

**EXAMINING THE EFFECTIVENESS OF PREVENTION MEASURES ON  
FEMALE GENITAL MUTILATION AMONG ADOLESCENT GIRLS: A  
CASE OF TARIME DISTRICT COUNCIL**

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**A DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF THE  
REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL WORK  
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**2025**

**CERTIFICATION**

The undersigned certify that they have read and hereby recommend for the acceptance by the Open University of Tanzania a dissertation entitled, **“Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls in Tarime District Council.”** In Partial Fulfillment of the requirements for the award of the Degree of Master of Social Work of The Open University of Tanzania.

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Signature

.....

Date

## **DEDICATION**

This dissertation work is dedicated to my family. Special feelings of gratitude to my children Edwin, Kaiza, Abela, Tibaigana and Selina. Special dedication also to Sr. Benedictor Wasonga whose provided words of encouragement and support during this academic journey.

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## **ABSTRACT**

The General Objective of this study was to examine the Effectiveness of Prevention Measures on FGM among Adolescent girls: A case of Tarime DC. Specifically, the study sought to Improve and adopt Prevention Measures to Stop FGM in the Kurya Community. The study was guided by three specific objectives, including assessing the effectiveness of prevention measures on FGM among adolescent girls, exploring the role of the ward executive officer towards prevention measures on FGM among teenage girls, and examining the effectiveness of social welfare officer towards prevention measures on FGM among adolescent girls. The study employed a pragmatic philosophy and cross-sectional research design, informed by a sample size of 377 research subjects. The study employed Questionnaires, interview guide and checklist. Qualitative data was analyzed using thematic analysis, and quantitative data was analyzed using Descriptive with the aid of Scientific Package for Social Science (SPSS). The findings were presented in percentages, graphs, tables, and charts. while qualitative data were analyzed using themes. The findings revealed a need for the budget to be allocated at the ward and village levels, Outreach campaigns needed, social welfare under LGA required to be the Department, Cross-border meetings are required to have joint efforts both in Kenya and Tanzania. Recommendations to the Government is to put more efforts for improving prevention Measures on FGM, Enacting FGM Law and Revise of Child Development Policy, and for the Further studies it is recommended the same study to be conducted in other Councils across the Country.

***Keywords:*** Stop FGM, Adolescent girls, Kurya Community, Tarime DC.

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### **LIST OF ABBREVIATIONS**

CDC	Center for Disease Control and Prevention
CEDAW	Convention on the Elimination of Discrimination Against Women
CRC	Convention on the Rights of the Child
FGM	Female Genital Mutilation
NBS	National Bureau of Statistics
NPA VAWC	National Plan of Action to End Violence Against Women and Children
OUT	Open University of Tanzania
PGDO	Police Gender Desk Officer
SDG	Sustainable Development Goal
SWO	Social Welfare Officer
TDHS	Tanzania Demographic Health Survey
TPB	Theory of Planned Behavior
UNFPA	United Nations Population Fund
UNICEF	United Nations Children Fund
WEO	Ward Executive Officer



## **CHAPTER ONE**

### **INTRODUCTION AND BACKGROUND TO THE STUDY**

#### **1.1 Chapter Overview**

The purpose of this study is to examine the Effectiveness of Prevention Measures on Female Genital Mutilation (FGM) among Adolescent girls in Tarime District Council (DC). This chapter presents the background to the study, Statement of the problem, Research objectives, Research questions, and the Significance of the study.

#### **1.2 Background of the Study**

Female genital mutilation (FGM) refers to all forms of partial or total removal of external female genitalia or other alterations to female genital organs carried out for cultural or nontherapeutic reasons (World Health Organization [WHO],2023). Some scholars have proposed Ancient Egypt (present-day Sudan and Egypt) as its site of origin. FGM was recognized as a global problem by various authors and International Organizations as it has effects on women and girls. Globally, prevention measures to fight against FGM include Global Political commitment, Outreach Campaigns, Legal Framework and Enforcement, National Policies, Research, and critical support for survivors to enhance their well-being.

In the United States, FGM is considered a rite of passage from childhood to adulthood, meaning that it should be carried out closer to puberty than childhood Sola et al., (2021). FGM is considered a violation of the human and legal rights of women and constitutes an ethical dilemma for healthcare professionals. Specifically,

measures are taken to fight against FGM, and it is considered a crime and has been included in the Criminal Code as a crime of injuries, Gurrutxaga et al., (2021). The United Nations (UN) created the Commission on Women's Juridical and Social Status in 1946 within the international legal framework. Nowadays, the UN seeks to eliminate gender-based violence, including FGM as a form of violence against women, and in turn, protect children's rights Marcusan (2021).

In America, FGM is not Widespread as in the other Countries in which it is Practiced. This is because FGM is most common in immigrant communities and major metropolitan areas. The estimates suggest that there are 513,000 women and girls in the United States (U.S.) who have undergone the practice or are at risk of the practice. The Centers for Disease Control and Prevention (CDC) indicated that every year, around 30,000 under the age of 18 are at risk of being subjected to FGM (CDC,2023). There are numerous Prevention measures taken to fight against FGM wh, which include Counselling Services, Legal aid, Medical Care, and resources that assist the survivors of FGM (Equality Now,2023).

Australia has to prioritize vulnerable populations, and people who have been impacted by Female Genital Mutilation Cutting (FGM/C), individually or collectively, to address their physical, psychological, and human rights needs through Outreach Campaigns (Njue et al., 2021). Australia is implementing various preventive measures to fight against FGM, these include Legal Framework and Enforcement, Outreach campaigns, Supporting FGM survivors, and Community engagement. All these are made to safeguard the welfare of women and girls. For

Instance, in Asia, ending FGM globally is unachievable unless efforts are significantly stepped up across Asia, where FGM remains widely unaddressed despite occurring in at least ten countries.

States in Asia are working towards achieving the Sustainable Development Goals (SDG) Agenda 2030 and are parties to the Convention on the Elimination of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC). SDG 5.3, CEDAW, and CRC expressly prohibit FGM and call on States to take action (Nawmy,2023). Some prevention measures taken in Asia to fight against FGM include Legal prohibitions and enforcement of evidence-based, international, Human Rights commitments, Community engagement and outreach Campaigns, support from activist and Non-Governmental Organizations (NGOs), Legal Framework and Enforcement, and religious engagement.

In Sub-Saharan Africa, numerous preventive measures have been implemented to fight against FGM. The interventions necessary for attaining Sustainable Development Goals (SDGs) 3, which strive to secure healthy lives and enhance well-being across all age groups, and SDG 5, which centers on fostering gender equality and Health (United Nations, [UN] 2015) There is a relationship between SDGs 3(Good Health &Well-Being) and 5(Gender Equality regarding the Effectiveness of Prevention Measures against FGM among Adolescent Girls. Addressing both Health outcomes related to FGM as well as Women's Empowerment through Outreach Campaigns Creates a Comprehensive Strategy Essential for eliminating this Harmful Practice.

Nevertheless, in many African States, Female Genital Mutilation Cutting (FGM/C) is a deeply entrenched cultural practice. The Maputo Protocol requires states to provide the necessary support to victims of harmful practices through essential services such as health services, legal and judicial support, emotional and psychological counseling, and vocational training and protection of women at risk of being subjected to harmful practices or other forms of violence (Adamson et al., 2019). African countries use various measures to fight against FGM, including Education and Awareness Campaigns on the negative consequences of FGM I, Alternative Rights of passage, empowerment of women and girls, and Laws and policies.

Tanzania is among the countries in East Africa in which FGM is practiced. Tanzania Demographic Health Survey (TDHS–MIS, 2022) lists the five regions with the most significant prevalence of FGM as Manyara and Arusha (43%), Mara (28%), Singida (20%), Dodoma (18%), Tanga (19%), and Dodoma (18%). To fight against FGM, Tanzania launched a four-year National Anti-FGM Strategy towards ending the harmful practice in Tanzania. The Strategy is more relevant than ever – even though the FGM prevalence among women and girls has reduced to 10% in Tanzania, the fight to abolish the harmful practice is not over yet (UN Tanzania, 2022).

Efforts to fight FGM in Tanzania require joint efforts that include legal Improving accessibility of services to the FGM victims, Education and awareness Campaigns on the issues of FGM, recruitment of social welfare officers, Legal Framework and Enforcement, Outreach Campaigns, community engagement as well as empowerment of women and girls to raise their voices. In Tanzania, another

initiative was the International Day on Zero Tolerance for FGM and a symposium on Monday, 07 February 2022. The event occurred in Tarime District, Mara Region, where the practice is still common among the population (UN Tanzania,2022).

Based on Anecdotal from Tarime DC, Prevention Measures taken includes Legal framework, Community engagement and Awareness Campaigns, Empowerment of girls and Alternative Rites of Passage, Collaboration with Local leaders and Support for Survivors (UNICEF,2018). In Tarime some of the initiatives taken to fight against FGM includes Engagement of local Traditional leaders because they are seen as custodians of Culture. The other key strategy in the district is working directly with communities to shift attitudes and provide education on the Harmful effects of FGM (Mutunga,2015).

### **1.3 Statement of the Problem**

Female Genital Mutilation remains a significant Public Health Concern and Violation of Human Rights, particularly affecting Adolescent girls in Tarime District Council (DC), despite concerted efforts to eradicate it having laws, Policies, and Guidelines. The Law of Child Act No 21/2009 in S.13(1) Stipulated the Protection of the Child from torture and degrading treatment as a means of protecting children. Families and communities would actively engage in discussions to transform harmful cultural norms and advocate for girls' rights (Koski et al., 2020). Furthermore, the effective enforcement of legal frameworks would deter and penalize perpetrators of FGM (Berg et al., 2021).

Despite The Tanzania Government's efforts to combat FGM, The Tanzania Demographic Health Survey (TDHS–MIS,2022) lists the five regions with the most significant prevalence of FGM as Manyara and Arusha (43%), Mara (28%), Singida (20%), Dodoma (18%), Tanga (19%), and Dodoma (18%). In Tarime, DC, the high prevalence of FGM among Adolescent Girls is justified by Traditional beliefs associated with social acceptance and marriageability. Approximately 27% of Women aged 15-49 have undergone FGM in Tarime (Moshi et al.,2020). The effects lead to Health Risks like Complications during Childbirth, Increased susceptibility to infections, and long-term psychological trauma.

The effectiveness of prevention measures on FGM failed in Tanzania; although there are various prevention measures to fight against FGM, FGM still exists. The possible causes of FGM are Cultural Beliefs, Social Pressure, Ignorance, Poverty, Patriarchy System, Lack of Education, and Economic Factors. The prevention measures are taken in collaboration with NGOs (UNICEF,2021). Despite the efforts, the practice persists due to cultural persistence and other factors. Furthermore, innovative strategies are required for the Effectiveness of Prevention Measures on FGM. For these reasons, the current study intends to determine the underlying reasons for the problem's persistence.

#### **1.4 Research Objective**

This study will be guided by both general objective and specific research objectives.

### **1.4.1 General Objective**

The general objective is to Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls: A case of Tarime District Council.

### **1.4.2 Specific Objectives**

- i) To Assess the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls.
- ii) To Explore the Role of Ward Executive Officer Towards Prevention Measures on Female Genital Mutilation among Adolescent Girls.
- iii) To Examine the Effectiveness of Social Welfare officers towards Prevention Measures on Female Genital Mutilation among adolescent girls.

### **1.5 Research Questions**

- i) To what extent are prevention measures effective to Fight against Female Genital Mutilation among Adolescent girls?
- ii) To what Extent Ward Executive Officer is effective Towards Prevention Measures on Female Genital Mutilation among Adolescent girls?
- iii) To what extent social welfare officer is Effective towards Prevention Measures for Female Genital Mutilation among Adolescent girls?

### **1.6 Significance of the Study**

The study is expected to examine the effectiveness of prevention measures among adolescent girls in Tarime, DC, which holds significant importance for stakeholders,

including practitioners, community members, policymakers, and researchers. The findings from the study will assist in improving and adopting various Prevention Measures for FGM among Adolescent girls. Generally, critical stakeholders in the fight against FGM will understand prevention measures well. The study expects to identify the various effective measures and develop strategies. Moreover, under this umbrella, prevention measures to fight against FGM may be improved by various practitioners.

The study is also essential globally to academics and Scholars who are directly involved in implementing Prevention Measures and providing support to victims of FGM. Thus, through research, practitioners will be able to customize interventions more effectively, ensuring that they cater to the needs of the patients. Furthermore, academicians and scholars interested in understanding the effectiveness of preventive measures on FGM for Tarime DC will gain knowledge under the study. The references will be made through the findings of the study. In general, the gap observed in the study will be used by academicians and professionals nationally and globally to conduct further study(s). So, this study is essential to academicians, scholars, and professionals.

The study is relevant for improving health outcomes and human rights advancement initiatives to end Gender-based Violence. The information can influence policy decisions, increase resources, and enhance enforcement mechanisms to combat FGM. Researchers will gain knowledge of FGM prevention and intervention strategies. Findings can inform future research directions and guide program



development and evaluation as its Contribution to Global efforts aimed at eradicating FGM globally; this significance drives positive change at multiple levels. The findings are essential for discussing implementing various programs to fight against FGM in Tarime DC.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Chapter Overview**

This chapter focuses on a literature review. It explains the concepts and ideas of other researchers about this study. This chapter also attempts to show the empirical relationship between the effectiveness of prevention measures and Female Genital Mutilation (FGM). The chapter winds up by providing a conceptual framework that guides the study.

#### **2.2 Definition of Key Terms**

Under this section, details and definitions of the following terms are going to be provided:

##### **2.2.1 Prevention**

The World Health Organization (WHO) defines prevention as "approaches and activities aimed at reducing the likelihood that a disease or disorder will affect an individual, interrupting or slowing the progress of the disorder or reducing disability" (WHO,2004). In this study, prevention means measures, interventions, and activities that aim to fight against FGM.

##### **2.2.2 Female Genital Mutilation**

Female genital mutilation (FGM) is a practice that "involves partial or total removal of the female external genitalia or other injury to the female genital organs for non-

medical reasons (WHO,2008). According to this study, FGM is a practice that is against Human Rights carried out for Women and young girls yet results in adverse effects. The practice is rooted in Gender Inequality and justified by Cultural, Religious, or Social Factors; according to WHO, the practice of FGM is classified into four major types that are Clitoridectomy, Excision, Infibulation, and Other Harmful Procedures.

### **2.2.3 Adolescent Girls**

Adolescents are young Females aged 10-19 years who experience significant physical, psychological, and social changes that shape their identity and life progression (Koller et al., 2022)—the transitional phase of growth and development between childhood and adulthood. Adolescent girls are young women ages 10-19 years Undergoing Developmental Changes influenced by Biological Maturation and Sociocultural Factors. Under this study, Adolescent girls mean young female girls that are commonly affected by FGM in Kurya society.

### **2.2.4 Ward Executive Officer**

In Tanzania, a Ward Executive Officer (WEO) is a Government Official responsible for the Administration and Management of a Ward, which is a Sub-Unit of a District. The WEO Plays a Crucial role in Local Governance, Government Policy Implementation, Coordination of Development activities, and Facilitating Communication between the Government and the Local Community. They represent the Government at the Ward Level (Local Government Laws Act, no of 1982). In the Study, WEOs are Involved in tracking the girls undergoing FGM and reporting to the

higher level of the Government; the reports are used for Policy adjustments and allocation of resources (UNFPA, 2021).

### **2.2.5 Social Welfare Officer**

In Tanzania, Social welfare officers include professional social workers, non-professionals (PSWs), and all who work within Social Welfare Agencies/Institutions to offer support services for the welfare and well-being of those they serve, according to the United Republic of Tanzania (URT,2012). The Department of Social Welfare (DSW) defines a Social Welfare Officer as a professional responsible for planning, implementing, and evaluating social Welfare Programs and Services. The Social Welfare Officer Plays a Crucial role in Promoting Social Justice, enhancing Community Well-being, and advocating for vulnerable populations.

