

# Perception of the Bukusus on Traditional Male Circumcision Practices and their Risks, Bungoma District, Kenya

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**Abstract:** *Male circumcision is the surgical removal of all or part of the foreskin of the penis without damaging the organ itself. It is one of the oldest and common procedures worldwide. Male Circumcision is traditionally practised among the Bukusus of Bungoma District, Western Province. However, this practise has had several implications on the community and the initiates involved. This study sought to investigate the perceptions of the Bukusus on traditional male circumcision practices and their risks. This study utilized a survey research design in which data was collected on a number of variables simultaneously and at one point in time. The target population consisted of all circumcised boys between 12 –15 years in class 8 of primary schools in Bukembe location of Kanduyi division. Purposive sampling was used to select 100 boys from class eight and 40 parents from their households. Primary data was collected using a structured questionnaire and an interview schedule. Secondary data was collected from documented information about circumcision. The data collected was coded and analyzed descriptively using the Statistical Package for Social Sciences (SPSS) version 11.5. Based on the findings, the study established that traditional circumcision preserves history and maintains the culture of the community of the people that practices it. It was also established that there is a high possibility of disease infection due to sharing of one knife on more than one initiate, since those special knives for circumcisers are few, thus proper precautions should be taken to prevent disease transmission. Basing on the findings of the study, it was recommended that, traditional surgeons should be subjected to circumcision training, wound dressing and treatment, and after completion of the training be awarded with certificates. It also recommended that parents of the initiates should be advised to have their own instruments, which should be disposed after use on their children.*

**Keywords:** Traditional circumcision, perceptions, risks of circumcision

## 1. Introduction

Male circumcision is the cutting off of the foreskin from the tip of the penis without damaging the organ itself (Nahid, 1993). Traditional circumcision is as old as history itself. Jews have traditionally performed circumcision on the eighth day after birth for many thousands of years (Gairdner, 1993).

The perceptions of people towards circumcision are influenced by attitudes of the community that practices it. It is believed that group activities that encourage cohesiveness and corporate communal experiences are preferred by most traditional blacks (Boykin, 1983, Matjeke, 1999). The Bukusus of Bungoma district, Kenya, values traditional circumcision ceremonies and rituals seriously as a way of transition from childhood to adulthood. They circumcise their children in the month of August every even year. During this time, they leave all other activities pending and concentrate fully on traditional African circumcision, even when someone dies very few people will attend that funeral ceremony. This is because they believe that it's a taboo for one to attend the funeral and circumcision ceremony at the same time as it may cause harm to the initiates, if one attends, he or she can be blamed for causing harm to the initiate and be punished by clan elders. The Bukusus indulge in wasteful and dangerous ways of circumcising, like using the same knife for circumcising (Nahid, 1993).

Africans believe in circumcision as a rite of passage that prepares boys and girls for manhood or womanhood. However several health problems have been associated with it. For example, botched circumcision performed by inexperienced traditional surgeons. Crude methods of circumcision and unhygienic circumstances under which it is done (Matjeke, 1999). It also defines who one is in the cultural group in the societies where it is a tradition. Those who have not undergone it are seen as outcasts or they are socially unacceptable (Walker, 1993).

Circumcision practices were important because the initiates were given special skills and teachings such as sex education, important attributes of bravery, words of wisdom and patriotism (Nyamwaka, 2000). Circumcision may increase the risk of transmitting HIV through sharing of one knife. Cultural customs that surround circumcision such as alcohol consumption and increased sexual activity, may be associated with increased risk of sexual transmission of STIs including HIV infection (Population Council, 2003). However, recently, research evidence has unequivocally demonstrated a linkage between male circumcision and HIV infection acquisition with randomized controlled trials up to 60% reduction in HIV acquisition among circumcised men, particularly in regions where the incidences of heterosexually acquired HIV infection is high, such as Sub – Saharan Africa (WHO 2007, WHO, 2010 & Bengo et al 2010) .

