the community as being seen as bad.

Differing to many studies, ARP were not highlighted as an essential part of the personal experiences in regards to reaching adulthood in this study. The reasons for this may have something to do with the focus in the interventions of different faith-based organizations and NGOs working in Kenya towards eliminating FGM. Despite this, according to UNFPA and previous studies, ARP have been found to be effective in Kenya (Graamans et al., 2018; Mwenda et al., 2020). Muhula et al. (2021) state that especially community led ARP have been effective in not only decreasing FGM rates among the Maasai in Kenya but also decreasing rates of early childhood marriages and early pregnancies.

To conclude, it is easy to understand why the girls expressed their huge thanks and gratefulness towards Credo program, the staff and the sponsors in Finland. As the findings show, the informants stated that they were able "to reach where they are now, and have what they have now because of Credo program", and it had changed and improved not only their own lives but also their families' lives. Therefore, many had dreams of expanding the work of Credo program to help more individuals in their communities.

Because if not for Credo, I could not be here. So my mind is very much thankful back to them. Tell them, I am so happy. I am so happy. (informant 2)

8.2 Utilization of Findings

The study findings were presented to the working life partner Credo program in the fall of 2021, and were discussed with possibilities for further developmental work of Credo. Some possible topics for the upcoming Seminars were discussed to be focusing on life coping skills coming from the context of the girls, for example, stress-management skills or debating skills, as many had hopes of helping younger girls in their communities. The importance of Credo working more closely with boarding schools was also brought up as a possibility to strengthen further psychological support needs especially for the girls when they are still underage. Additionally, there may be need for another backup person in addition to the ELCK deaconess, who is easily approachable, can relate to the girls' experiences, and can offer support and guidance when needed.

The possibility to organize a larger Seminar including the girls' family and community members was also discussed as an important way of bringing awareness in the communities. Moreover, it was discussed that it could be beneficial to present the findings of the study in the upcoming yearly Seminar especially in encouragement to the younger girls, as a way to understand the importance of education, but also the significance of self-motivation. Some of the older girls from Credo could be a part of this Seminar and act as motivators and mentors for the younger ones.

This was also brought up as a viewpoint of interest from the side of Credo program; understanding how the underage younger girls understand and view their possibilities with Credo program, and understand the meaning of their own self-motivation. For developmental purposes, it would also be beneficial for Credo program to understand the girls' experiences who were less successful with their studies, and did not continue with their education. Finally, the significance of Credo program's work from the viewpoint of the girls can also support awareness of the importance of continuing sponsorship to interested individuals and stakeholders.

The findings of this study are mostly supported by literature and previous studies. Despite being a sensitive topic, FGM is also important in the light of global health, and there is still work to be done to achieve the goal of SDG 5.3: to end the harmful practice of FGM and forced childhood marriages, and to empower girls and women at all levels.

(UN, n.d.) Additionally, due to the Covid-19 pandemic, there is increased risk of GBV for girls to undergo FGM and forced marriages due to schools being closed and girls staying at home. Therefore, there is need to raise awareness and protect and promote the rights of girls and women even in the most vulnerable and marginalized communities. Interdisciplinary action from stakeholders is needed to help girls at risk of undergoing FGM and forced childhood marriages amidst the pandemic. (UNICEF, 2020.)

8.3 Ethical Considerations

In this study The Finnish National Board of Research Integrity (TENK) guidelines were followed in research ethics of human sciences and responsible conduct of research. Ethical principles were kept in mind through the whole research process, especially focusing on respecting the autonomy and dignity of the informants, and preventing harm or risks. The topic of this study can be considered to be a sensitive, and the most important aspect was making sure the anonymity of the informants was maintained. The objective, aim, and methods of the study were explained to the informants verbally and also in written form in the Letter of Intent (see Appendix 1) before asking for their voluntary consent. The informants were also reminded that they can withdraw from the study at any point if they wish to do so. (Holloway & Galvin, 2016; TENK, 2019.)