The definitions explained in the study are relevant to the study and research objective titled: To Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls: A Case of Tarime District Council.

## **2.3 Theoretical Literature Review**

Under the study, the theory applied is Planned Behavioral change (PBCT). This theory is applied to Examine the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime District Council. The theory is explained in subsection 2.3.1.

### **2.3.1 Theory of Planned Behavior (TPB)**

TPB is a psychological theory that explains human behavior in specific contexts. It

was developed by Ajzen in 1985. It builds on the earlier Theory of Reasoned Action by Adding the Concept of Perceived Behavioral Control (Ajzen, 1985). It is a Theory used to understand and Predict Behaviors; it elaborates that behaviors are immediately determined by behavioral intentions and, under certain circumstances, perceived behavioral Control. According to Ajzen (1991), Behavioral intentions are determined by a combination of three factors: attitudes toward a behavior, subjective norms, and perceived behavioral Control.

The Components of TPB Theory are attitudes toward a behavior, subjective Norms, and Perceived Behavioral Control (Armitage et al., 2001). Attitudes about a behavior are all about an individual's positive or negative evaluation of performing the behavior. Subjective norms reflect the perceived Social Pressure to perform or not perform the behavior. This includes influence from Family, Friends, and Societal Expectations. Perceived Behavioral Control is all about individual's perception of their ability to perform the behavior. This accounts for external factors that may facilitate or hinder the behavior; it also encompasses an individual's Self-efficacy (Armitage et al., 2010).

TPB Theory is relevant in the context of prevention measures for FGM by understanding the attitudes, subjective norms, and perceived behavioral control surrounding it. This can assist Stakeholders in developing effective Interventions to fight against the practice. The practice Implication of TPB Theory enhances practitioners' understanding of client motivations and barriers while designing effective interventions tailored to promote positive behavioral changes through

outreach campaigns. Therefore, the factors under TPB assist to be applied under the study on the effectiveness of Outreach Campaigns on FGM among Adolescent Girls in Tarime District Council.

### **2.3.2 Relevance of Theory of Planned Behavior to the Study**

The theory under study will be the Planned Behavior theory. Its applicability to the study's objectives is as follows.

#### **2.3.2.1 Relevance of the Theory to the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls**

The Relevance of Planned Behavioral Change Theory lies in its structured approach to Understanding and Influencing behaviors related to FGM. By altering attitudes, Reshaping Subjective Norms, and enhancing Perceived Behavioral Control through targeted interventions, stakeholders can develop more Effective Prevention Measures against this harmful Practice (Sonya et al., 2010). Through its knowledge application relation to Prevention measures such as Outreach Campaigns, Legal and Framework as well as scientific Evidence-Based Methods will be used to examine the Effectiveness of Prevention Measures like Outreach Campaigns on FGM among Adolescent girls.

#### **2.3.2.2 Relevance of the Theory to the Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent Girls**

The application of Planned Behavioral Change Theory Provides a Structured Approach for Ward Executive Officers (WEOs) aiming to Prevent FGM among

Adolescent girls through Outreach Campaigns, Policy Advocacy, Community Engagement as well as Collaboration with Healthcare Services. In the Context of the Effectiveness of Prevention Measures on FGM, WEOs can leverage their Position to influence Community attitudes and behaviors. This study, therefore, will adopt the variables under the theory as knowledge transfer purposefully to explore The Role of Ward Executive Officers towards Prevention Measures on FGM among adolescent girls in Tarime, DC.

### **2.3.2.3 Relevance of the Theory to the Effectiveness of Social Welfare Officers Towards Prevention Measures on Female Genital Mutilation among Adolescent Girls**

PBT provides a Framework for understanding how Social Welfare Officers (SWOs) can effectively address FGM among Adolescent girls through targeted Interventions aimed at changing attitudes, reshaping subjective norms, enhancing Perceived Behavioral Control, and ultimately Influencing behavioral intentions towards abandoning FGM Practice. The information through prevention measures can provide information on the health risks associated with FGM and promote alternative rites of passage that do not involve Mutation (World Health Organization [WHO], 2020). The theory applied under the study will assist in examining the Effectiveness of SWOs towards Prevention measures on FGM.

The theory applied in the study will assist in examining the involvement of Social Welfare Officers in outreach Campaigns. Social welfare officers are Instrumental in the fight against FGM. They engage with Local leaders, Families, and community

members for outreach Campaigns about the harmful effects of FGM. The outreach campaigns involve workshops, seminars, and community meetings where they can provide information on the health risks associated with FGM and promote alternative rites of passage that do not involve Mutation (World Health Organization [WHO], 2020). Social welfare officers contribute to Policy Development to eradicate FGM within their Jurisdictions (UNFPA, 2020).

The theory applied under the study will assist and be valuable to social welfare officers to understand and predict behavior. This is useful in designing and developing prevention measures and enhance Interventions (Ajzen,1991). This provides a structured framework particularly in public Health, Social Justice and Community welfare to fight against FGM, as well as being effective in addressing FGM among adolescent girls in Tarime, DC. Base on the strength of the theory is that it is helpful to predict and explain human behavior. Secondly, it can be used to address FGM based on its culture as a guide to design various prevention measures to change behavior.

This study applies the theory of Planned Behavior to the effectiveness of Outreach Campaigns on Female Genital Mutilation among Adolescent girls. According to Ajzen (1991), the stronger the intention to perform a behavior, the more likely it is to be done. According to the Theory, intentions are influenced by personal attitudes, subjective norms, and perceived behavioral control.

## **2.4 Empirical Literature Review**

The specific objectives of the study guide the empirical review. Thus, the empirical



review is well articulated on the relationship between the Effectiveness of Prevention Measures on FGM among Adolescent girls for Tarime District Council.

#### **2.4.1 Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls**

Globally, In Examining the Effectiveness of Prevention Measures, Matanda et al. (2023) conducted a Study on What Interventions are Effective to Prevent or Respond to Female Genital Mutilation? for Existing Evidence From 2008 to 2020. The review highlighted how individual interventions needed to be effective from the system level up. Oyaro et al. (2022) Highlighted that a change in attitudes and beliefs toward FGM is required at the individual level. Engaging the custodians of a community's traditions and culture, e.g., male engagement and Advocacy champions, this context is compelling with Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls.

Matanda et al. (2023) stipulated that globally, based on the study titled What interventions are effective to prevent or respond to Female Genital Mutilation? A review of existing evidence from 2008–2020 was carried out: The study drew on a Rapid Evidence Assessment of the available literature on FGM interventions. Based on the findings from the study, health education, community dialogues, the use of media and social marketing efforts, and formal education for women and girls are examples of Outreach Campaigns to eliminate FGM. Secondly, they provided traditional practitioners with alternative sources of income and alternative rites of passage, focusing on public ceremonial passage.

According to the United States Female Genital Mutilation Act 2022(USFGM), the United States has made various initiatives to fight against FGM. U.S. global policy and program efforts in 2022 focused on Prevention Measures on the harmful impacts of FGM, utilizing a survivor-centered and human rights-based approach, encouraging the enforcement of laws against FGM where they exist, and passage of laws in places where legal frameworks are weak or nonexistent, and raising the awareness and ability of medical providers. Government efforts and interventions are required to fight against FGM, and it requires joint efforts once it involves cross-border FGM.

European Countries also has various measures including legal frameworks that criminalize FGM. Research indicates that there is inconsistent enforcement of these Laws. In some cases Authorities face challenges in Prosecuting perpetrators, often due to lack of evidence or difficulty in tracing instances of FGM, especially when they occur outside the country (UNICEF,2017). The study focused on European interventions, thus excluding many innovative and successful African interventions. Nevertheless, this study is a rare effort to Examine the under-researched role of diaspora communities in initiatives to address Female Genital Mutilation in Europe through the application of Prevention Measures; it is very crucial for Community empowerment to fight against FGM.

Nawmi (2024) highlighted that Female Genital Mutilation and Cutting in Asia Remain a neglected Problem; in most of Asia, there are little or no large-scale government programs for community education and awareness raising about FGM/C. Few resources are directed toward prevention and supporting grassroots

activities, and it is difficult for local organizations to secure funding. FGM/C can only be eradicated with positive community engagement about its harmful effects, underpinned by laws and policies that punish perpetrators and meet the needs of survivors. Asia must develop and implement effective policies and invest in social, legal, outreach Campaigns, and health service provisions.

According to Kroll et al. (2020), in a study titled, "Promote locally-led Initiatives to Fight Female Genital Mutilation/Cutting (FGM/C)," lessons from anti-FGM/C advocates in rural Kenya. The study's findings demonstrate the significance of locally-led initiatives to fight FGM/C. It also became clear that change would have to start at the family level, with parents, particularly fathers, taking on a more active role in their daughters' lives. Providing Outreach campaigns about FGM/C to communities, particularly young men, coupled with keeping girls in school, appeared to be some of the most effective ways of fighting FGM/C.

The study conducted by Mkuwa et al. (2023) in Tanga, Tanzania, was based on the role of communities and leadership in ending female genital Mutilation in Tanzania. The study involved men and women above 19 years old and Maasai community leaders. Boyle, E. et al. (2023) highlighted prevention measures for FGM that are Legal and Policy Frameworks, Community Engagement and Education, Alternative Rites of Passage, Empowering of both women and girls, Health Care Interventions, Cross-Border and Global Efforts.

Generally, Prevention Measures that are Outreach Campaigns are very crucial to fight against FGM through knowledge enhancement and attitude change towards

harmful traditional practices. The United Nations (2022) Continuous emphasize on elimination of FGM. However, for the effectiveness of campaigns to reduce prevalence rates, integrated efforts are needed as a means of Comprehensive strategies that address underlying cultural norms in consideration of community engagement. Moreover, Outreach Campaigns' involvement in the prevention measures to fight against FGM among young girls is very crucial as they can result positively.

However, the study also points out that the effectiveness of prevention measures in fighting against FGM is crucial—the measures must be implemented at local and national levels in various countries worldwide. For example, as Tarime DC bordered Kenya's border, FGM is implemented at the community level, so the programs must be implemented with both partners from Tanzania and Kenya. Outreach Campaigns are essential for engaging the target audience, raising awareness, and achieving specific goals Health &Health (2007). In Summary, Effective Prevention Measures require Joint Efforts.

#### **2.4.2 Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent Girls**

In the fight against Female Genital Mutilation (FGM), Ward Executive Officers (WEOs) are required as they play a crucial role in prevention measures. Their involvement is essential for sustainable change as a means of eradicating harmful practices. How WEOs can participate in preventing FGM includes education and awareness, supporting alternative Routes of passage (ARPs), involving fathers,

engaging religious and traditional leaders, Advocating and supporting networks, and engaging youth (Musa et al.,2021). The community member's participation involves children and adults. Through education and awareness, community members are involved and becoming aware of the effects of FGM.

The Ward Executive Officers Play a Crucial role in Local Governance, Government Policy Implementation, Coordination of Development activities, and Facilitating Communication between the Government and the Local Community. They oversee Public Services, Ensure Local Project excursion, and represent the Government at the Ward Level (Local Government Laws Act, No of 1982). They usually Engage the custodians of a community's traditions and culture, e.g., male engagement and Advocacy champions, Oyaro et al., (2022). To fight against FGM, male engagement is very crucial for the fact that men are the initiators of FGM, as the boy's circumcision is related to FGM.

Matanda et al. (2023) stipulated that Globally, based on the study titled What interventions are adequate to prevent or respond to Female Genital Mutilation? A review of existing evidence from 2008–2020 was carried out: The study drew on a Rapid Evidence Assessment of the available literature on FGM interventions. Thus, it offers suggestions for health education, community dialogues, the use of media, and formal education for women and girls, which are examples of interventions—secondly, legislation with political will, creating FGM-free communities through public declarations, and training health providers. Thirdly, traditional practitioners should be provided with alternative sources of income.

According to the United States Female Genital Mutilation Act 2022(USFGM), the United States has made various initiatives to fight against FGM. U.S. global policy and program efforts in 2022 focused on raising awareness about the harmful impacts of FGM, utilizing a survivor-centered and human rights-based approach, encouraging the enforcement of laws against FGM where they exist, and passage of laws, and raising the awareness and ability of medical providers, community and faith leaders, and other relevant stakeholders. Government's efforts to improve its capacity to prevent and respond to all forms of gender-based violence globally, including FGM.

Baillet et al.'s study aimed to explore the role of communities within interventions to address FGM in Europe, describing the perspectives of practitioners, activists, and community representatives on current practices, promising interventions, and gaps that should be addressed. The study focused on European interventions, thus excluding many innovative and successful African interventions. Nevertheless, this study is a rare effort to examine the under-researched role of diaspora communities in initiatives to address female genital Mutilation in Europe, drawing from in-depth and semi-structured key informant interviews.

Nawmi (2024) highlighted that Female Genital Mutilation and Cutting in Asia Remain a neglected Problem; in most of Asia, there are little or no large-scale government programs for community education and awareness raising about FGM/C. Asia must partner with civil society organizations, affected communities, and survivors to better understand FGM/C, develop and implement effective policies, and invest in social, legal, educational, and health service provisions. According to

Kroll et al. (2020), in a study titled, promote locally led initiatives to fight female genital mutilation/cutting (FGM/C)," Lessons from anti-FGM/C advocates in rural Kenya.

The study's findings demonstrate the significance of locally-led initiatives to fight FGM/C. It also became clear that change would have to start at the family level, with parents, particularly fathers, taking on a more active role in their daughters' lives. Providing education about FGM/C to communities, particularly young men, coupled with keeping girls in school, appeared to be some of the most effective ways of fighting FGM/interventions through family engagement, which is ey crucial as a means of capacitating families on the effects of FGM.

The study conducted by Mkuwa et al. (2023) in Tanga, Tanzania, based on the role of communities and leadership in ending Female Genital Mutilation in Tanzania: an exploratory cross-sectional qualitative study in Tanga. Six villages were purposively selected from two districts of Northeast Tanzania (Kilindi and Handeni districts of the Tanga region). The study involved men and women above 19 years and Maasai community leaders (village government and traditional/ethnic leaders). Based on the Study, another factor is the rising level of education among girls in Maasai communities. WEOs play a crucial role. The initiatives to fight against FGM require joint efforts of various stakeholders.

Moreover, WEOs' involvement in the prevention measures to fight against FGM among young girls for Tarime DC is very important. Due to their involvement, they

are involved in Outreach campaigns based on FGM's negative impacts. Community members through dialogues, Women and Children Protection Committees, Reporting to Child Helpline (No 116), Engaging in Fathers and mothers Groups, Formulation of Gender Clubs, suggestion boxes and Gender desks in schools, Dissemination of brochures and other forms of Outreach Campaigns at community level with Various Development Partners.

The Role of Ward Executive Officers in Prevention Measures on Female Genital Mutilation among Adolescent Girls based on Outreach Campaigns is supported by substantial evidence indicating increased awareness, behavioral change, empowerment, and sustainability of efforts (UNICEF,2020). Engaging local stakeholders not only enhances the impact of these Campaigns but also fosters an environment conducive to long-term change regarding harmful cultural practices like FGM

#### **2.4.3 Social Welfare Officer Effectiveness towards Prevention Measures for Female Genital Mutilation among Adolescent Girls**

Globally, according to the UN Women Journal Looking Back and Pushing Forward: The Global Fight to End FGM (2020), globally, women aged 15–19 years are less likely to have been subjected to FGM than women in older age groups. The important thing is that the global role of social welfare officers in fighting FGM is that they serve as advocates, educators, supporters, policy developers, community engineers, trainers, and evaluators (WHO,2020). The roles will be successful if there are joint efforts globally.