It was also reported in another study that, male circumcision was associated with better genital hygiene and less risk of STIs infections and early diagnosis and treatment of genital conditions. Additionally respondents reported perceived enhanced sexual pleasure amongst partners of males who are circumcised (Ngalande et al, 2004). The art of circumcision was handed over from one generation to another in some communities of Malawi. However, most of them have also been trained to perform circumcision art safely. They are discouraged from using one razor blade when circumcising the initiates or any man. Instead they were encouraged to use one razor blade per circumcised man and the (Mchanda ni Mchanda project) provided them with the instruments and materials for performing circumcisions safely (Bengo et al 2010).

A study done in Malawi reported that one third of the urban male respondents perceived bleeding and infection to be the commonest consequences of male circumcision. They further reported that, when they asked males whether they would consider circumcision for their sons, the majority 71.6% of uncircumcised males indicated opposition to circumcision compared to the circumcised males 5.5% and 55.5% women. The levels of opposition amongst the males and women to circumcision however declined following provision of information linking male circumcision to HIV prevention, and declined even further when other healthy benefits were included. It was also confirmed that, decisions for whether a male should be circumcised or not were made by the head of family who in most cases is the husband or the father (Bengo et al 2010).

Matjeke, (1999) encountered several problems with traditional circumcision and categorized these problems into four groups: health, socio-cultural, legal and economic. He confined his study on the health problems.

On the other hand, WHO (1996) confirmed that some documentation and studies are available on the short-term and long-term physical complications of different types of FGM. Literature review has revealed that much research has been done on the health problems, physical complications related to circumcision, parental decisions regarding circumcision specifically concerning the medical hygiene. However, very little has been done on the psychological, psycho-sexual, legal, economic, socio-cultural and moral issues that are related to circumcision. This study will therefore investigate the perceptions of the Bukusus on traditional male circumcision and its risks on their lives.

## 2. Statement of the Problem

Both published and unpublished studies indicate that, most common complications of male circumcision were; infection, incomplete circumcision requiring re-circumcision and delayed wound healing. In general, poor postoperative wound care seemed to account for more complications than circumcision itself. Infection was the most frequent cause of hospitalization in Eastern and

Southern Africa and mortality related to traditional male circumcision 0.2% (WHO, 2010).

Other risks related to Circumcision are contained in a report by the Circumcision of Resource Pages; some babies die of complications resulting from circumcision. Deaths occur due to loss of blood or Systemic infection from the circumcision wound. A number of death cases have been reported in the medical set up and mass media. Research done by the American Academy of Paediatrics Task Force on Circumcision - AAPTFC (Metcalf, Osborn and Mariani, 1983) purposed to investigate the following: the current incidences of circumcision, the reasons governing parental decisions regarding circumcision, the immediate and later complications of the procedure, as well as genital problems occurring to uncircumcised boys.

It was therefore recommended that physicians provide parents with information pertaining to the long-term medical effects of circumcision so that they can make informed decisions. However later studies reveal little change in the practices. It is clear that, Metcalf et al, (1983) mainly focused their study on the medical and social issues which they felt were related to the continuing high rate of circumcision.

Literature review has revealed that much research has been done on physical complications related to circumcision, parental decisions regarding to circumcision specifically concerning the medical hygiene. However, very little has been done on the psychological, psycho-social, psycho- sexual, legal, economic, perceptions, socio- cultural and moral issues that are related to circumcision. It's on this basis therefore that, this study sought to investigate the perceptions of the Bukusus on traditional male circumcision practices and their risks.

## 3. Objectives of the study

- a) To examine the perceptions of the Bukusus about traditional male circumcision practices.
- b) To examine the parents understanding of the health risks associated with traditional male circumcision practices.