Because of the sensitivity of the subject and the situation of the informants, all of the informants were above 18 years of age, and were able to give written consent themselves to participate in the study. The interviews were conducted in English, as all of the informants were able to understand and speak English fluently, and had completed at least some of their higher educational studies in English. (TENK, 2019.) Researcher's role was explained to the informants as an independent party, only working in cooperation with Credo program. This also encompassing the fact that researcher was the only one with access to the collected raw data. (Kylmä & Juvakka, 2014.)

Sometimes sensitive topics in health research can also give a chance to the informants to share their stories, and in this way the process may be a an experience of empowerment and self-awareness. The research questions were formed keeping this in mind

with an emphasis on the informants' experiences of their current and future lives. (Kylmä & Juvakka, 2014.) Additionally, because of the sensitive topic, researcher used a semi-structured questionnaire, so that the informants were allowed flexibility to talk about issues they deemed were important and meaningful for themselves. A few of the informants were very emotional while telling their stories, and a short break was kept before continuing with the interview questions. During the interviews, time was given to each informant to tell their experiences without disruption or hurry and researcher's role was to remain neutral yet empathetic. (Holloway & Galvin, 2016; Kylmä & Juvakka, 2014.)

Keeping in mind responsible conduct of research, research integrity and accuracy were adhered to throughout the whole research process. Permission for this study was granted by Credo program's managers from LEAF after the research plan was approved by the Master's Thesis supervisors from Diaconia University of Applied Sciences (Diak) and Arcada University of Applied Sciences. While writing the report, Diak's guidelines for thesis work were followed, and citations and references were used as instructed. (TENK, 2012.)

Regarding data handling, the transcribed interviews and art-based documents were only seen and handled by the researcher. No names were used in the tapes, transcriptions or art-based documents and the transcripts were kept safe in a password locked computer, which was only in the personal use of the researcher. The recorded files from the audiotape were also deleted after the files were transferred to the computer. A third party did not listen to the records as the researcher did the transcribing personally. (Holloway & Galvin, 2016.)

During the analysis in this study, consideration was paid to remain true to the informants' experiences without subjectivity. While reporting the analysing process and the findings, attention was paid to openness and honesty, while keeping in mind the informants' anonymity and confidentiality. Consideration was paid as not to use information in the findings containing identifiable characteristics regarding any informant. (Holloway & Galvin, 2016; Kylmä & Juvakka, 2014.)

Informants were offered a small snack and a cold beverage on arrival to the office where the interviews took place, which was seen as a culturally appropriate gesture of

appreciation and welcome. As a thank you, a small gift was also purchased for every informant. This was discussed with working life partner beforehand to be a small key-chain in the form of a cross to go along with the mission of Credo program to uphold Christian values. These were handed out after the interviews were completed and the informants did not have prior knowledge of this, as not to be seen as an incentives to participate in the study. Researcher did not receive any financial support for this study (TENK, 2012).

8.4 Discussion of Trustworthiness

In this section trustworthiness of this study will be examined through credibility, dependability, reflexivity and transferability, which are commonly deemed appropriate to be used in qualitative methodology. For transparency and integrity, both strengths and limitations of this study will be considered and reviewed in these areas. (Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

Credibility refers to how truthfully the findings portray the informants' personal experiences and meanings important for them. The researcher's background and prior knowledge cannot be removed while conducting research. Because of this, while considering the theoretical framework of the study, only a brief literature review on the topic was performed before formulation the research questions and questionnaire. After the findings were presented, literature review was resumed. This was done to ensure an objective approach to the research process and presentation of the findings as deemed meaningful from the Credo girls' experiences. (Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

During implementation of this study, art-based research was used dually alongside the in-depth interviews to collect richer data. The recorded interviews gave the possibility to document the narratives reliably word to word. Before conducting the interviews, it was made sure the audiotape was functioning, and there were extra batteries at hand. The questionnaire was used as guidance, and before ending each interview it was checked that all of the questions had been asked from each informant. (Hirsjärvi & Hurme, 2011; Kyngäs et al., 2020.)