According to the study *Addressing Female Genital Mutilation in Europe*: Allen et al. (2018), a scoping review of approaches to participation, prevention, protection, and provision of services. A scoping study design was selected, using Arksey and O'Malley's six-stage scoping framework to review identified sources. Key informant interviews were used to inform and add depth to the findings of the literature. Further research and social welfare officers' interventions are required to determine whether interventions are effective. At the same time, policy and practice development must be shaped and driven by the experiences, needs, and views of affected communities to address the needs of community members.

In the United States of America, UNICEF, in partnership with the UNFPA, on the most significant global efforts to eliminate the violent practice, UNICEF fights FGM at every level. Social Welfare officers stand up for Vulnerable young girls on a one-on-one level (UNICEF,2022). Therefore, social welfare officers' education of girls and women and improving their livelihood opportunities should be prioritized. Efforts on outreach programs about the dangers of FGM/C in communities should be strengthened by leveraging social media and cultural/religious groups to propagate the key messages, Keetile et al., (2021).

To eradicate FGM, governments in Asia need to work in partnership with civil society organizations, affected communities, and survivors to understand FGM/C better, develop and implement effective policies, and invest in social, legal, educational, and health service provisions (Chowdhury,2024). However, in Asia, risk-prevention strategies are needed first for health practitioners in identifying,

screening, and supporting women affected by FGM/C and, second, for welfare and social workers and health care professionals to identify, work with, and prevent girls from being cut. Consistent with international trends in addressing the risks of FGM/C, practice responses are required for coordinated responses.

Health and social care professionals in the United Kingdom must report FGM to the police if it occurs in individuals under 18. However, doing so under the Serious Crime Act (SCA) still needs to be better understood. Many social workers must be aware of invoking and policing FGM protection orders. Education for and the empowerment of social welfare officers is therefore essential in helping to prevent this abuse (Marriott, 2019). Where language barriers exist, social welfare officers must use sensitive language and recognized interpreters and never use family members or people from the community who may place girls in danger.

In line with health consequences, a study carried out in Djibouti, Somalia, and Sudan on women during pregnancy, childbirth, and postpartum revealed that unhealthy complications arising from FGM had increased both mortality and morbidity among those women (Yinger et al., 1999).<sup>2</sup> Currently, Resultantly, there would be a drastic social transformation among individuals and families in African communities, which will potentially end FGM and quickly motivate the remainder of the intermarrying population. (Rutkofsky, et al., 2020). The gap is that social welfare officers were not outlined to indicate their roles in fighting against FGM.

The research carried out in Africa titled Female Genital Mutilation: A Systematic Review of Research on Its Economic and Social Impacts across Four Decades

(Chastoney et al., 2016) outlined the role of Government officials in the fight against FGM. The review aims to characterize, over 40 years, the scientific output on the consequences of FGM in African countries. However, more appropriate research could contribute to better prevention of FGM and support victims of FGM: training health workers and raising the awareness of community leaders and authorities are crucial in this context. However, enforcement remains a challenge in rural areas where Legal awareness is Low (Muthumbi et al.,2023).

In Tarime-Tanzania, Social Welfare Officers play a crucial role in ending FGM Through advocacy and various interventions. Currently, they Coordinate the Program under The National Plan of Action to End Violence against Women and Children II (NPA-VAWC II) 2024/2025-2025/2028. Tarime is one of the districts where FGM is widely practiced in Tanzania. Though the government prohibits the practice of FGM under the Sexual Offences Special Provision Act 1998, FGM is still taking Place. The law provides that anyone having custody, charge, or care of a girl under eighteen years of age, which causes her to undergo FGM, commits the offense of cruelty to children Rhobi (2019).

Social welfare officers are frontline fighters against FGM. Their involvement in prevention measures is essential in safeguarding at-risk individuals and vulnerable groups. They work closely with various professionals, such as law enforcers and health personnel. The other agencies involved includes UNFPA, UNICEF, Barrick North Mara Gold Mine, Plan International, Help Age International, Women in Law and Development Africa, Rafiki SDO, Association and Termination of Female

Genital Mutilation (Masanga-Tarime), Children's Dignity Forum, People's Development Forum, and others, just to mention a few.

Generally, the empirical literature reviewed provides strong evidence that the involvement of Social Welfare officers in Outreach Campaigns against Female Genital Mutilation among adolescent girls is essential for fostering awareness, engaging Communities, Providing Support Services, and advocating for policy changes (UNICEF,2022). Their unique position enables them to bridge gaps between healthcare providers and communities while promoting a holistic approach to ending FGM practice.

## **2.5 Research Gap**

Many academicians, researchers, and scholars have written on the issues of FGM Adolescent girls outside of the study area. For example, Matanda et al. (2023) conducted a study to synthesize and assess the quality and strength of existing evidence on interventions designed to prevent or respond to FGM between 2008 and 2020. The quality of studies was assessed using the 'How to Assess the Strength of Evidence' guidelines published by the Foreign, Commonwealth and Development Office (FCDO). The study was done in developed countries compared to Tanzania, which makes it challenging to adopt the results for further decision-making and implementation.

Furthermore, Mkumbo et al. (2018) conducted a study on the implications of FGM on girls' education and psychological well-being in Tarime, Tanzania. This study was

all about the implications of FGM, while this study is going to look at the effectiveness of prevention measures against FGM among Adolescent girls. This study is going to be conducted on the areas/clans that are expected to mutilate girls for the year 2024, which is divided into two based on the Kurya cultural beliefs. The gap also is that the study fails to show us if there is literature that has been taking place in investigating the effectiveness of prevention measures on Female Genital Mutilation among young girls in Tarime.

The study carried out in Tanga, Tanzania, on the role of communities and leadership in ending FGM in Tanzania: An Exploratory Cross-sectional qualitative study in Tanga, written by Ngalesoni et al. (2023), used to show the involvement of social welfare officers to fight against FGM. During the study, participants were from the Masaai community. In this study, participants will comprise professionals who are indigenous to various communities to get results on the effectiveness of prevention measures on Female Genital Mutilation among Adolescent girls in Tarime. The Findings from this study will help improve and adopt prevention measures to stop FGM in the Kurya Community.

## **2.6 Conceptual Frame Work**

According to Swaen and Geoge (2022), A conceptual framework illustrates the expected relationship between your variables. It defines the relevant objectives for your research process and maps out how they come together to draw coherent conclusions. The conceptual framework should be constructed before beginning to collect data. A conceptual framework represents the visual format, and it illustrates

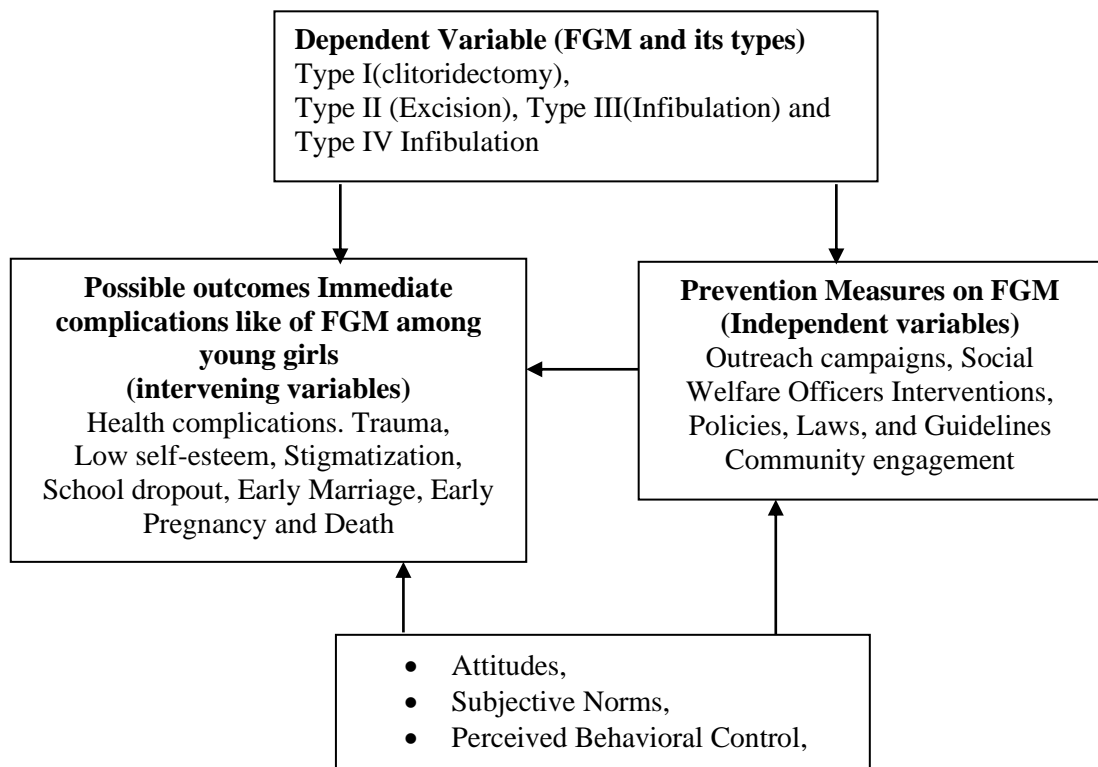
cause-and-effect relationships. Based on this study, the conceptual framework shows a Dependent variable: FGM with Its types. Independent variables are prevention measures to fight against FGM, and the outcomes of the intervening variables are also indicated.

The relationship between the conceptual Framework under the Study and the Theory of Planned Behavior Change in the Context of FGM Prevention among Adolescent girls is justified. Multiple dimensions influence Adolescent girls's Intentions regarding FGM by focusing on attitudes, Subjective Norms, and Perceived Behavioral Control. Researchers, Practitioners, and Development Partners can develop strategies that address both individual beliefs and broader social influences. Moreover, in the Context of FGM Prevention among Adolescent girls, TPB provides a structural Approach to analyze how the Components Influence the intention to engage in or reject Harmful Practice.

In Summary, Treating FGM as a Dependent variable allows researchers and policymakers to analyze how various Prevention Measures Influence its Prevalence while also Considering the Broader outcomes associated with this harmful Practice. Effective Prevention Strategies not only reduce rates of FGM but also contribute positively to women's and girls' health outcomes and societal well-being. Thus, through the practical application of Outreach Programs, Social welfare officials' interventions, Policies, Laws, and guidelines, Prevention Measures can result positively. It is based on the application of Prevention measures accordingly. Thus, the conceptual framework shows how a dependent variable, FGM, can lead to

various effects intervening with variables. As a result, independent variables, such as prevention measures, can assist in the fight against FGM. This has been shown in

Figure 2.1. Bellow



**Figure 2.1: Conceptual framework**

**Source:** Researcher, (2024)

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Chapter Overview**

The purpose of this study is to Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls in Tarime District Council. This chapter presents the Research approach, Research design, Population, Sampling, Validity, and Reliability; generally, it is all about research procedures.

#### **3.2 Research Philosophy**

Easterby-Smith et al. (2008) state that research Philosophy is concerned with how researchers view the world and what they consider valid Knowledge; it shapes their methodological choices and influences how they interpret Data. It is all about the underlying belief system that guides researchers in their approach to inquiry knowledge generation. This philosophical framework shapes how researchers formulate Questions, Design Studies, Interpret Findings, and understand the implications of their work. Ideally, it is a belief on how data about a phenomenon should be. There are three mainstream or classical research philosophies: positivism, interpretivism, and Pragmatism.

Positivism philosophy asserts that knowledge is derived from observable phenomena and that scientific inquiry should be objective (Creswell&Creswell,2017). Interpretivism Philosophy emphasizes understanding the subjective meanings and experiences of individuals. Researchers using this paradigm typically employ qualitative methods such as interviews or case studies (Kivunja &Kuvini,2017).



Pragmatism focuses on practical outcomes and real-world applications of Research Findings. Advocates for a mixed-methods approach, combining qualitative and quantitative techniques depending on the research question (Tashakkori & Teddie, 2010).

The study employed a pragmatic philosophy since it is openness to diverse methods it encourages using the methods that best answer the research question that allows mixed Method in Research (Creswell, 2014). This study utilized both Qualitative and Quantitative Methods to gain a Comprehensive understanding of the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime, DC. Qualitative methods, such as interviews with key informants, allowed for in-depth exploration of the Experiences, Perceptions, and Context based on the Measures taken to fight against FGM. On the other hand, quantitative methods, like questionnaires, provide quantitative data to measure and analyze the effectiveness of prevention measures in fighting against FGM. Hence, the choice of Pragmatic Philosophy aligns with the Study's General and Specific objectives.

### **3.2.1 Research Design**

Research Design refers to the plan or blueprint that guides the Systematic Collection, Analysis, and Interpretation of data to address specific research questions or objectives (Bloomfield & Fisher, 2019). The research design employed is Cross-sectional Design, in which Data is collected at one point. The selection of this design is influenced by the fact that a Cross-Sectional Research Design enables the Researcher to collect data from a large pool of subjects and compare differences

between groups—the cross-sectional design was selected for its ability to be used for both Quantitative and Qualitative data collections.

### **3.2.2 Research Approach**

According to Opie,2019, Research Approach refers to the systematic plan or strategy Researchers use to search and investigate a particular phenomenon. It is all about employing Methods, Techniques, and Procedures to Gather, Analyze, and interpret Data to address the study's research objectives. This study employed a Mixed Research Approach to Examine the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime District Council. This approach facilitated the researcher's intensive exploration to get significant information on this research topic. The researcher collected both qualitative and quantitative data.

Through quantitative methods, such as surveys, the research aims to quantify the effectiveness of, Outreach Campaigns, Involvement of Community members and Involvement of Social Welfare Officers.in The fight against FGM for Adolescent girls in Tarime DC was successful. Based on the study, a Qualitative Research Approach was applied to Examine the Effectiveness of Prevention Measures in the study area. Under the qualitative approach, opinions from respondents are generated and gathered through Primary information directly from Respondents based on the objectives.

### **3.3 Study Area**

According to McCombes,2021, the Study area is where the researcher aims to conduct the study. Kumar,2023 highlighted that area selection is crucial based on its

importance through the information produced. This study was conducted in the Tarime District Council, one among nine Mara Region-Tanzania councils. The Council comprises four divisions, 26 wards, and 88 villages with 500 Hamlets. Its population is 404,848, of which 194,403 are men and 210,445 are female, with 80,457 households (National Bureau of Statistics, (NBS,2022)).

The main economic activities in Tarime District Council are Agriculture, Mining, Fishing, Farming, business, and Employment opportunities. In General, the prominent Tribe in Tarime District Council is Kurya, which they are divided into 12 clans, namely Wairege, Nyabasi, Timbaru, Busweta, Kenye, Nchari, Rianchoka, Nyamongo, Kira, Rianchoka, Mera, Hunyaga and Simbiti (Mbilinyi,2010). Ten clans are mutilating girls mainly for the year divided by two. For the year 2024, From November to December, girls will be mutilated in nine (9) except for the clans of Rianchoka, Mera, and Hunyaga.

Tarime District Council has been selected as the study area for several reasons. Firstly, it is among the Mara region Districts where FGM occurs. The other Districts are Serengeti and Rorya. The Tanzania Demographic Health Survey (TDHS–MIS,2022) lists the five regions with the prevalence rate of FGM, the Mara region being among them. (TDHS-MIS 2022). Secondly, as the Council is boarded with Kenya, Cross Border FGM is taking place in which Mutilators from Kenya come to Tanzania, and those from Tanzania go to Kenya for Mutilation. Thirdly, Once the girl is Mutilated in the Kurya Society, she is considered the real one, with no curse, and the one that can be married with a lot of Dowry.