## 4. Theoretical framework

The study was mainly guided by the perception theory, since it was investigating the perceptions of the Bukusus on traditional male circumcision practices and their risks, basing on their prior knowledge and past experience. Perception encompasses all processes associated with the recognition, transformation and organization of the sensory information (Carterette &Fried, 1978). It is related to all higher-order cognitive functions (such as reasoning, concept formation, problem-solving, memory etc) as well as sensory - motor behaviour.

Perception involves making inferences about what we see and trying to make a best guess, it is argued that prior knowledge and past experience are crucial in perception. It thus guided the study in getting peoples' feelings about

the traditional practices and their risks basing on prior knowledge and experience which they went through or saw during the practice, since when we look at something, we develop perceptual hypotheses. The hypotheses we develop are nearly always correct. However on rare occasions, perceptual hypotheses can be disconfirmed by the data we perceive (Gregory, R. 1967).

## 5. Methodology

### A. Research Design

This study utilized a descriptive survey research design in which a phenomenon was observed, described and documented as it was in the natural setting without manipulation of variables. It involved events that had already taken place and related to present conditions. This design was preferred because the researcher was interested in the opinions of a large group of people and thus it helped in collecting information from a sample that had been drawn from a predetermined population (Fraenkel & Wallen, 2000).The design helped to cover a large area of study.

### B. Participants

Probability sampling procedure was used in choosing the number of schools and households from which students and the parents were interviewed. A sample of 100 circumcised boys was randomly drawn from a population of 16 primary schools of Kanduyi division of Bungoma District. A Sample of 5 schools out 16 schools was selected by use of simple random sampling and then purposive sampling was used to select 20 circumcised boys in class eight from the five selected schools, 40 parents who had circumcised boy(s) in their households were also purposively sampled. The circumcised boys and their parents were targeted for specific information about circumcision in the study area.100 boy(s) and 40 parents formed the sample size for this study.

### C. Research instrumentations

Questionnaires: The main instrument used in this study was a questionnaire, an interview. Schedule was also used to overcome the limitations of the questionnaire. A questionnaire was used to reach many respondents. This instrument was piloted and test re-test method used to determine the reliability, as reliability index of 0.7 was obtained using correlation coefficient formula. The questionnaire was used to collect information from the pupils (boys) concerning their perceptions on traditional male circumcision and their risks.

Interview schedule: The researcher found it necessary to use an interview schedule to capture information that was not captured in the questionnaire. The interview schedule collected information from parents concerning their perceptions on traditional circumcision and the risks involved. Both the questionnaire and interview schedule were administered in English, but those respondents who

could not communicate in English were interviewed in Luhya or Kiswahili language(s).

## 6. Discussion of Findings

The study investigated the perceptions of the Bukusus on traditional male circumcision practices and their risks.

### Objective 1: Perceptions of the Bukusus about traditional circumcision.

The perception of a person about a particular activity/event or object is usually formed from the information collected on that activity/event and the meaning assigned to this information. The information is taken through our senses and influences the value that we associate with the activity/event. The more information one gathers about a particular event and the value attached to it, the more likely he/she forms specific perceptions about particular event. Therefore perception of Bukusus about traditional circumcision practice is influenced by the information that they have about the practices and the value attached to this information. This include: the advantages and disadvantages; satisfaction, confidence and continuation of the traditional practice in the society.

#### 1.1 The perceptions of the Bukusus on the advantages of Traditional circumcision

Parents with traditionally circumcised boys among the Bukusus highlighted various advantages of traditional circumcision which they based on to argue that the practice should continue. Table 1 shows the perceptions of the Bukusus on the advantages of traditional circumcision.