Furthermore, keeping in mind credibility, a research diary was kept where notes were written down after each interview of the main concepts and experiences rising from the data. Research diary was also used to record other observations relating to the informants, the interview setting and researcher's personal reflection. (Kylmä & Juvakka, 2014.) The saturation point was reached during data collection while also maintaining a broad range of experiences from different informants. During the preliminary analysis, answers were provided for the objectives of the study from the eight informants, and the contents of the interviews were starting to be repetitive. For this reason, further individuals were not interviewed, even though one of the proposed informants had to cancel due to timetable challenges. (Kyngäs et al., 2020.)

Timewise the interviews were completed over a three day period preceding Credo's yearly Seminar, to which all the eight informants were invited to, in addition to other girls/women from Credo. LEAF missionary from the program also asked researcher to join this Seminar. Researcher had about 30 minutes time set aside on Seminar day, with the possibility to explain about the Master's degree studies, and also shared some preliminary results with the Credo girls from the interviews. Researcher prepared for the Seminar by going over the interviews and identifying major topics that came up in the text. A few of the informants gave feedback that especially the context of FGM in light of human rights and gender inequalities in the Kenyan society is important in understanding the slowly changing attitudes towards FGM. Additionally the possibilities to have a better life with education and thankfulness towards Credo program were agreed to be meaningful and essential parts of the Credo journey. This was important as credibility can be strengthened by having the possibility to discuss the findings with the participants or informants of the research (Kylmä & Juvakka, 2014).

One of the limitations to credibility in this study was the prolonged time of transcription and completing the study. Some of the interviews were transcribed right after the data collection, but the process was continued after the 18 month statutory leave of absence. Of course as the transcription was done personally by the researcher, there can be some human mistakes in the accuracy. However to prevent this, the records were carefully listened to multiple times to recheck the transcripts were done as accurately as possible. (Hirsjärvi & Hurme, 2011.)

Dependability refers to assessing the quality and consistency of the research process. Dependability is viewed throughout the whole research process from the starting point to the end, and can be improved by documenting the whole process step-to-step so that the reader can follow and understand the process in detail. Qualitative methodology was chosen for this study, and it was successful in creating narrative data and descriptive documents about the informants' personal experiences. The qualitative approach used in this study gave insight into the Credo girls' experiences, and objectives set by the research questions were answered. (Kylmä & Juvakka, 2014.)

While writing the report of this study, the attempt was to document and explain the whole research process transparently and in detail including information in the appendixes, tables and figures. Tables and figures were used to explain especially how the data analysis was conducted to reach the specific number of sub-categories, and categories. Sample size was deemed to reach saturation as it was possible to organize the data into further sub-categories and categories. Direct quotations from all of the eight informants were used while reporting to show a link between the data and the findings. (Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

There are some limitations to dependability in this study as the researcher did the analysing individually, without feedback or peer-review from other researchers in the same field (Kyngäs et al., 2020). Data analysis was however discussed with thesis supervisor to get feedback and input on the abstraction process and reached categories. It is also argued that qualitative analysis can be done without help from someone else, and sometimes researchers can reach differing viewpoints while interpreting the same data. This does not necessarily decrease dependability, because it can give further understanding of the study topic. (Kylmä & Juvakka, 2014.)

Reflexivity refers to the researchers self-awareness of their own background and conscious reflection of this throughout the whole research process. Especially when dealing with sensitive and emotional topics, where profound sympathy and empathy for the informants may arise, it is important to acknowledge reflexivity. This ensures that researcher's personal values or bias would not influence the research and its findings, while accepting that these values are still a part of the process. (Green & Thorogood, 2018; Holloway & Galvin, 2016; Kylmä & Juvakka, 2014.)