The reasons mentioned show the uniqueness of the study area yet motivated the Researcher to conduct the study in which the Effectiveness of Prevention Measures on FGM among Adolescent girls was Examined. Moreover, Tarime DC is one of the districts in Tanzania in which early Marriages and early pregnancies resulted due to FGM. Tarime DC had a lot of Development Partners that fight against FGM compared to other Councils of the Mara region, but the problem still exists. The factors mentioned motivated the researcher to conduct the study to examine the Effectiveness of Prevention Measures on FGM among Adolescent girls, which leads to coming up with recommendations to fight against FGM.

### **3.4 Study Population**

According to Creswell, 2012 Population is a group of individuals with the same characteristics. In other words, it is specified under the aspect of the research design as based on the determinants of generalizability of findings to the larger group from which the sample will be drawn. Under the study, the targeted Population was Adolescent girls aged 10-19 who are 8,131 in the Wards of Sirari, Binagi, Nyarero, Nyamwaga, and Muriba in Tarime Dc (2024), According to Ward Education Officers. Their selection is because they are the ones who experience FGM. Also, Various Prevention Measures to fight against FGM targeted them, and they are included in those programs.

Social welfare officers (SWOs) are targeted because they are the ones to safeguard the welfare of Children through Prevention Measures. SWOs for Tarime Dc are 3. Police officers have a role based on Law Enforcement, and for Tarime DC, there are

9, while WEOs are available in all 26 Wards of the Council, each for the Ward. The study also involves traditional leaders from 12 Clans of Kurya, with two representatives from each clan, so there will be 24. Traditional leaders are involved in the Study because they are the ones based on the Kurya culture to initiate and plan for FGM. The involvement of various Respondents assisted in examining the Effectiveness of Prevention Measures on FGM for adolescent girls.

### **3.5 Sampling Procedures**

Sampling Procedure is the act, Process, or Technique of selecting a Respondent or Representative part of the population to determine the population's parameters or characteristics (Verma, 2017). In other words, it is the Method used to select a Subset or Sample from a larger population. A Sample is a subgroup of the target population that the researcher intends to study for generalization about the target Population (Creswell, 2012). Sampling procedures follow two approaches: probability and non-probability.

In probability sampling all units are known and have positive probabilities of inclusion. Sampling procedures under probability are Simple, Random, Systematic, Stratified, and Clustered. Non-probability sampling units are included but with unknown probabilities (Kibuacha, 2021). Sampling Procedures under Non-Probability are Convenience, Purposive, Quota, and Snowball. The study employed purposive and simple random sampling to select relevant research areas and respondents under probability and non-probability sampling procedures. Sampling is

Essential under the study once assisted in studying an entire population due to Constraints such as time, Cost, and accessibility.

The Sampling Procedure was helpful to the Researcher in Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime District Council; the sampling procedure was helpful in the findings of the study based on the Experiences of the Respondents on FGM Interventions.

### **3.5.1 Probability Sampling**

According to Creswell (2014), Simple Random Sampling is significant because it cancels out biases. Therefore, each member of the study's population had an equal opportunity for Representation in the sample. Probability sampling involves random selection processes using various methods. The study used simple random sampling to select Adolescent girls and Traditional Leaders. Furthermore, simple random selection was applied to Examine the Effectiveness of Prevention Measures on FGM among Adolescent girls in the Tarime district council.

### **3.5.2 Non-Probability Sampling**

Nonprobability sampling is a technique that does not give all individuals in the population a chance of being selected. He believes that a prominent figure in Research Methodology involves selecting participants based on specific characteristics and criteria rather than random selection Creswell (2014). Under the Non-Probability Technique, Purposive Sampling was applied to select SWOs, Police Gender Desk Officials (PGDOs), and Ward Executive Officers (WEOs). The choice

of Purposive sampling is based on the possession of valuable information to this study only by the selected respondents. Therefore, the Purposive Sampling technique helped examine the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime, DC.

### **3.5.3 Sample Size**

A sample is finite part of a statistical population whose properties are to be studied to gain information about the whole population (Ganty,2012). Sample size determination is choosing the number of representatives to include in a statistical sample. Obtaining a sample size is very important because it is a feature of any study that aims to make inferences about a population from a given sample.

Using a confidence of 95% and a margin of error of 5%, with a population of 27,927, this study will have a sample size of 377 respondents (qualitative 351 and quantitative 26). In qualitative research, the sample size was calculated using the Table of Determining Sample Size, adopted from Krejcie and Morgan (1970). That is 351 obtained from 5 wards in Tarime Dc. In addition, 38 participants were selected purposefully based on their experience. However, the sample size 377 was convenient for providing the required data and drawing reliable conclusions, as suggested (Gupta & Mahanta,2022).

In obtaining the sample size, the researcher used Crejicie & Morgan's 1970 formula, accessed on 26 August 2024 from a Google Scholar search, to pick Respondents from Tarime, DC.

$$\text{SIZE} = \frac{X^2 NP (1-P)}{d^2 (N-1) + X^2 P (1-P)}$$

$X^2$  = table value of Chi-Square @  $d.f. = 1$  for desired confidence level

.10 = 2.71    .05 = 3.84    .01 = 6.64    .001 = 10.83

$N$  = population size

$P$  = population proportion (assumed to be .50)

$d$  = degree of accuracy (expressed as a proportion)

**Source:** Krejcie & Morgan, 1970.

Therefore, the sample size for this was 377 Respondents as distributed in Table.3.1.

#### **3.5.4 Sampling Distribution**

Simple Random and Purposive sampling technique used to get sub samples under the study. The sub samples include 3 SWOs, this is because they are only in that number, PGDOs who were 9 for Nyamwaga, Sirari and Tarime Gender Desks for the Police Stations Mentioned, Adolescent girls were 315 from Schools for the Wards of Binagi, Nyarero, Nyamwaga, Muriba and Sirari, WEOs were 26 and Traditional leaders will be 24.



**Table 3.1: Distribution of respondents in percentage**

S/N	Description of Respondents	Total Population	Objective	METHOD	TOOL
1.	SWOs	3	To Examine the Effectiveness of Social Welfare officer towards Prevention Measures on Female Genital Mutilation among adolescent girls.	Quantitative	Questionnaire
2.	PGDOs	9	To Examine the Effectiveness of Social Welfare officer towards Prevention Measures on Female Genital Mutilation among adolescent girls.	Quantitative	Questionnaire
3.	Adolescent girls	315	To Assess Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls.	Qualitative	Interview Guide Checklist
4.	WEOs	26	To Explore the Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent girls.	Quantitative	Quantitative
5.	Traditional leaders	24	To Assess Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls.	Qualitative	Interview checklist
<b>TOTAL</b>		<b>377</b>			

**Source:** Research Data (2024)

### **3.6 Inclusion and Exclusion Criteria**

Selection criteria in Research are all about a specific group of people used to select Respondents or Samples that have specific characteristics or attributes used to select participants or samples that meet the requirements of a study or experiment (Jeovany et al., 2016). The study involved SWOs, PGDOs, WEOs, Adolescent girls, and Traditional leaders. The study excluded individuals who are not involved in SWOs, PGDOs, or WEOs, as well as Traditional leaders who reside outside of the Tarime District Council, lack knowledge or Experience related to Prevention Measures on FGM, or Express unwillingness to participate in the study.

### **3.7 Secondary Data Source**

According to Kothari (2014), secondary data are data collected /gathered from already published articles such as studies, surveys, or experiments run by other people or for another research. Secondary data was obtained from libraries, including books, articles, journals, and other publications posted on internet websites. This kind of data helped to determine the existing knowledge about the chosen topic and shed light on the overall research process and its general objective, which is to Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among adolescent girls for Tarime District Council.

### **3.8 Primary Data Source**

Primary data are data collected afresh, and for the first time, and thus, they are original (Kothari, 2014) under the study; primary data are information collected during the study. Quantitative and qualitative data were collected from respondents

using Kobo Toolbox software and interviews. The specific objective of the interview guide was to explore the Role of Ward Executive Officers in Prevention Measures for Female Genital Mutilation among Adolescent girls. At the same time, the specific objectives of using the Kobo Toolbox are to Assess Prevention Measures on Female Genital Mutilation among adolescent girls and to Examine the Effectiveness of social welfare officers towards Prevention Measures on Female Genital Mutilation among Adolescent girls. In addition, secondary data collection involved Documentary Reviews such as quarterly, midyear, and Annual Reports, Journals, and Books. Documentary reviews serve on data triangulations (Saunders et al., 2012) and increase the quality of the collected data.

### **3.9 Data Collection Methods**

Data collection is collecting information from all relevant sources to find answers to the research problem, test the hypothesis, and evaluate the outcomes (Kothari, 2014). There are both primary and secondary data. The study also considered supplementing the Quantitative data with qualitative Methods such as Interviews. These methods provided more profound insights into participants' Experiences, Perceptions, Opinions, Suggestions, and the nuances of their Responses, complementing the quantitative data obtained through questionnaires under the Kobo Toolbox.

#### **3.9.1 Questionnaire**

This study employed a Questionnaire Method to collect Quantitative Data. The Questionnaires are a systematic series of questions designed to be used in data collection on a particular study in the field Kothari, (2004). Kobo toolbox Soft Ware

used to collect data. The questionnaires captured data from the Target Sample based on the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls. Questionnaires used in the study reduce bias and allow the large sample to be investigated. Apart from having some advantages, it also has disadvantages, such as tending a low rate of return by the Respondents.

In this study, the researcher employed the interview method to complement the weaknesses of the questionnaire. The specific objectives applied are:

- i) To assess the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls.
- ii) To Explore the Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent girls.
- iii) To Examine the Effectiveness of Social Welfare officers towards Prevention Measures on Female Genital Mutilation among adolescent girls.

### **3.9.2 Interview Guide**

According to Smith (2020), An interview Guide is a structured Framework used by Researchers or Interviewers to facilitate the interview process. It consists of a series of predetermined questions and topics designed to elicit specific information from the interviewee. The interview Guide's purpose is to ensure consistency across interviews, allowing for comparability of data while still providing flexibility for follow-up questions based on the response given. This tool was used to examine the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls as required vital informants to obtain such information.

### **3.9.3 Interview Guide Checklist**

This tool is used to guide Focus group discussion (FGD). FGD is used in a Qualitative approach to gain an in-depth understanding of social issues. FGD aims to obtain data from a purposely selected group of individuals. It is also a Method in which a researcher moderates' groups of 6-12 respondents on issues related to the study to be conducted. It allows for more data from Respondents (Barret, Twycross 2024). This study was used to gather adolescent girls' views on the support provided by a social welfare officer in examining the effectiveness of prevention measures on adolescent girls.

### **3.10 Validity and Reliability**

The Aspects of Validity and Reliability are also crucial in this study. Hence, the Researcher's Findings must be Valid and Reliable. Validity and Reliability are factors that any Researcher looking for good Quality Research should consider while designing a study and Analyzing and Presenting the results. Generally, a Measuring Instrument can only be reliable if it is valid. However, if a Measuring Instrument is valid, it is likely also reliable.

Nevertheless, to guarantee validity, more than relying solely on reliability is needed. Even if a test consistently produces reliable results, it may need to accurately represent the intended behavior or quality (Kubai, 2019). Validity and reliability were applicable in the study Examining the Effectiveness of Prevention Measures on FGM among Adolescent Girls in a Tarime District Council.

### **3.10.1 Reliability**

Reliability refers to the ability of the measuring instrument to give accurate and consistent results (Benard, 2006). In other words, the Reliability of the study is the extent to which other researchers arrive at similar results if they undertake a study with the exact case using the same procedures as the first researcher (Agori-Iwe, 1982; Creswell, 2013; Kothari, 2017). For this study, Reliability maintained through the use of clear Coding framework and Inter-Coder reliability checks, this was to ensure consistency for data analysis. This approach allows for transparency and reproducibility, Making the findings more robust and Credible. The researcher designed Research that is auditable, i.e., transparent and clear so that the reader undertakes the same Method and produces the same results, or at least the method is clear enough to instill confidence in the reader that the results were not fudged in any way (Greener, 2008; Saunders et al., 2009).

In this study, the researcher prepared and formulated an adequate number of questions collected from various Respondents using Questionnaires and Interviews—however, the reconnaissance was conducted to test the instruments.

### **3.10.2 Validity**

Validity refers to the effectiveness of an instrument to measure what it is intended to measure (Benard, 2006). Likewise, Kothari (2007) comments that validity is when the instrument measures what it is supposed to measure. In other words, Babbie (1989) writes that validity refers to the extent to which an empirical measure adequately reflects the real meaning of the concept under consideration (Gupta & Gupta,

2022).). For this study, a pre-test of the survey instrument was Conducted to ensure content validity.

This study aimed to Examine the Effectiveness of Preventive Measures on Female Genital Mutilation achieved Validity in various ways, as Kothari (2004) suggested. Firstly, through questions formulated and pre-testing questionnaires, the questions are clear and possible problems identified earlier to find solutions to overcome them easily. Secondly, the researcher Ensured that the collected data was edited to identify and eliminate Errors and Omissions during data Recording. The reason is to attain Completeness, Accuracy, and uniformity. In general, the questionnaires for respondents were checked and verified by the research supervisors of this study to validate the questions before they were administered to the respondents. Under the Study Validity data triangulated using Multiple sources and validation of respondents conducted to confirm interpretations.

### **3.11 Qualitative Data Rigor**

In qualitative Research, rigor, or trustworthiness, refers to how Researchers ensure the quality of the study. Research Rigor mirrors several Methods and Approaches that are influenced by Qualitative Research through multiple realities; this is observed and applied during data collection and analysis for the participants.

#### **3.11.1 Dependability**

Dependability focuses on the fact that if the study were repeated using the same method, participants, and context, it would produce similar results (Kombo et al.,

2006). However, due to changes in circumstances, two studies conducted in similar situations may bear different results and still be dependable and reliable, considering that they present similar social phenomena (Aro, 2006). To ensure dependability, this study tries to Explain real-life bases on FGM and Prevention Measures taken to fight against FGM in Tarime, DC.

### **3.11.2 Trustworthiness of the Study**

Kombo et al. (2006) explain that trustworthiness can be established by reporting the findings honestly and straightforwardly using direct quotes from the Research Participants. Trustworthiness is more concerned with qualitative research and is divided into dependability, conformability, and transferability. In this study, the researcher adhered to trustworthiness.

### **3.11.3 Conformability**

Conformability refers to the extent to which others could confirm or support the study results (Arias et al., 1996). The data, findings, Responses, and Views of participants gathered from the study area are real. To ensure conformability, the Research used a check trial, peer review, triangulation, and reflexivity. Therefore, this study used records taken during interviews, verbalism, and literature review to ensure the conformability of the findings.

## **3.12 Data Analysis and Presentation**

This section provides readers with research technicalities that were employed in the analysis and presentation of data.



### **3.12.1 Data Analysis**

Data Analysis refers to Examining what has been collected in a survey and making reductions and inferences (Cohen,2007). This study is all about Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls. The general objective is to Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among adolescent girls In Tarime District Council. Three specific objectives also guide it. The first objective is to Assess the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls. For this objective, the Researcher knew various Outreach Campaigns applied to fight against FGM and their Effectiveness for Tarime DC. Under this objective, A sample of 377 Respondents could answer the questions. The subjects are social welfare officers, Police Gender Desk Officials, Ward Executive Officers, Adolescent girls, and traditional leaders.

The second specific objective is to Explore the Role of Ward Executive Officers in prevention measures for Female Genital Mutilation among Adolescent girls—the probability sampling technique used, especially the stratified sampling technique. Data was collected using interviews and questionnaires through the aid of Kobo Toolbox. The third objective is to examine the Effectiveness of social welfare officers towards Prevention Measures on Female Genital Mutilation among Adolescent girls; a purposive sampling technique was used.