**Table 1:** The perceptions of the Bukusus on the advantages of traditional circumcision

| Perceptions   | Frequency | Percentage   |
|---|-----------|--------------|
| It is attest of bravery and courage                                     | 10        | 25.0         |
| Children are taught to be responsible                                   | 6         | 15.0         |
| Children are taught about sacred teachings and Secrets of the community | 12        | 30.0         |
| Social identity, acceptance and sense of belonging                      | 6         | 15.0         |
| bring the community together  | 6         | 15.0         |
| <b>Total</b>  | <b>40</b> | <b>100.0</b> |

The Bukusus believe that a man should be the protector of the home and thus should offer total security. For him to do that, he is expected to be brave and courageous enough, 25% of the parents therefore confirmed that, the boy's bravery and courageousness is tested through circumcision whereby, he is circumcised in the open while everybody including the young and the old watching him

being cut. When a boy proves courageous and brave, he is respected in the society and referred to as a man but not a coward “omusani”. Kwamboka (1992) concurs with this in his research as indicated that initiates become men after circumcision and they are allowed to sit with older men to share their thoughts. A low percentage of parents at 15% argued that children also are taught to be responsible during circumcision including the seclusion period. They are told to practice the role of fathers, for example being ready to marry, how to take care of the young ones, to be good examples to the young ones, protecting their families, looking after their property that they will inherit from their fathers among others. This makes him a responsible man no longer a child.

Some of the parents (30%) reported that circumcision teaches initiates about the sacred things and the secrets of their community. These teachings include sex and sexual activities, they are taught how to handle their private parts not expose them carelessly, and that their mother should not see them naked. They are also taught when they should start engaging in sexual activities and with who, never to engage in sex with a married person. The secrets of the community include the rules and regulations of the community. In this case they were taught the history, norms and taboos of their community. Nyamwaka (2000) agrees by arguing that, traditional circumcision gives initiates special skills and teachings such as sex education, important attributes of bravery, words of wisdom and patriotism. Some of the parents argued that, circumcision among the Bukusu, marks the social identity of a person, once somebody goes through circumcision successfully; he is recognized and identified as a full member of the community. Walker(1993) agrees with this as indicated in his research that, circumcision defines who one is in the cultural group where it is a tradition and those who have not undergone it, are seen as outcasts or are socially unacceptable. Circumcision makes him accepted by other members of the community and therefore he feels proud of belonging to a particular group since he is given an age group he belongs to, and each age group among the Bukusu has its own name. For example, “Bachuma”, “Bamaina”, among others.

It was also argued that circumcision brings the community together since before one is circumcised, he calls all the relatives to come and witness his bravery and courage. 15 percent of the parents also considered traditional circumcision as a way of bringing the community together through sharing and socializing. Kwamboka (1992) observes that circumcision binds people together and it is at the core of the social structure and something that gives meaning to one’s life.

**1.2: The perceptions of the youth on the satisfaction of Traditional male circumcision practice.**

When asked whether they are satisfied with traditional circumcision practices, 89% of boys were satisfied, 17% were not satisfied while 4% were neutral. This could be attributed to the social value they attached to the practice and everyone could want to be accepted and identified in the society. Those who were satisfied with the practice based their argument on the advantages of traditional

circumcision which they reported that it prepares them to become full members of the community and also promoted their dignity. Those who were not satisfied cited societal changes and the risks involved in traditional circumcision. They also value their education so much as compared to circumcision which consumes a lot of their time moving from one place to another practicing, calling relatives, singing and dancing and seclusion after circumcision. They were also not satisfied with the way of treating the cut wounds. The 4% who were neutral could be traditionally circumcised without understanding the advantages of it.