While dealing with the sensitive topic, researcher tried to remain empathetic when listening to the informants' experiences. At the same time attention was paid to keeping a professional distance, remaining neutral, objective and non-judgmental during the interviews. Additionally, doing the interviews face-to-face gave the possibility to ask defining questions when needed to understand and verify the informants' experiences, and also make sure the informants understood the intended question. The openness of the research questionnaire also allowed the informants flexibility to talk about concepts deemed important for themselves. (Holloway & Galvin, 2016; Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

Furthermore, researcher acknowledged her gender as a female when viewing FGM and the rights of girls and women, and the educational background as a healthcare professional during the formation of the questionnaire and analysing process. Green & Thorogood (2018) state that in practice qualitative analysis is not solely inductive or deductive. Abductive traits were also seen in this study especially when generating the analysis for the first research question in ways that the researcher viewed health and well-being based on prior knowledge. This was kept in mind while focusing on answering the research questions to follow research integrity and truthfully depict the informants' experiences. Because of this, many direct quotations were used in the findings to remain true to the informants' voice. Direct quotations from different informants were also used when explaining each category to show a richer reality of the informants' experiences. (Kylmä & Juvakka, 2014; Kyngäs et al., 2020.)

Most of the experiences in regards to Credo program were expressed in a positive light by the informants. Of course as purposive criterion sampling was used, the informants were chosen by the staff of Credo with an aim to meet the objective of the study, also including gaining insight into the future possibilities of the girls. Due to this fact, some of the informants had already succeeded with finishing their education and were employed. This may have affected the findings of the study to represent Credo girls, who were well motivated and successful with their education, and might have limited the findings to give the broadest representation of experiences about Credo program overall. This study did not include experiences of the girls who might have not been as successful with their studies, or had dropped out of school along the way. Thus the findings should not be generalized, but viewed in the light of the study objective. Despite these limits, the study findings bring increased knowledge about the experiences

of girls in regards to education and the importance of Credo program in their support and future possibilities.

Transferability views how the study findings can be functional in other similar settings. For this reason, in this study the sampling and background characteristics of the informants were described in much detail while keeping in mind anonymity and confidentiality. (Kylmä & Juvakka, 2014; Kyngäs et al., 2020.) There are limits to this study's transferability as purposive sampling was used and the sample size was quite small. However, it is important to remember the objective of the study, which was to understand the girl's experiences from their own social context and viewpoint, and to show the meanings they deemed significant. Therefore the findings could not necessarily be transferred to a broader or similar setting. However, the whole research process was documented in as much detail as possible, so that the reader may be the a further judge of whether the findings could or could not be functional in other settings (Korstjens & Moser, 2018b).

8.5 Discussion of Thesis Process

The thesis process as a whole supported my professional competence as a Master's Degree student in Global Health Care, which was a joint programme between Diak, Arcada and the University of Eastern Africa Baraton. Doing the thesis strengthened my knowledge about qualitative research, including the flexibility of the framework where changes can be necessary after data collection. For example, the essential importance of education for the informants came from their experiences, and therefore education in the light of health and FGM was explained in detail in the theoretical background as the thesis process went on. Timewise the thesis was extended by the statutory leave of absence, but doing the data collection and transcribing personally, as well as maintaining a research diary helped me to stay immersed in the data in order to understand the informants' experiences from their social context.

As the subject was sensitive in the area of gender-based violence, it was important to reflect on my personal feelings as well, especially when transcribing and analysing the data and listening to the girls sometimes touching and intense narratives. As one informant stated, the experience of FGM and childhood marriage can be so hurting and

miserable to a young girl. It was clear how the circumstances of the informants, that they could not personally affect, played a big role in their journey of escaping FGM. Therefore, it was also inspiring to see the informants current situations where they were able to take more control over their lives, and hear their hopes and dreams of a better future, which were the emphases of this thesis.

Doing the thesis supported the development of my professional competence in understanding the underlying multidimensional factors of health and the importance of health as a human right globally. Education, and equal access to education despite of gender that one sometimes takes for granted in Finland, can be life changing for the well-being of individuals in numerous ways. As health and well-being are subjective concepts, everyone views life a bit differently bringing challenges to professionals to meet everyone's needs holistically. This requires deeper understanding of cultural sensitivity, interaction and respect when working with individuals from differing backgrounds.