Based on the study, Quantitative and Qualitative data were analyzed separately. This aimed to draw valid inferences about what was analyzed and avoid false

relationships. Quantitative data was analyzed using descriptive analysis and subjected to Computer Software, Statistical Package for Social Science (SPSS) version 20. This program enabled the Researcher to Record, deal with nursing variables, and weigh and select cases. Using the SPSS program, the researcher was able to determine the relationship between independent and dependent variables and present findings using tables and graphs. Qualitative data is organized before being edited, then coded, tabulated, and compiled by the Researcher and analyzed through Thematic Analysis.

Thus, data processing involves collecting, recording, organizing, storing, and adapting or altering to convert the raw data into useful information. SPSS Version 23 was used to analyze quantitative data from specific objectives two and three. Qualitative data were analyzed using thematic analysis, and later, quotations were used to capture and summarize key themes. Reference can be seen from Specific objective one.

### **3.12.2 Data Presentation**

According to Zhang, Y., & Lee, D. (2021). Define Data Presentation as the process of Transforming raw data into a structured format that enhances comprehension, often involving visual tools such as graphs or tables that facilitate the interpretation and communication of research Findings. In presenting the findings, this study used textual, tabular, and graphical methods where necessary. The researcher chose to apply textual, tabular, and graphical methods that necessitated the arrangement and visualization of the findings of this study because of compatibility and effectiveness

in conveying the intended meanings of the research findings to the readers.

### **3.13 Ethical Consideration**

Ethics are principles or rules of behavior that dictate what is acceptable or allowed within a profession (O'Leary,2010). According to Cohen (2007), ethical issues may arise from the kind of problem investigated by a social scientist and the method they use to obtain reliable and valid data. The researcher adhered to Research Ethics Procedures before.

#### **3.13.1 University Clearance**

The study will be based on the Open University of Tanzania prospectus and other research directives. Moreover, the research clearance letter was obtained from the Open University of Tanzania, Department of Sociology and Social Work, before reporting to the study area to ensure and adhere to research ethics. Likewise, they reported to the Tarime District Council Authority before the study commenced. During the study, the researcher adhered to the following ethics: Confidentiality, Anonymity, Consent, Assent, Do no Harm, and Voluntary Participation.

#### **3.13.2 Consent**

For informed Consent, the researcher ensures that participants understand that they are taking part in Research and what they are required to do. Adolescent girls' consent from parents/guardians is obtained because they are children. Moreover, other important things are to understand the purpose of the Research, the methods being used, the possible outcomes of the Research, as well as associated Demands,

Discomforts, Inconveniences, and Risks that the participants may face the Consent and Assent Research subjects obtained prior to data collection especially for adult and children respectively to ensure their privacy during data collection. Individuals need to know the purpose and aims of the study, how the results will be used, and likely the social consequences the study will have on their lives (Creswell,2012).

### **3.13.3 Assent**

To adhere to this principle, the researcher will ensure that the young participants, especially adolescent girls, are willing to participate in the study. This was also applicable to Traditional leaders. This is based on their age of being old enough to understand the Proposed Research in General as Subjects under the study.

### **3.13.4 Confidentiality**

This principle, during Research, is all about ensuring that all information provided by respondents attained to the researcher is treated confidentially and only used for the sake of this study and not otherwise. Also, the researcher gave Respondents enough time and a conducive environment to fill out the questionnaire. After all, participants typically only be willing to **volunteer** information, especially information of a private or sensitive nature, since the researcher agrees to hold such information in confidence. Ethical issues throughout the research process are critical during data collection and in writing and disseminating reports (Creswell,2012).

### **3.13.5 Anonymity**

The principle of anonymity is employed during data collection to ensure that research subjects do not put their names to obtain deep information. Moreover, the

research subjects will be informed of the study's aim before data collection begins. When they participate and provide information, the researcher protects and guarantees their anonymity (Creswell,2012).

### **3.13.6 Do not Harm Principal**

The researcher does not harm the subjects based on the principle. Participants were not put in a position of discomfort. To avoid harming the participants, the Researcher ensures Obtaining **informed consent** from participants, Protecting the **Anonymity** and **Confidentiality** of participants, avoiding **deceptive practices** when designing the Research, and Providing participants with the **right to withdraw** from the Research at any time. The sweepers g, group was the Social Welfare Of fixers, used to handle participants' emotions when conducting a study.

### **3.13.7 Voluntary Participation**

Participation was voluntary; no one was forced to participate in the study. The participants who participated voluntarily were social welfare officers, Police Gender Desk Officials, Adolescent girls, Ward Executive Officers, and Traditional leaders. The researcher ensured voluntary participation for participants.

## **CHAPTER FOUR**

### **DATA PRESENTATION AND DISCUSSION**

#### **4.1 Chapter Overview**

This chapter Presents the results of the study and discusses the findings in relation to the three specific research objectives: Assessing the Effectiveness of Prevention Measures on Female Genital Mutilation (FGM) among Adolescent girls, Exploring the Role of Ward Executive Officer Prevention Measures on FGM among Adolescent girls, Examining the Effectiveness of Social Welfare officer Prevention Measures on FGM among adolescent girls at Tarime District Council. The Data Collected from Adolescent Girls and Traditional leaders through Interviews and from Social Welfare officers, Ward Executive Officers and Police Gender Desk Officers through Questionnaires.

Quantitative Data analyzed Using descriptive Statistics using SPSS Software Thus, data processing involves collecting, recording, organizing, storing, and adapting or altering to convert the raw data into useful information. SPSS Version 23 was used to analyze quantitative data from specific objectives two and three. Qualitative data were analyzed using thematic analysis, and later, quotations were used to capture and summarize key themes. Reference can be seen from Specific objective one.

Information on the Demographic and Socio-Economic Status of the Study's subjects, which include Respondents and Participants. It is composed of three Specific Objectives:

The chapter concludes with a Discussion of the critical Findings from each Specific objective, all of which are Examined through the Focus on the Theory of Planned Behavior (TPB), a critical framework that underpins this study.

## **4.2 Socio-Demographic Characteristics**

Social demographic information is crucial in research as it provides and paves the way for Understanding different populations' behaviors, attitudes, and outcomes. The Characteristics of age, Gender, Education Level, Marital Status, and Ethnicity assist the Researcher in identifying patterns and Trends within individual groups, which assist in more accurate analysis and Data Interpretation. Their Importance is for Understanding Diversity, Designing Targeted Interventions, assisting in Promoting Equity and Inclusivity in Research Outcomes, enabling researchers to identify at-risk Populations, tailor prevention Strategies, and Facilitate Comparative Studies Across different areas (Bennett,2010).

Social Demographic Characteristics under the Study assist the Researcher in tailoring the Prevention Measures to be culturally sensitive to address and Fight against FGM (Yin et al.,2018). Risk Factors Identification, Understanding Barriers to Prevention, Evaluating Program Impact and Policy Implications are Crucial for Demographic Characteristics under the Study Titled Examining the Effectiveness of Prevention Measures on FGM among Adolescent Girls. Furthermore, they are crucial for understanding the background details of the research participants. In general, demographic information informs the researcher what type of respondents were involved in the study based on the research objectives.

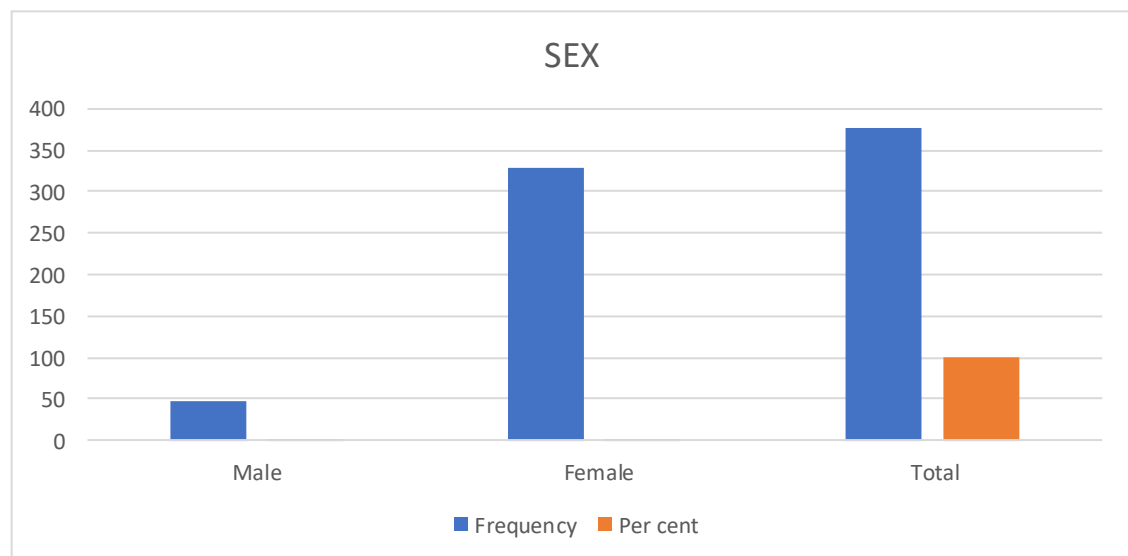
#### 4.2.1 Distribution of Respondents by Gender

The distribution of Respondents by Gender is a Statistical Representation of Individuals in a Study according to their Gender (Cresswell,2017). This study aimed to get responses from both Female and Male Respondents. The study reached a total of 377, of which Males were 47, equivalent to 12%, and Females 330, equivalent to 88%, as presented in Table 4.1 and the Graph below.

**Table 4.1: Distribution of Respondents by Gender**

Sex	Frequency	Per cent
Male	47	12%
Female	330	88%
<b>TOTAL</b>	<b>377</b>	<b>100</b>

**Source:** Research Data (2024)



**Figure 4.1: Respondent sex categorization**

**Source:** Research Data (2024)

The previous studies Carried out by Lingred et al. (2020) and Parkes et al. (2020) Found that Women are fewer active participants. However, the Current Findings of the Study do not align with those of Previous Studies.



### 4.2.2 Age of the Respondents

Prevention measures for FGM are associated with demographic characteristics such as age. Therefore, it was necessary to consider the ages of Respondents, as the age category is believed to be crucial in Examining the Effectiveness of Prevention Measures on FGM. The age distribution under this study was between the ages of 9 and 50+.

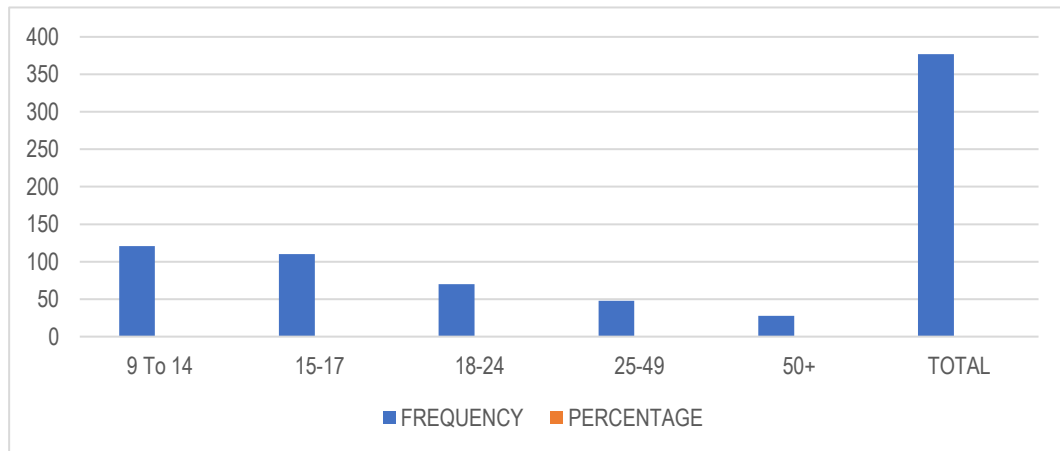
### 4.3 Age Categorization

The study Results show that the largest age group among the respondents was 9-14, making up 32% of the total. They were then followed by (15-17) years old, then (18-24) making up 19%, then (25-49) with 13%, and 50+ having 7%. Age Category in research is Crucial in identifying development differences, health risks, and social behavior that vary across the lifespan. Age category can influence study outcomes and interpretations, allowing researchers to tailor interventions and Policies Effectively (Cohen&Janicki,2016).

**Table 4.2: Distribution of respondents by age**

Age Group	Frequency	Per cent
9-14	121	32%
15-17	110	29%
18-24	70	19%
25-49	48	13%
50+	28	7%
<b>TOTAL</b>	<b>377</b>	<b>100</b>

**Source:** Research Data (2024)



**Figure 2.2: Respondent age categorization**

**Source:** Research Data (2024)

In Summary, Age distribution in this study in Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls assisted. Used to inform targeted intervention, identifies Vulnerable groups' needs, especially adolescent girls that need Support in overcoming FGM in Tarime, DC. This can lead to more Successful outcomes in Combating this Harmful Practice.

#### **4.3.1 Education of the Respondents**

The level of education plays a Crucial Role in Research Studies Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls. This is based on the fact that Higher education Levels often correlate with Increased awareness of health risks and Human Rights Issues related to FGM (Benson (2018). Education fosters Critical Thinking Skills, Health Care access, advocacy, leadership, and intersectional understanding among individuals.

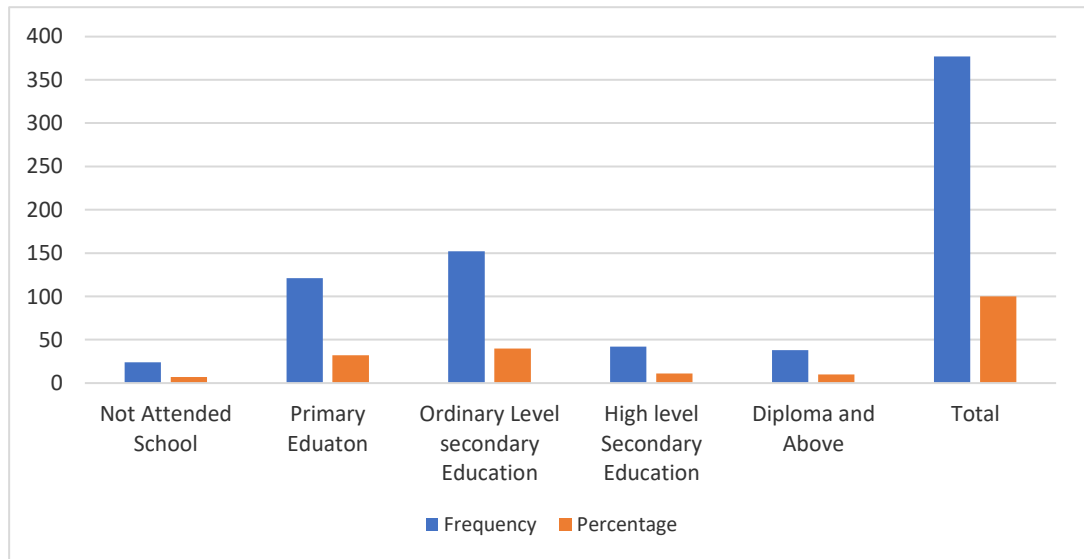
The current study found that 7 % of the respondents did not attend School, 32 % acquired primary education, 40% possess secondary education, 11% have High-Level Secondary Education, and 10% acquired diploma education and above. These findings show that the level of education is below average in every category, with few not attending Schools and those with diplomas in education and above. This indicates that many officers may have limited education, which could affect the overall capacity, expertise, and Effectiveness to Fight against FGM. Furthermore, findings show that the respondents' ratio in different education categories must be balanced.