**Table 2:** Perceptions of the youth on their satisfaction with traditional circumcision

| Satisfaction           | Frequency  | Percentage   |
|------------------------|------------|--------------|
| Very much dissatisfied | 10         | 10.0         |
| Dissatisfied           | 7          | 7.0          |
| Neutral                | 4          | 4.0          |
| Satisfied              | 53         | 53.0         |
| Very much satisfied    | 26         | 26.0         |
| <b>Total</b>           | <b>100</b> | <b>100.0</b> |

When a sample of parents with traditionally circumcised boys were asked whether they have confidence in the way traditional circumcision is done, 75% (30) of them agreed while 25% (10) disagreed. Those who had confidence in the way the practice is done had a number of reasons;

**Table 3:** Perceptions of the parents on reasons for confidence in the traditional circumcision

| Reasons for confidence        | frequency | percentage   |
|-------------------------------|-----------|--------------|
| It has stood the test of time | 20        | 67.0         |
| It is done in the open        | 8         | 27.0         |
| Source of blessings           | 2         | 6.0          |
| <b>Total</b>                  | <b>30</b> | <b>100.0</b> |

The parents who had confidence in the way traditional circumcision is done claimed that it preserves and maintains culture because of the repeated cultural practices that are practiced during every circumcision year. The sacrifices made during that time are also believed to unite them with their ancestors whom they believe are a source of blessings to the society and circumcision itself reminds them about the history of their culture i.e. how circumcision began to be practiced by the first Bukusu men and therefore others should follow suit. Putting the meat around the neck of the initiates indicated the kind of burden that one will carry in the home after becoming a man e.g. offering security, taking care of the young ones and the community as a whole.

Parents also claimed that traditional circumcision has stood the test of time and therefore, it has no problem. It has been practiced since time immemorial by their grandparents up to the present time; there have been no

side effects by people practicing it. Gairdner (1949) concurs with this as indicated in his research that circumcision is as old as history itself. They also have confidence in traditional circumcision practice because it is done in the open and witnessed by many people, this makes the circumcisers to be very careful because incase of any fault, they are beaten to death.

However for those parents who had no confidence in the way the practice is done, 60% of them reported that there is a possibility of disease infection and transmission. The remaining 40% reported that at times there is the risk of death caused by improper cutting or mutilation of the organ. Gairdner (1949) agrees with these feelings as it was shown in his study several deaths were reported in the medical set up to various infections after circumcision and there were also several newspaper accounts of boys who have died after circumcision.

The study also established that, 75% of the parents agreed that the traditional circumcisers have the necessary training while 25% differed. However, they all agreed that circumcisers inherit this profession from their fore fathers. In most cases, it is the first born son of a diseased circumciser who is supposed to inherit this rite. But for him to rightfully qualify, he is also supposed to have a son as the first-born child in his family to ensure continuity. The heir is then informally trained by the elders and other circumcisers. Therefore, there is no specific formal school or training for this kind of work, instead nowadays, there are seminars being organized to let the circumcisers understand the risks of using one knife on more than one initiate due to disease infection such as HIV/AIDS and sexually transmitted diseases. Bengo et al (2010) concurs with this study since they also reported that, the art of circumcision was handed over from one generation to another in some communities of Malawi. Also the mchanda and mchanda project sensitized the circumcisers on the risks of using one razor blade to circumcise more than one initiate or man.

**1.3: The perceptions of the youth on the continuation of traditional circumcision.**

When asked whether traditional circumcision practice should continue, 58% of the circumcised boys do not want it continue while 42% would like to see it continue in the society. These results seem to contradict the proportion of the boys who were actually satisfied with the traditional circumcision practice. However majority of (85%) of the parents want the practice to continue and only 15% oppose it. This also concurs with Bengo et al (2010)'s study where they established that some men 5.5% and 55.5% women supported circumcision while others especially the uncircumcised ones were opposed to circumcision 71,6%. However, the levels of opposition declined following provision of information linking male circumcision to HIV prevention and other healthy benefits. Those boys who want the practice not to continue had a number of reasons as shown in table 4:

**Table 4:** Perceptions of the youth traditional circumcision not to Continue

| Youths' perceptions                           | frequency | percentage   |
|---|-----------|--------------|
| Possibilities of transmission of diseases     | 25        | 43.1         |
| Time wasting                                  | 4         | 6.9          |
| Economic waste                                | 13        | 22.4         |
| Causes death                                  | 8         | 13.8         |
| Encourages immorality, disobedience & alcohol |           |              |
| Consumption                                   | 8         | 13.8         |
| <b>Total</b>                                  | <b>58</b> | <b>100.0</b> |