I owe a big thanks to my working life partner Credo program for making sure the interviews could be carried out within the planned dates and for the well working settings to complete the interviews with the informants. The data collection was conducted in a way that did not bring additional costs to working life partner Credo. Most of the informants were living in Nairobi and did not require finances to travel for the interviews. As the interviews were conducted preceding Credo's yearly Seminar, some of the informants who came from other areas of Kenya received travel compensations from Credo program to travel for the Seminar. I covered my financial travel costs to Kenya and also purchased material for the art-based research.

9 CONCLUSION

This findings suggests that FGM is still practiced in Kenya due to traditional customs and beliefs such as readiness for girls to marry and reach adulthood as well as social expectations and norms. Adding to the risks of girls to underdo FGM include having families in the poor wealth quintiles and low educational level of their parents. Despite of the Prohibition of Female Genital Mutilation Act (2001) in Kenya, some communities still perform this harmful practice that violates the rights of girls and women.

The objective of this study was to understand the experiences of the Kenyan girls in their social context of escaping FGM and childhood marriages with the help of Credo program. The aim was to focus on the multidimensional and comprehensive health and well-being needs of girls, and the possibilities that being well can bring to one's future. The narrative and descriptive data from the qualitative interviews provided answers for the research questions from the girls' individual viewpoints.

The findings suggest that girls at risk of undergoing FGM need multidimensional and holistic support; physical, psychological, social and spiritual in order to be able to be well in their lives, and to have the possibilities to achieve their goals, and reach their full potential in the society. Underlying and multidimensional factors including economic, social, and cultural aspects matter and affect the overall health and well-being needs of girls. These factors are important to keep in mind when trying to help girls comprehensively to achieve their subjective good quality life. Having access to basic needs such as education, safety, needed healthcare services, and overall support from Credo program enhanced the girls' lives and future possibilities.

Education was important in achieving a better future for the girls including possibilities of autonomy to take control of one's life and make decisions concerning one's reproductive rights. Finding employment, having financial stability, and improved prospects to participate and act as positive agents in their communities towards ending FGM were also possible after completing secondary and/or higher education. Therefore it can be concluded that interventions focused on educating girls can be used to empower girls, but education also has an important role in the elimination of FGM.

Further research could focus on finding out what kind of specific psychological support could be valuable to the girls throughout their journey with Credo program, and the best ways to incorporate this into the program. More research could also be done among the girls' families and communities. Many studies show the importance of change towards eliminating FGM coming from within the community. Therefore, research could be done concerning on how to best involve the supportive girls' families actively in the prevention of FGM in their communities. On the long run it could be beneficial to support community development in becoming resilient about educating and upholding the rights of girls in order to promote persistent change towards eliminating FGM.

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APPENDIX 1. Letter of Intent

Dear participant,

thank you for taking your time and helping with this study.

Even though Kenya has banned female genital mutilation, it is still being practiced there among different communities. According to the Kenya Demographic and Health Survey (2014), 76.2% of Maasai women, and 97.0% of Kalenjin women think that female genital mutilation should not continue in the future. Despite this, there is still a high prevalence of the practice especially within the Maasai communities. One organization helping girls facing female genital mutilation is Credo program, that is managed by the Evangelical Lutheran Church in Kenya and funded by the Lutheran Evangelical Association of Finland. I am a student at the Diaconia University of Applied Sciences, doing my Master's Thesis with Credo program about the work they do and the possibilities Kenyan girls have gotten in life with the help of the program.

The objective of this study is to gain insight and describe the experiences of the Kenyan girls about Credo program in relation to their health and well-being, and to understand what kind of possibilities the girls have faced in their life with and after Credo.

1. What kind of experiences do the girls have of Credo program in relation to their health and well-being?
2. What are the girls' future perspectives?

The information can be used in helping and empowering other girls who are at risk of being genitally mutilated and also in further developing Credo's work.