In Conclusion, the level of Education is Crucial in Examining the Effectiveness of Prevention Measures against FGM among Adolescent girls. This enhances awareness, empowers Decision-Making, Fosters Community Engagement, integrates change promotion, and supports advocacy efforts for policy reform. So, the education level category is essential for achieving Sustainable Development Once it leads to intervention planning. Proportions of the study sample coming from other levels of education are described in Table 4.3 below and the Graph.

**Table 4.3: Level of Education**

<b>Level of Education</b>	<b>Frequency</b>	<b>Per cent</b>
Not Attended school	24	7%
Primary Education	121	32%
Ordinary Level Secondary Education	152	40%
High Level Secondary Education	42	11%
Diploma and above	38	10%
<b>TOTAL</b>	<b>377</b>	<b>100</b>

**Source:** Research Data (2024)



**Figure 4.2: Education level for respondents**

**Source:** Research Data (2024)

#### 4.3.2 Marital status of the Respondents

Marital status is another demographic variable that plays a Crucial Role in Examining the Effectiveness of Prevention Measures on FGM among Adolescent girls. Marital status can influence cultural Perceptions of FGM because it is associated with Marriageability and understanding how respondents view FGM Practice. Not only that, but it also assists in decision-making and can lead to Program Development based on various Marital Statuses and identification of Health risks, Social Networks, and Data Interpretation.

As shown in Table 4.5, most of the respondents (51%) were married, while 48% were Single study involved Children below 18 years of age, Widows and widowers were 0%, Separated 0.8%, and Divorced 0.2% were not married. The data suggests a

relatively smaller proportion of divorced couples and no respondents who were widows or widowers.

In Summary, the analysis of Marital Status Provided Essential Context for understanding attitudes toward FGM and the Effectiveness of Prevention Measures that assists in Planning and Developing various Interventions.

**Table 4.4: Marital status of the respondents**

<b>Marital Status</b>	<b>Frequency</b>	<b>Per cent</b>
Marriage	191	51%
Single	183	48.9%
Widow	0	%
Widower	0	%
Separated	2	0.8%
Divorced	1	0.2%
<b>TOTAL</b>	<b>377</b>	<b>100</b>

**Source:** Research Data (2024)

#### **4.4 Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls**

The finding for the first specific objective is presented using a qualitative method, and more details are presented while guiding the Effectiveness of Prevention Measures on FGM among Adolescent girls. The Interview Guide and Interview checklist were used to gather information from Three Hundred and fifteen (315) adolescent girls. The Interview Guide Checklist was used, and the Traditional leader, who was Twenty-Four (24) in number, provided information through the interview checklist.

#### 4.4.1 Prevention Measures Used to fight Against FGM among Adolescent Girls

The respondents Illustrated their feelings based on the Effectiveness of Prevention Measures in the Fight against FGM. The majority of them narrated as follows:

*"Prevention Measures on FGM are better to be used in fighting against FGM. Traditional leaders are the ones to initiate the practice, we require Police Officers to arrest Traditional leaders and Cutters who will be proven to initiate and perform FGM Practice."*

They due Continue

*"Adolescent girls are still victims base on FGM practice, this is because our Parents believe that, once you become Mutilated you are considered as a real person and at the time of being Married, they will get allot of dowry being in terms of Cows. This is not True at all, not only that, but when the girl not mutilated you become stigmatized to the community as one with a curse, so once Prevention measures on FGM performed effectively will assist to overcome his **Harmful** practice. Various Outreach Programs needed to be implemented in school and at Community level to fight against FGM."*

Traditional leaders added that:

*During the Cutting Period for FGM, we, as Traditional elders, are not going to the family to take girls; parents and guardians are **the** ones who take their daughters for Circumcision."*  
*"As elders, we are Requesting the **Government** to empower us Economically, women, People with Disability, and Youth are empowered through Soft loan Providers under the Council, but Elders Have left."*

#### 4.4.2 Availability of Programs to Prevent Adolescent Girls from FGM.

Traditional Leaders narrated as follows:

*"Prevention measures are effective, but mostly we are not included, formally Masanga center used to create awareness on **FGM** in collaboration with Traditional leaders, but we don't understand what happened. this is because now we are not called in any Training with Government Officials and other Development partners, and if called only two (2) representatives from us".*

Adolescent Girls mentioned:

*"We have Gender clubs in our schools but, there is a need to meet thrice a week because in our clubs we have only one day for a week to discuss*

*and share various ideas FGM being one of the topics to be discussed. Not Only the but also, we have suggestion boxes in our schools but we don't gate feedback base on suggestion(s) provided in those boxes".*

*"The Programs required and there is a need to have something to be done for prohibiting Mutilators from Kenya and those ones from Tanzania to Kenya, this is a big challenge."*

#### **4.4.3 Safe House and Fit Families are Well Known to the Community Members**

Under this aspect, Adolescent Girls Narrated as follows:

*"Safe House is only one located in Masanga that is very far from us, because the Council has 88 Villages and 500 Hamlets. Having only one Safe House is not satisfactory for all children in the Council. It also becomes difficult at the time of Circumcision to go up to Masanga there is a need of having at least (3) three safe Houses and those fit Families not known to us we need awareness to be familiar on Fit Families."*

The findings presented show that adolescent girls do not like to undergo FGM, but they are forced with their Guardians and Parents. Traditional leaders are mentioned as the ones with the power over FGM, and they are afraid of community members. This is because even Mutilators cannot start to cut girls until they make an announcement on the date of FGM to be started. Once they made an Announcement, Community members took their daughters as they were afraid of Traditional leaders in the community.

According to (UNICEF,2019), Engaging Traditional Leaders and Local influences is crucial. Their engagement can lead to more robust and greater acceptance of the community. Furthermore, programs focusing on empowering Women and girls through outreach programs and economic opportunities have been effective in shifting cultural norms Yoder Wang (2019).

#### **4.4.4 Programs in Schools to Prevent Adolescent Girls on FGM Based on the**

##### **Aspect, They Responded as Follows:**

*"We have School clubs and suggestion Boxes, but we don't know when and who is opening suggestion boxes; those are programs that we know. But also, we were taught about Reporting GBV Cases through Child Help Line No 116."*

#### **4.4.5 Awareness of Women and Child Protection Committees.**

*"Women and Child Protection Committees Not Known to us, what we know all about Gender clubs in schools in which we have, Matrons and Patrons in our Schools."*

#### **4.4.6 Prevention Measures Listed to Fight Against FGM**

- i) Awareness of committees under NPA VAWC at the community level is required.
- ii) Teachers needed to Create Awareness of Suggestions Boxes located in schools
- iii) Traditional leaders and Mutilators who Initiate FGM need to be arrested and charged before the Law.
- iv) Fit Families and One Stop Centre must be better known to the Community members; awareness is Required.

#### **4.4.7 Discussion on Effectiveness of Prevention Measures on Female Genital**

##### **Mutilation among Adolescent Girls**

Qualitative findings recognize the effectiveness of Prevention Measures on FGM among Adolescents in Tarime, DC. The study's findings are supported by Oduor et al. (2022), who conducted a Study in Kenya on the Effectiveness of Prevention



Measures on FGM. The findings indicated that Community Engagement Programs are particularly effective in changing attitudes toward FGM.

The findings share the same meaning as the study of Mohamed et al. (2023), who conducted a survey on FGM and mentioned the importance of legislative actions. He noted that Countries that enforced strict penalties for practicing FGM saw a notable decline in its prevalence. The findings show how the study is relevant to TPB theory, as changing attitudes are crucial to be considered in fighting against FGM. From this view, this study proposes that Prevention Measures on FGM play a vital role in the fight against the Practice.

#### **4.5 The Role of Ward Executive Officer Towards Prevention Measures on FGM among Adolescent Girls**

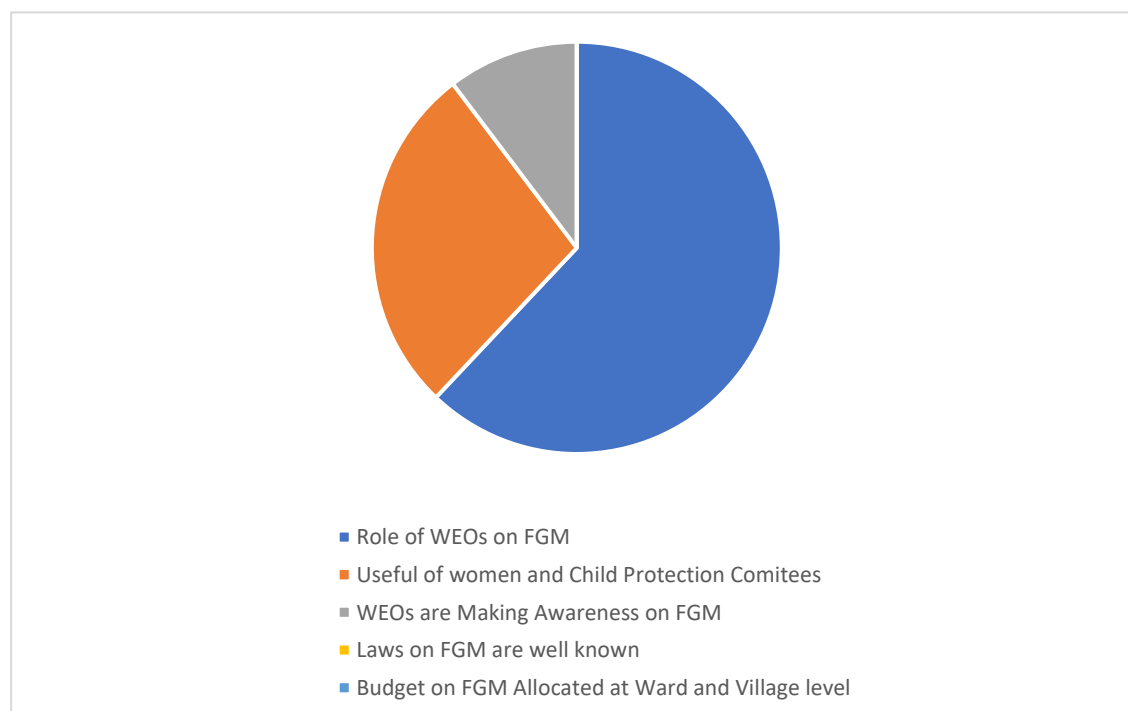
Quantitative findings recognize the Role of the Ward Executive Officer toward Prevention Measures on FGM among Adolescent girls in Tarime, DC. The Study Conducted with UNICEF revealed that WEOs can leverage their positions to advocate for policy changes in addressing harmful practices and norms (UNICEF,2022). They are involved in awareness creation through outreach campaigns to Promote alternative rites of passage.

The study conducted with WHO (2023) Pointed out that WEOs are engaged with community leaders and members to foster dialogue on FGM. Through workshops and Seminars, they aim to raise awareness about the harmful effects of FGM on women's Health and well-being. This is quite relevant to the Study based on the objectives and Theory that guided it.

**Table 4.5: Role of ward executive officer towards prevention measures on FGM**

<b>Roles of WEOs Towards Prevention Measures on FGM</b>	<b>Total Sample</b>	<b>Responses</b>	<b>Number</b>	<b>Per cent</b>
WEOs have Trained on Measures to be taken to fight against FGM	26	Yes	26	100%
		No	0	0%
		Don't Know	0	0%
Women and Child Protection Committees under NPA-VAWC at village and Ward Level are useful to fight against FGM.	26	Yes	15	58%
		No	9	42%
		Don't Know	0	0%
WEOs are Making Awareness to the Community Members on reporting FGM	26	Yes	12	46%
		No	14	54%
		Don't Know	0	0%
Laws to fight against FGM well known to the community members	26	No	26	100%
There is a budget allocated at Ward and Village Level to fight against FGM	26	No	26	100%

**Source:** Research Data (2024).

**Figure 4.3: Role of ward executive officers towards prevention measures on FGM**

**Source:** Research Data (2024)

Refer to Table 4.6 and Figure 4.1. This Aspect Responded with WEOs. The response for the Aspects is narrated in the Table and Figure.

Table 4.6 Shows the Role of Ward Executive Officers in prevention Measures for FGM. The mentioned roles for WEOs include Being Trained on Measures to fight Against FGM in which 26/26 (100%) Said yes, 15/26 (58%) Said no, and 9/26 (42%) Said for NPA -VAWC Committees useful in Fighting against FGM. Making Awareness on Reporting Child Abuse response was 12/26 (46%) 14/26 (54%) Said No. The Budget Allocation for WEOs Scored (0/2100%) shows that no budget is allocated at the Ward and Village level to fight against FGM. also, Laws on FGM are not known to the Community members.

The Findings Presented in Table 4.6 show that most WEOs have been Trained on the issues of FGM. On the other hand, it shows that Committees under NPA-VAWC have been formulated but need to be fixed to fight against FGM. Concurring with the Presented Findings, the ineffectiveness of WEOs in Tarime District in the fight against FGM has been highlighted by Kihinga(2018), noting that WEOS often lack Support from Higher Authorities and face Cultural Barriers within their Communities. Similarly, Mvungi (2019) highlighted inadequate Training and Resources available to WEOs, which hinder their capacity to implement effective interventions based on FGM. So, this provides and creates an understanding of the limitations faced by WEOs in the fight against FGM in Tarime, DC.

**4.5.1 Prevention Measures That Are Listed Based on The Opinions to Fight Against FGM in Tarime DC Are as Follows:**

- i) Budget Allocation to fight against FGM at the Ward and Village Level
- ii) Making awareness at the community level of laws, guidelines, and policies concerning FGM.
- iii) There is a need for cross-border meetings once mutilators are From Kenya to Tanzania and Vice Versa.

**4.5.2 Discussion on the Role of Ward Executive Officer Toward Prevention Measures on Female Genital Mutilation among Adolescent Girls**

Quantitative findings recognize the role of Ward Executive Officer Toward Prevention Measures on FGM among Adolescents in Tarime, DC. The study conducted by Musa et al. (2021) supported the study's findings, which explored how cultural beliefs, attitudes, and Perceived Social Norms Influence FGM Practices in Communities. The study emphasizes the Prevention Measures that address these elements, such as outreach Campaigns and Community engagement in relation to TPB Principles.

The points mentioned above relate to the Role of the Ward Executive Officer in Prevention Measures of Female Genital Mutilation among Adolescent Girls. WEOs can fight against FGM in the Community through interventions that challenge Harmful Cultural Practices in the communities in Tarime, DC. From this view, this study proposes that WEOs play a Crucial role in the fight against FGM through the use of various prevention measures.

#### **4.6 Effectiveness of Social Welfare Officer Towards Prevention Measures on FGM among Adolescent Girls**

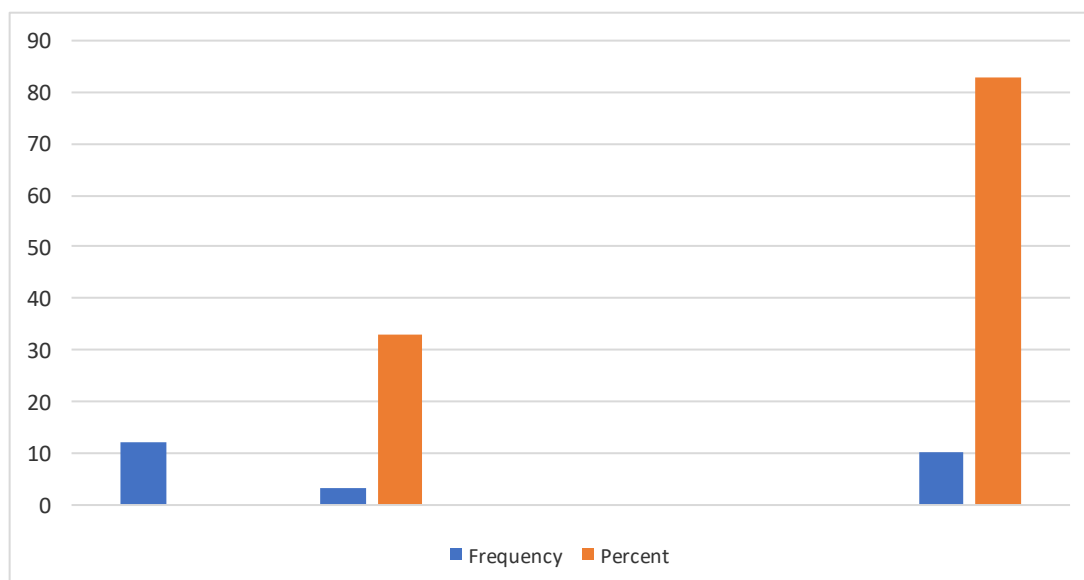
Quantitative findings recognize the Effectiveness of Social Welfare Officers towards Prevention Measures on FGM among Adolescent girls in Tarime, DC. The research carried out in Africa titled Female Genital Mutilation: A Systematic Review of Research on Its Economic and Social Impacts across Four Decades (Chastoney et al., 2016) outlined the role of Government officials in the fight against FGM. The study outlined the importance of training health workers and raising the awareness of community leaders and authorities are crucial in this context. Indeed, a multi-sectorial strategy is needed in the fight against FGM. Top of Form.