Majority of the parents want the practice to continue because it preserves and maintains their culture, prepares children for parenthood, it marks the beginning of a new stage of life in a child and provides him with a chance to learn the secrets of the community. It also promotes unity in the community and prepares future responsible leaders. However, those who want the practice not to continue based their argument on the possibilities of transmission of diseases such as HIV/AIDS through sharing of knives. They are not satisfied with the way the knives are sterilized. They also regard it as time wasting as the would-be initiates abandon school earlier to prepare for the practice. They also refer to it as an economic waste because their parents spent a lot of money to buy food to feed the people during the period of circumcision. Some parents go to an extend of selling their family properties so as to cater for the expenses. This leaves the family poorer than they were before and all this was done at the expense of the child's education.

There is also the possibility of death or genital genital damage as a result of chopping off the head of the penis or cutting the veins. Some boys also die of stress due to long days spent walking and dancing. This concurs with Gairdner (1949) who observed that death as a result of traditional circumcision occur due to bleeding and related complications of the wounds. Musebe (2000) adds that incidences of inaccurate and accidental cutting can be associated unprofessional and mercenary circumcisers. Traditional circumcision also encourages immorality due the type of songs sang during the ceremony and when dancing, one requires to be in a company of either a man or a woman. There is also a lot of movement from one area to another. Boys are also encouraged to woo girls and start sexual activities. Girls, on the other hand, are being told through the songs that, they are being prepared for a husband. Initiates are also being told that after circumcision, one is not supposed to be beaten by a woman, including their own mothers. They are also encouraged to make their own independent decisions as adults.

Culture cannot be done away with because it makes people to be what they are and has been there since time immemorial. It makes the transition from childhood to adulthood. For those boys who want the practice to continue, 69% consider it to be part of their culture that cannot be done away with. Others (31%) view the practice

as a mark of transition from childhood to adulthood. Munoz (2003) agrees with this as he reported that circumcision prepares one for manhood and Matjeke (1999) also concurs by indicating in his study that traditional circumcision is a cultural practice that reflects the strength of a tradition. Boykin (1983) also concurs with this study as indicated in his research that traditional circumcision is a way of transition from childhood to adulthood.

**Table 5:** Perceptions of the Bukusus for circumcision to continue

| Perceptions                                | frequency | percentage   |
|--|-----------|--------------|
| <b>Marks the transition from childhood</b> |           |              |
| To adulthood                               | 13        | 31.0         |
| It is part of culture                      | 29        | 69.0         |
| <b>Total</b>                               | <b>42</b> | <b>100.0</b> |

In order to assess the level of perception of Bukusus about traditional circumcision, sample respondents were presented with five statements (items) related to the practice. They were requested to take their degree of agreement or disagreement on a five point range (strongly agree – SA, agree – A, undecided – U, disagree –D, and strongly disagree – SD)

The table 7 below shows the distribution of their responses on various aspects of traditional circumcision practices.

**Table 6:** Responses of the youth on various aspects of traditional Circumcision practices

| Statement  | Response (percentage) |      |     |      |      |
|--|-----------------------|------|-----|------|------|
|  | SA                    | A    | U   | D    | SD   |
| Traditional circumcision practice makes-<br>you dignified, respected and accepted in -<br>the society. | 44.0                  | 28.0 | 5.0 | 9.0  | 14.0 |
| It is an avenue for learning sacred teachings-<br>and secrets of the community                         | 47.0                  | 24.0 | 7.0 | 9.0  | 13.0 |
| It prepares one for parenthood and marriage  | 38.0                  | 22.0 | 4.0 | 11.0 | 25.0 |
| Traditional circumcision is a measure of -<br>bravery and courage.                                     | 32.0                  | 26.0 | 2.0 | 14.0 | 26.0 |
| It is a taboo not to be traditionally circumcised  | 35.0                  | 13.0 | 6.0 | 9.0  | 37.0 |