For this purpose I am asking your help and I hope you can take a sometime and answer the following questions. The qualitative interviews will be conducted in English and the data will be analysed using content analysis. The plan is to do the interviews face-to-face and use an audiotape to record the data. Willing participants will also be given a chance to portray their journey with Credo through artwork. Materials for the artwork will be provided during the interview. The interview answers and possible artwork will be handled with care with the purpose to protect everyone's anonymity. No one's name will be mentioned and the information will be used only for this Master's Thesis.

Participation is voluntary, and you may choose to stop the interview at any given time if you wish to do so. The study should be completed by December of 2021 and the results will be published online at the web pages of Diaconia University of Applied Sciences. This study is done as a part of the Master's Degree programme in Global Health Care, that is a joint programme between Diaconia University of Applied Sciences, Arcada University of Applied Sciences and University of Eastern Africa Baraton.

If you have any questions, please don't hesitate to contact me.

Wishing you all the best,

Miriam Karjalainen

e-mail:

telephone:

If you are willing to participate in the study, you can give consent below before answering the questions.

Date

Signature

I give consent for the researcher to use artwork produced during the interview in the study.

Yes

No

Thank you for your time!

APPENDIX 2. Questionnaire

I. Background information

1. How old are you?
2. Describe your current situation in life:
Are you studying or working? Where?
3. Where are you living?
Are you living alone or with your family/husband/relatives/other?
4. How long have you been with the Credo program?

II. Joining Credo program

5. How and when did you first hear about Credo program?
6. How did you come to join Credo program? Please explain how the process went.
7. What did you need help with when joining Credo program?

III. Experiences of Credo program

8. Please explain how Credo program has affected or changed your life.
 - What kind of support or guidance have you received from the program?
 - How has Credo affected your life spiritually?
 - How has your social life changed? What kind of relationships have you been able to form through the program?
 - How have you been feeling in your life after joining Credo program? What kind of changes have you noticed in your life, health, or well-being?
9. What is the best part of Credo program? Why?

Credo program has helped you to remain uncircumcised.

10. Explain how this has affected your life.
11. If there is anything else you hope Credo would help you with, please explain.

IV. Community life

12. How have you been able to stay in contact with your family after joining Credo? If you have not been able to remain in contact with your family, please explain why.
13. Have you heard or taken part in any alternative rites of passage? If you have, what kind?
14. How have you been able to help other girls who are trying to escape female genital mutilation? If you have, please explain what happened.
15. How do you think attitudes toward female genital mutilation are changing in your community?

V. Future life

16. How would you describe your journey into womanhood?
17. How do you see your future? What kind of dreams do you have for your future?
18. What kind of worries do you have about your future or your situation at the moment? If there are some worries, please explain.
19. After completing school and finding a place of work, what kind of contact do you wish to have with Credo program?
20. What do you think would be a good way for Credo's staff to stay in contact with you?

What else would you like to share about Credo program or your experiences?

Thank you so much for your time!

APPENDIX 3. Example of Inductive Content Analysis

Example of inductive content analysis relating to personal development (adapted from Kylmä & Juvakka, 2014, p.118-120)

Original Expression	Simplified Expression	Sub-category	Category	Main Category
“Not only educating us, but making us know who we are and focus” (informant 7).	Credo helped me to know who I am	Finding out who I am	Personal development	Experiences of Credo program
“My mind has become so sharp because of what I underwent. That is why I cannot tolerate any nonsense” (informant 4).	My mind has become sharp, I do not accept any nonsense	Personal growth		
“At least I have some confidence when I meet with people. I know how to talk with them, because we have been mingling every year” (informant 8).	I have gained confidence by socializing	Gaining self-esteem and finding own voice		
“It is also giving us a chance to know that girls have a say everywhere in the world” (informant 7).	Girls have a say in the world			
“Like now I don’t see anything that will hinder me from achieving my goals that I wanted” (informant 1)	Nothing will stop me from achieving my goals	Self-actualisation and accomplishments		
“And I will get the money that I want for myself, not that the people choose for you” (informant 1).	I will be able to earn money, other people will not choose for me	Control over own life (autonomy)		