In Tarime-Tanzania, Social Welfare Officers play a crucial role in ending FGM Through advocacy and various interventions. Currently, they Coordinate the Program under The National Plan of Action to End Violence against Women and Children II (NPA-VAWC II) 2024/2025-2025/2028. This is quite relevant to the Study based on the objectives and Theory that guided the Study about the role of social welfare officers in the fight against FGM as they make awareness of attitudes changes, harmful norms as well as behavioral control, not engage in the behaviors that can lead to being against Human Rights.

**Table 4.6: Effectiveness of social welfare officer toward prevention measures on FGM**

12	Total Sample	Responses	Number	Per cent
SWOs Make Intervention through Outreach Campaigns on FGM	12	Yes	12	100%
		No	0	0%
		Don't Know	0	0%
SWOs Use of Scientific Evidence Based to fight against FGM.	12	Yes	3	33%
		No	4	33%
		Don't Know	5	34%
SWOs involvement in Decision Making	12	Yes	0	0%
		No	12	100%
		Don't Know	0	0%
Previous Study has done on Examining the Effectiveness of Prevention Measures on FGM	12	Yes	0	0%
		No	12	100%
		Don't Know	0	0%
SWOs role on FGM well known to the Community Members	12	Yes	10	83%
		No	2	17%
		Don't Know	0	0%

**Source:** Research Data (2024)



**Figure 4.4: Effectiveness of social welfare officer toward prevention measures on FGM**

**Source:** Research Data (2024)

Table 4.7 Shows the Effectiveness of the Social Welfare Officer Toward Prevention Measures for FGM. The variables mentioned in the effectiveness of social welfare officers include their interventions through outreach campaigns. At the same time, SWOs use Scientific Evidence to fight against FGM 3/12(33%) Said Yes, 4/12 (33%) said No, and 5/12 (34%) Revealed that they don't Know. 12/12 (100%) and 12/12 (100%) Said No to the Involvement of SWOs in Decision Making at Council Level. Previous Study Done on the Effectiveness of Prevention Measures on FGM The response was 12/12 (100%) said No previous Study done on the Effectiveness of Prevention Measures on FGM and SWO role in FGM being aware of the Community member was 10/12 (83%) Said Yes and 2/12(17%) Said No.

The findings in Table 4.6 show that SWOs make interventions through outreach campaigns and that the role of SWOs in the community for FGM is well-known. However, the challenge is that SWOs need to use scientific evidence to fight against FGM, but they are also not involved in decision-making at the council level. Moreover, no previous Study has been done on the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime, DC. Similarly, Ali et al. (2023) stated that SWOs Provide Various Services to at-risk individuals. The services provided include counseling, referrals, and resources to help people escape harmful practices. The provision and availability of effective prevention measures involve collaboration with various development partners to reduce FGM. This will provide and create an understanding of the Effectiveness of the Social Welfare Officer Toward Prevention Measures on FGM to fight against FGM in Tarime, DC.

**Table 4.7: Prevention measures listed to fight against FGM in Tarime DC.**

<b>Prevention Measure</b>	<b>Frequency</b>	<b>Percentage</b>
Th social welfare to be the Department under the Council	10	83%
Budget needed to be allocated to fight against FGM under the social welfare Unit	12	100%
Social welfare In charge needed to attend Council Management Team Meetings	12	100%
SWOS needed to make Research on FGM in relation to Prevention Measures	12	100%
Leders required not to make Confusion on Social Welfare and Community Development	9	75%

**Source:** Research Data (2024)

#### **4.7 Discussion on Effectiveness of the Effectiveness of Social Welfare Officer Toward Prevention Measures on FGM among Adolescent Girls**

Generally, the empirical literature reviewed provides strong evidence that the involvement of Social Welfare officers in Outreach Campaigns against Female Genital Mutilation among adolescent girls is essential for fostering awareness, engaging Communities, Providing Support Services, and advocating for policy changes (UNICEF,2022). Their unique position enables them to bridge gaps between healthcare providers and communities while promoting a holistic approach to ending FGM practice.

#### **4.8 Relevancy of Theory of Planned Behavior (TPB) to this Work**

Ajzen (1991) Argues that Behavioral intentions are determined by a combination of three factors: attitudes toward a behavior, subjective norms, and perceived behavioral Control. The TPB Assists in understanding how individuals' attitudes, subjective norms, and perceived behavioral Control Influence their Intention to perform FGM or avoid performing it in relation to the Study. Theory Views individuals,



Communities, and Adolescents themselves toward FGM Plays a Crucial role in shaping their decision-making. Subjective norms refer to the Social Pressures individuals perceive from others around them, and perceived behavioral Control refers to an individual's perception of how easy or difficult it is to avoid or resist FGM. In this context, assist in the Effectiveness of Prevention Measures on FGM among Adolescent girls in Tarime, DC.

Furthermore, Musa et al. (2021) explore how cultural beliefs, attitudes, and Perceived Social Norms Influence FGM Practices in Communities The study emphasizes the Prevention Measures that address these elements, such as outreach Campaigns and Community engagement in relation to TPB Principles, about Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent girls. WEOs can fight against FGM in the Community through interventions that challenge Harmful Cultural Practices in the communities in Tarime, DC.

On the same note, Kumari et al. (2023) highlighted the role of Perceived behavioral Control and Social Norms in influencing the acceptance or rejection of FGM in rural Communities. Their findings suggest that when adolescents and their families perceive they have Support in resisting FGM (Such as Legal Enforcement or access to alternative rites), they intend to reject the practice. The Effectiveness of Social Welfare officers towards Prevention Measures on FGM among adolescent girls is through addressing the behaviors that are against Human Rights and those that can result in Harmful practices for women and girls in Tarime, DC.

Generally, through the application of TPB, Researchers, Practitioners, and policymakers can design more effective Prevention Programs for FGM by focusing on shifting attitudes, changing Perceived norms, and Increasing adolescents' Control over their Decisions regarding the Practice. Thus, the Effectiveness of Prevention Measures on FGM in addressing the practice in Tarime, DC.

#### **4.9 Conclusion**

This Chapter Presented the Data Analysis and Discussed the Findings in relation to Research Questions. The next Chapter will Focus on the Summary, Conclusion and Recommendations.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

Chapter Five presented the details based on the summary, conclusion, and recommendations based on the Findings Presented in Chapter Four. The details indicated provide insight into various areas for further study.

#### **5.2 Summary**

The Purpose of the Study was to Examine the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls in Tarime District Council. The Following Objectives guided the study: To Assess the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls. To Explore the Role of Ward Executive Officer towards Prevention Measures on Female Genital Mutilation among Adolescent girls and To Examine the Effectiveness of Social Welfare officer towards Prevention Measures on Female Genital Mutilation among adolescent girls.

The literature reviewed in Chapter Two is based on the Effectiveness of Prevention Measures in the Fight against FGM among Adolescent girls. The literature reviewed in the Light Theory of Planned Behavior Change (TPB), propounded by Ajzen (1985), is a theory used to predict and understand behavior. It elaborates that behaviors are immediately determined by behavioral intentions and, under certain circumstances, perceived behavioral Control. According to Ajzen (1991), Behavioral

intentions are determined by a combination of three factors: attitudes toward a behavior, subjective norms, and perceived behavioral Control.

Furthermore, this Theory Facilitated the researcher to perform the following tasks: firstly, to identify attitudes that hinder the effectiveness of Prevention Measures used to fight against FGM in Tarime DC; Second, to Identify behaviors that impede the effectiveness of Prevention Measures from fighting against FGM and thirdly Controlling some of the Behaviors that hinder the effectiveness of Prevention Measures on FGM. This can assist Stakeholders in developing effective Interventions to fight against the practice. The practice of the Implication of TPB Theory during the study assisted in understanding motivations and barriers while designing effective interventions tailored to promote positive behavioral changes through various prevention measures on FGM.

The study employed simple random and purposive sampling methods to select respondents, and the sample size of 377 respondents was drawn from SWOs, WEOs, Adolescent girls, and Traditional leaders in Tarime, DC. Methods used to collect data were Questionnaires, Interview Guide Checklist, and Interview Checklist to collect Information. Once data is collected, analyzed, and interpreted, data described using frequencies, percentages, and averages. The obtained results were presented in frequency tables, figures, and graphs.

This Study was Perceived to be Significant as its Findings Could be Useful to the Government, Development Partners, and Tarime DC to Come up with a Solution

based on the Measures that can be employed to fight against FGM. The study will assist in Developing Policies, Guidelines, and Decision-Making for the benefit of Society members.

### **5.3 Conclusion**

The Examination of the Effectiveness of Prevention Measures on FGM among Adolescent girls has revealed significance. Based on the Study, various Outreach Campaigns, Facilitation of NPA-VAWC Committees, Arresting Mutilators, and Traditional Leaders that perform and Initiate FGM are needed. Not only that but also to facilitate Gender School Clubs and Strengthen GBV reporting System.

### **5.4 Recommendations**

After analyzing, Presenting, and based on the Data Findings of the Study and Conclusion Drawn above, the Study Recommends the following:

#### **5.4.1 Recommendations to the Government**

- i) The Study Findings Show that there are some weaknesses in Prevention Measures in the fight against FGM, as Adolescent girls are the ones who are affected and victims of the Practice. The Government should continue to put More Effort into Improving Prevention Measures through indicating the budget at Village and Ward level.
- ii) The Government was Required for the Social welfare in charge under Local Government Authority to attend Council Management Team meetings.

- iii) The Social Welfare Section, which is currently operating under the Division of Health, Social Welfare, and Nutrition, needs to become a Department under the Local Government Authority so that it can have its own budget for operation.
- iv) The Findings show how Mutilators are coming from Kenya to Tanzania and from Tanzania to Kenya to perform the Practice. To tackle this, cross-border meetings are required as a means of having joint efforts from Kenya and Tanzania in fighting against the Practice.

#### **5.4.2 Recommendations for Further Study**

The Study Identifies the Following areas for Further Studies:

- i) The Study Focuses on Examining the Effectiveness of Prevention Measures on Female Genital Mutilation Among Adolescent girls in Tanzania, taking Tarime DC as a case study. It could be inconvenient to generalize the findings to the other Councils across the Country as it is very large and Places differ in terms of culture, attitudes, Norms, and Beliefs. Thus, it would be useful if other studies were conducted in other Councils and Districts.
- ii) In addition to the above, little has been conducted in Tanzania, primarily through the use of Quantitative research techniques to seek information on the Effectiveness of Prevention Measures against FGM among Adolescent girls. Thus, more quantitative research is recommended for further studies.

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## APPENDIXES

### Appendix I: Questionnaire For Social Welfare Officers, Police Gende Desk Officials and Ward Executive Officers

#### Research Topic:

Examining the Effectiveness of Prevention Measures on Female Genital Mutilation  
Among Adolescent girls: A case of Tarime District Council

#### A: Introduction

I, SIWEMA ATIENO SYLVESTER, of Open University of Tanzania, I am conducting Research on Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls for Tarime District Council. I am kindly requesting you to provide information about the Research Topic. Do not write your name on this questionnaire and the Researcher will collect completed questionnaire. Promised you that, all information will be confidential, so be free to contribute whatever you have.

#### B: Demographic Information

Please put an appropriate answer by filling and ticking the correct answer

1. What is your gender?

Male ☐ Female ☐

2. Tick your Age

(i) 9-14 Years ☐ (ii) 15-17 years ☐ (iii) 18-24 Years ☐ (iv) 25-49 ☐  
(v) 51+ Years ☐

3. Tick Your Education Level

(i) Primary Education ☐ (ii) Ordinary Level Secondary Education ☐  
(iii) High Level Secondary Education ☐ (iv) Diploma and Above ☐

4. Tick Your Marital Status

(i) Married ☐ (ii) Single ☐ (iii) Widow ☐  
(iv) Widower ☐ (v) Separated ☐ (vi) divorced ☐

### C: Specific Questions

Please choose the item that you want and then tick it under the Option

QN	Effectiveness of Prevention Measures on FGM among Adolescent Girls	Option		
1	Prevention Measures are better to be used in fighting FGM among Adolescent Girls in Tarime DC	Yes	No	I Don't Know
2	There are various Programs to prevent Adolescent Girls on FGM	Yes	No	
3	safe House and Fit Families are well known to the community members	Yes	No	
4	There are Programs in schools to prevent Adolescent Girls on FGM	Yes	No	
5	Is it True that, you are aware on Women and Child Protection Committees?	Yes	No	

### Role of Ward Executive Officers towards Prevention Measures on FGM among Adolescent Girls

		Yes	No	I Don't Know
1	WEOs have Trained on measures to be taken to fight against FGM			
2	Women and Children Committees under NPA VAWC at Ward and Village level are useful to fight against FGM			
3	WEOs are making awareness to the community members on reporting abuse cases like the use of Child Help line (116).			
4	Laws to fight Against FGM are well known to the Community Members			
5	There is a budget allocated at Ward and Village level to fight against FGM			
<b>Effectiveness of Social Welfare Officer Prevention Measures on FGM</b>				
		Yes	No	I don't Know
1	Do you think Social welfare officers implement various outreach Campaigns to fight against FGM	1	2	3
2	Social welfare officers use Scientific Evidence Based To fight against FGM.			
3	Social welfare officers are attending various decision-making meetings at Council, Ward and Village levels.			
4	Ther is a previous study done to Examine Effectiveness of Prevention Measures on FGM	1	2	3
5	Social welfare official's role on FGM well known to the Community	1	2	3

5. Please List Prevention Measures that can Assist to fight against FGM in Tarime DC.

- i) .....
- ii) .....
- iii) .....
- iv) .....
- v) .....

Thank you for your cooperation

## **Appendix II: Interview Guide Checklist for Adolescent Girls**

### **Research Topic:**

Examining the Effectiveness of Prevention Measures on Female Genital Mutilation  
Among Adolescent girls: A case of Tarime District Council

### **A: Introduction**

I, SIWEMA ATIENO SYLVESTER, of Open University of Tanzania, I am conducting Research on Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls for Tarime District Council. I am kindly requesting you to provide information about the Research Topic. Do not write your name on this questionnaire and the Researcher will collect completed questionnaire. Promised you that, all information will be confidential, so be free to contribute whatever you have.