N =100

From table 6 above, 72% of the respondents agreed that traditional circumcision practices make one dignified, respected and accepted in the society. This can be attributed to the Bukusu belief that a man who is not traditionally circumcised is a curse to the community and cannot be allowed to participate in communal activities

and decision making. It is only after traditional circumcision that one is regarded to be fully part of the community and can therefore equally participate in all activities in the community. They agreed that traditional circumcision is an avenue for learning about the sacred teachings and the secrets of the community. Through circumcision, they get to discover the sacred teachings that could have otherwise not been disclosed to them. They also learn the norms and regulations of their society, the dos and don'ts of their community which make them more knowledgeable about themselves and the community.

On whether circumcision prepares one for parenthood and marriage, 60% of the youth agreed with this as they were taught about sex and the role of sex as a means for procreation which enhances the continuation of their community and enabling them to remember their ancestors through naming. They are taught parental responsibilities. On another hand, 58% of the youth agreed that circumcision also measures their bravery and courage, thus it prepared the initiates to be protectors of the community since after circumcision, they are believed to be the source of security and 48% of the youth also agreed that it is a taboo for one not to be traditionally circumcised. Since failure to be circumcised traditionally, makes one to be cursed and cannot be socially accepted in the community.

The answer to each constituent statement (items) was scored on a scale of 1 to 5 (5 for strongly agree, 4 for agree, 3 for undecided, 2 for disagree and 1 for strongly disagree). The individual scores were added up to form an overall perception score for each respondent. Overall scores varied between 5 and 25. The higher the score, the more positive is the perception about traditional circumcision practices, and vice versa. The overall score was later divided into three ordinal categories to differentiate between the levels of perception including 5 - 11 (negative); 12 - 18 average); and 19 - 25 (positive). Table 7 depicts the distribution of the levels of perception of the youth about traditional circumcision practices among the sample population.

**Table 7:** Distribution of the levels of perception of the youth about traditional circumcision

| Levels of perception | frequency  | percentage   |
|----------------------|------------|--------------|
| Negative             | 18         | 18.0         |
| Average              | 42         | 42.0         |
| Positive             | 40         | 40.0         |
| <b>Total</b>         | <b>100</b> | <b>100.0</b> |

Less than half (40%) of the sampled pupils recorded a positive perception while 42% had an average perception about Bukusu traditional circumcision practices. This is contrary to the expectation of the majority, if not all the initiates have a positive perception about traditional circumcision. This can be attributed to their individual experience during the exercise and changes in socio – economic and health challenges of the present generation.

People now need more facts than just beliefs and traditions about the practices.

**Objective 2**

**2.1 Parents’ understanding of the risks associated with traditional circumcision practices.**

The objective aimed at finding out whether parents understand the health risks that are associated with traditional circumcision or not. The information got is shown in the table 8 below.

**Table 8:** Parents’ understanding of the risks associated with traditional Circumcision

| Risks                                   | frequency | percentage   |
|---|-----------|--------------|
| Use of sterilized knives                | 10        | 25.0         |
| Possibility of organ damage/ mutilation | 20        | 50.0         |
| Death                                   | 10        | 25.0         |
| <b>Total</b>                            | <b>40</b> | <b>100.0</b> |

Parents reported that, traditional circumcision put the initiates at risk of contracting diseases as a result of use of poorly sterilized knives 25%. Traditionally the knives are sterilized by dipping them in the fire the day preceding the exercise. They are advised not to use one knife on more than one initiate. There is also a possibility of organ damage or mutilated as a result of poor cutting 50%. Death can also occur as a result of excess bleeding 25%. Nahid (1993) agrees with the research done as he indicates that circumcision exposes the initiates to the risk of contracting diseases by using one knife on more than one initiate. Table 9 shows the parent’s responses to the safety of the instruments used by the circumcisers during circumcision.

**Table 9:** Parents’ responses to the safety of instruments used during circumcision

| Responses    | frequency | percentage   |
|--------------|-----------|--------------|
| Yes          | 22        | 55.0         |
| No           | 18        | 45.0         |
| <b>Total</b> | <b>40</b> | <b>100.0</b> |

When asked about the safety of the instruments used, 55% of the parents reported that the instruments are usually safe since the circumciser “sterilizes” them before use. However 45% percentage disagreed with the safety of the instruments because of the sterilization methods used and the fact that one knife is used on more than one initiate, since a circumciser can circumcise a maximum of eight initiates in a day, before the knives are sterilized again during the night. The parents argued that it can only be safe if the parent of the initiate has his own instrument which should be disposed after use.

**2.2 Traditional circumcision and HIV/AIDS**

When asked whether traditional circumcision practices increases the possibilities of HIV infection, 90% of the

parents agreed while 11% disagreed as shown in table 10 below

**Table 10:** Responses of parents as to whether traditional Circumcision practice increases the risk of HIV infection

| Responses to the safety of instruments | frequency | percentage   |
|--|-----------|--------------|
| Yes                                    | 36        | 90.0         |
| No                                     | 4         | 10.0         |
| <b>Total</b>                           | <b>40</b> | <b>100.0</b> |

For those who think that traditional circumcision practices increase the possibilities of HIV infection and transmission, 67% reported that this can be caused by the sharing and use of the same knives on all the initiates, 33% of them reported that the major risk is in the use of poorly sterilized knives. Matjeke (1999) concurs with this as indicated in his study that, the practice of using one knife on a number initiates led to the spreading of HIV/AIDS. It was also reported that after each cut, the knife was poorly washed in abasing of water laced with jik and dabbed with methylated spirit before moving to the next initiate. After circumcision, a herbal powder is administered on the wound. This is not enough to avoid transmission of HIV/AIDS infection.

**Table 11:** Responses of Parents to the Risks of HIV infection

| Risks of HIV/AIDS infection     | frequency | percentage   |
|---------------------------------|-----------|--------------|
| Sharing of Knives               | 24        | 66.7         |
| Use of poorly sterilized knives | 12        | 33.3         |
| <b>Total</b>                    | <b>36</b> | <b>100.0</b> |

However, all those 4 (table 10) parents who think that traditional circumcision practices do not increase the chances of HIV infection and transmission reported that they are satisfied with the way sterilization of knives used in circumcision is done. They could not imagine how germs could survive in very hot fire throughout the night the day preceding circumcision.

**7. Conclusion and Recommendations**

The study investigated on the perceptions of the Bukusus on traditional male circumcision practices and their risks. The findings of the study may be useful in helping to create awareness and sensitize the parents on the risks their children are exposed to during traditional circumcision. And thus help them to make informed decisions, concerning the rite of passage they should engage in. Based on the findings, the study made the following conclusions;

1. Traditional circumcision preserves history and maintains culture of the community that practices it. This was observed in objective one where parents claimed that they have confidence in traditional circumcision because it

preserves and maintains their culture and that it has stood a test of time.

2. There is a high possibility of disease infection due to sharing of one knife on more than one initiate, since those special knives for circumcision are few as established in objective two. Proper precautions should be taken to prevent disease transmissions.

## 8. Recommendations

Basing on the conclusions of the major findings, the study makes the following recommendations:-

1. Traditional surgeons should be subjected to circumcision training, wound dressing and treatment, and after completion of the training they be awarded with certificates.

2. The parents of the initiates should be advised to have their own instruments, which should be disposed after use on their children. They should also be provided with adequate information linking traditional male circumcision with HIV infection.

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## Author Profile



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