### **B: Demographic Information**

Pease put an appropriate answer by filling and ticking the correct answer

1. What is your gender?

Male ☐ Female ☐

2. Tick your Age

(i)9-14 Years ☐ (ii) 15-17years ☐ (iii) 18-24 Years ☐ (iv)25-49 ☐  
(v) 51+Years ☐

3. Tick Your Education Level

(i) Primary Education ☐ (ii) Ordinary Level Secondary Education ☐  
(iii) High Level Secondary Education ☐ (iv) Diploma and Above ☐

4. Tick Your Marital Status

(i) Married ☐ (ii)Single ☐ (iii)Widow ☐  
(iv) Widower ☐ (v)Separated ☐ (vi) divorced ☐

### SECTION C: Prevention Measures on Female Genital Mutilation among Adolescent Girls

Please choose the item that you want and then tick it.

S/N	Effectiveness of Prevention Measures on FGM among Adolescent Girls	Option		
		Yes	No	I don't Know
1	In your Opinion do you think Prevention Measures are better to be used in fighting among Adolescent Girls in Tarime Dc			
2	Is there Programs in schools to prevent Adolescent Girls on FGM			
3	Is it True that There are Health Interventions to fight against FGM			
4	Are you aware on Women and Child Protection Committees?			
5	safe House and Fit Families are Helpful for Survivors of FGM well known to the community members			
<b>Role of Ward Executive Officers towards Prevention Measures on FGM</b>				
	Laws to fight Against FGM are well known with Community Members	Yes	No	I don't Know
1	Is it true that Traditional leaders are the initiators of FGM? If True, what should be done to stop the practice of FGM..... ..... ..... ..... .....			
2	Child Help line 116 is well known to the Adolescent girls on reporting FGM Cases			
3	Adolescent Girls are able to report FGM issues to the Police Gender Desk, If Not in your opinion do you think what is the hindrance? ..... .....			
	To tackle the problem of FGM, Traditional leaders needed to be involved in various activities			
<b>Effectiveness of Social Welfare Officers towards Prevention Measures on FGM</b>				
S/N		Yes	No	I Don't Know
1	Social welfare officers implement various outreach programs to fight against FGM			

2	Social welfare officers use Scientific Evidence Based To fight against FGM.			
3	Social welfare officers are attending various decision-making meetings at Council, Ward and Village levels.			
4	There is a previous study done to examine effectiveness of prevention measures on FGM			
5	Social welfare official's role on FGM well known to the Community			

Do you have any opinion/suggestions base on outreach Campaigns to fight on FGM among adolescent girls YES/NO, if yes

.....

.....

.....

.....

Thank you for your cooperation



### **Appendix III: Interview Checklist for Traditional leaders**

#### **Research Topic:**

Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among adolescent girls: A case of Tarime District Council

#### **A: Introduction**

I, SIWEMA ATIENO SYLVESTER, of Open University of Tanzania, I am conducting research on Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent girls for Tarime District Council. I am kindly requesting you to provide information about the research topic. Do not write your name on this questionnaire and the researcher will collect the completed questionnaire promised you that, all information will be confidential, so be free to contribute whatever you have.

N.B.

During the interview, I will jot down some notes in my notebook and record our chat so that I may transcribe them for use in the data analysis process.

#### **B: Demographic Information**

Pease put an appropriate answer by filling and ticking the correct answer

1. What is your gender?

Male ☐ Female ☐

2. Tick your Age

(i)9-14 Years ☐ (ii) 15-17years ☐ (iii) 18-24 Years ☐ (iv)25-49 ☐  
(v) 51+Years ☐

3. Tick Your Education Level

(i) Primary Education ☐ (ii) Ordinary Level Secondary Education ☐  
(iii) High Level Secondary Education ☐ (iv) Diploma and Above ☐

4. Tick Your Marital Status

(i) Married ☐ (ii)Single ☐ (iii)Widow ☐  
(iv) Widower ☐ (v)Separated ☐ (vi) divorced ☐

**SECTION C: Prevention Measures on Female Genital Mutilation among Adolescent girls**

Please choose the item that you want and then tick it.

QN	Effectiveness of Prevention Measures on FGM among Adolescent Girls	Option		
		Yes	No	I don't Know
1	In your Opinion do you think Outreach Campaign is better to be used in fighting among Adolescent Girls in Tarime Dc			
2	Is there Programs in the Community to prevent Adolescent Girls on FGM			
3	Is it True that Traditional leaders take FGM as their source of income?			
4	Are you aware on Women and Child Protection Committees?			
5	In your Experience what make FGM to persist?			

QN	Role of Ward Executive Officers towards Prevention Measures on FGM	Yes	No	I don't know
1	Laws to fight Against FGM are well known with Community Members			
2	Is it true that Traditional leaders are the initiators of FGM? If True, what should be done to stop the practice of FGM..... .....			
3	Child Help line 116 is well known to the Adolescent girls on reporting FGM Cases			
4	Adolescent Girls are able to report FGM issues to the Police Gender Desk, If Not in your opinion do you think what is the hindrance? ..... .....			
5	To tackle the problem of FGM, Traditional leaders needed to be involved in various activities			

Effectiveness of Social Welfare Officers towards Prevention Measures on FGM				
1	Social welfare officers implement various outreach programs to fight against FGM	Yes	No	I don't know
2	Social welfare officers use Scientific Evidence Based To fight against FGM.			
3	Social welfare officers are attending various decision-making meetings at Council, Ward and Village levels.			

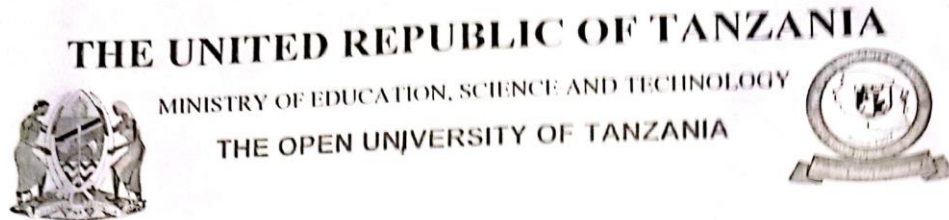
4	There is a previous study done to examine effectiveness of prevention measures on FGM			
5	Social welfare official's role on FGM well known to the Community			

Do you have any opinion/suggestions base on outreach Campaigns to fight on FGM among adolescent girls YES/NO, if yes

.....  
 .....  
 .....

Thank you for your cooperation

## Appendix IV: Ethical Documents



29<sup>th</sup> October, 2024

Ref. No OUT/PG202187162

District Executive Director (DED),

Tarime District Council,

P.O.Box 45,

MARA.

Dear Director,

**RE: RESEARCH CLEARANCE FOR MS. SIWEMA ATIENO SYLESTER, REG NO: PG202187162**

2. The Open University of Tanzania was established by an Act of Parliament No. 17 of 1992, which became operational on the 1<sup>st</sup> March 1993 by public notice No.55 in the official Gazette. The Act was however replaced by the Open University of Tanzania Charter of 2005, which became operational on 1<sup>st</sup> January 2007. In line with the Charter, the Open University of Tanzania mission is to generate and apply knowledge through research.

3. To facilitate and to simplify research process therefore, the act empowers the Vice Chancellor of the Open University of Tanzania to issue research clearance, on behalf of the Government of Tanzania and Tanzania Commission for Science and Technology, to both its staff and students who are doing research in Tanzania. With this brief background, the purpose of this letter is to introduce to you **Ms. Siwema Atieno Sylvester, Reg.No: PG202187162**, pursuing **Master of Social Work (MSW)**. We here

by grant this clearance to conduct a research titled "Examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls: A Case of Tarime District Council. She will collect her data at your office from 30<sup>th</sup> October to 30<sup>th</sup> November 2024.

4. In case you need any further information, kindly do not hesitate to contact the Deputy Vice Chancellor (Academic) of the Open University of Tanzania, P.O.Box 23409, Dar es Salaam. Tel: 022-2-2668820. We lastly thank you in advance for your assumed cooperation and facilitation of this research academic activity.

Yours sincerely,

**THE OPEN UNIVERSITY OF TANZANIA**



Prof. Gwahula Raphael Kimamala

For: **VICE CHANCELLOR**

JAMHURI YA MUUNGANO WA TANZANIA



OFISI YA RAIS  
TAWALA ZA MIKOA NA SERIKALI ZA MITAA  
HALMASHAURI YA WILAYA YA TARIME



Unapojibu tafadhali taja:

Kumb.Na HWT/T1/8/167

29.10.2024

Watendaji wa Kata wote,  
Halmashauri ya Wilaya,  
S. L. P 16,  
**TARIME.**

Kuh: KIBALI CHA KUFANYA UTAFITI

Tafadhali rejea mada tajwa hapo juu, pia rejea barua yenye Kumb. Na. OUT/PG202187162 ya tarehe 29 Oktoba, 2024 kuhusu kibali cha kufanya Utafiti Bi. SIWEMA ATIENO SYLVESTER kuhusu masuala ya "examining the Effectiveness of Prevention Measures on Female Genital Mutilation among Adolescent Girls: A Case of Tarime District Council"

2. Kwa barua hii, amaruhusiwa kufanya utafiti kama alivyoomba kuanzia tarehe 30 Oktoba, 2024 hadi tarehe 30 Novemba, 2024. Hivyo mnapaswa kumpa ushirikiano wa kutosha ili aweze kufanikisha utafiti wake.
3. Ninakutakia kazi njema.

  
Victoria A. Karengi  
Kny: MKURUGENZI MTENDAJI  
HALMASHAURI YA WILAYA  
**TARIME**

**MKURUGENZI MTENDAJI  
HALMASHAURI YA WILAYA  
YA TARIME**

Nakala:

1. Mkurugenzi Mtendaji (W) Tarime - Aione kwenye jalada
2. Makamu Mkuu wa Chuo,  
Chuo Kikuu Huria,  
S.L.P 23409,  
**DAR ES SALAAM.**
3. Bi. Siwema A. Sylvester

Halmashauri ya Wilaya ya Tarime, Kijiji Cha Nyamwaga, Barabara ya Nyamwaga, S.L.P 16, Tarime-Mara, Simu +25528-2690518, Nukushi: +25528-2690144, Barua pepe: [ded@tarimedc.go.tz](mailto:ded@tarimedc.go.tz), Tovuti: [www.tarimedc.go.tz](http://www.tarimedc.go.tz)

## Appendix V: Manuscript

### TO EXAMINE THE EFFECTIVENESS OF SOCIAL WELFARE OFFICERS TOWARDS PREVENTION MEASURES ON FEMALE GENITAL MUTILATION AMONG ADOLESCENT GIRLS: A CASE OF TARIME DISTRICT COUNCIL

**Siwema Atieno Sylvester<sup>1</sup>, Dr. Fauzia Mohamed<sup>2</sup> and Dr. Johnas Buhori<sup>2</sup>**

<sup>1</sup>*Corresponding Author: siwemasylvester@gmail.com*

<sup>2</sup>Lecturer: Department of Sociology and Social Work, Faculty of Arts and Social Sciences,  
The Open University of Tanzania

#### **Abstract**

*The Study examines the effectiveness of Social Welfare Officer Towards Prevention Measures of Female Genital Mutilation (FGM) among Adolescents girls in Tarime District Council, Tanzania. Despite various Prevention Measures employed to fight against FGM, Still the practice exists. Using a Mixed -Methods Approach, the research integrates Quantitative data from local Surveys with qualitative interviews to investigate the effectiveness of Social Welfare Officer towards Prevention Measures on FGM among Adolescent girls. quantitative data was analyzed using Descriptive with the aid of Scientific Package for Social Science (SPSS). The findings were presented in percentages, graphs, tables, and charts. The findings revealed that there is a need for social welfare Unit to be the Department whereas budget needed to be allocated for outreach Campaigns. A Sample of 12 Respondents Participated in the Study. The Study Concludes with Recommendations for targeted measures for the effectiveness of Social Welfare Officer towards Prevention Measures on FGM among Adolescent girls.*

**Keywords:** *Social Welfare Officer, Prevention Measures, Female Genital Mutilation, Adolescent girls, Tarime District Council*

#### **Introduction**

The Study Conducted in Tarime District Council located in Mara Region ,the study conducted from 30<sup>th</sup> October up to 30<sup>th</sup> November 2024. It has been selected because Firstly, it is among the Mara region Districts where FGM(TDHS–MIS,2022) Secondly, as the Council is boarded with Kenya, Cross Border Female Genital Mutilation (FGM) is taking place Thirdly, Once the girl is Mutilated in the Kurya Society, she is considered the real one, with no curse, and the one that can be married with a lot of Dowry. According to 2021 report from the Tanzania Human Rights Coalition (THRDC), Tarime District is one of the areas in which FGM is performed and with high rates of FGM Despite various prevention measures employed to fight against the Practice.

Mkumbo et al., (2018) conducted a study on the Implications of FGM on girls' education and psychological well-being in Tarime, Tanzania while This study was all about the Implications of FGM, while this study was about Examining the

Effectiveness of Social Welfare Officers (SWOs) Towards Prevention Measures on FGM among Adolescent girls in Tarime DC Generally, the study has revealed significance. Various Outreach Campaigns, Law Enforcement, Facilitation of Gender School Clubs and Strengthen of Gender Based Violence Reporting system is essential to fight against FGM. After analyzing and presenting according to the Data Findings, recommendations given to the Government and for the further studies.

### **Literature Review**

In Tarime-Tanzania, (SWOs) play a crucial role in ending FGM Through advocacy and various interventions. Currently, they Coordinate the Program under The National Plan of Action to End Violence against Women and Children II (NPA-VAWC II) 2024/2025-2025/2028. Though the government prohibits the practice of FGM under the Sexual Offences Special Provision Act 1998, FGM is still taking Place. The empirical literature reviewed provides strong evidence that the involvement of Social Welfare officers in Outreach Campaigns against Female Genital Mutilation among adolescent girls is essential for fostering awareness, engaging Communities, Providing Support Services, and advocating for policy changes.

### **Theoretical Review**

Theory of Planned Behavior (TPB) is a psychological theory that explains human behavior in specific contexts, It was developed by Ajzen in 1985. According to Ajzen (1991), Behavioral intentions are determined by a combination of three factors: attitudes toward a behavior, subjective norms, and perceived behavioral Control. The theory applied in the study assisted in Examining the Involvement of Social Welfare Officers in outreach Campaigns. SWOs contribute to Policy Development to eradicate FGM within their Jurisdictions. Thus, the Theory Facilitated the researcher to identify, attitudes that hinder the effectiveness of Prevention Measures used to fight against FGM in Tarime DC.

### **Method and Material**

The Study Adopted a Mixed-Methods Approach, Research that used for extensive Examining the Effectiveness of Social Welfare Officers Towards Prevention Measures on FGM among Adolescent girls in Tarime DC. The quantitative Approach employed for systematically investigation through focus on measuring and numerical Data analysis to identify patterns, relationships or trends, often through Surveys, experiments, or secondary Data Analysis m(Creswell,2018) The Study utilized Cross-Sectional Research design.

### **Study Area and Population**

According to McCombes,2021, the Study area is where the researcher aims to conduct the study. This study was conducted in the Tarime Dc, one among nine Mara Region-Tanzania councils in which FGM still taking place. According to Creswell, 2012 Population is a group of individuals with the same characteristics. In other words, it is specified under the aspect of the research design as based on the determinants of generalizability of findings to the larger group from which the sample drawn. Under the study, the targeted Population were Adolescent girls aged



10-19 who are 8,131 in the Wards of Sirari, Binagi, Nyarero, Nyamwaga, and Muriba in Tarime Dc (2024), According to Ward Education Officers. Their selection is because they are the ones who experience FGM. the sample size was calculated using the Table of Determining Sample Size, adopted from Krejcie and Morgan (1970).

### **Inclusive and Exclusive**

Selection criteria in Research are all about a specific group of people used to select Respondents or Samples that have specific characteristics or attributes used to select participants or samples that meet the requirements of a study or experiment (Jeovany et al., 2016). The study involved SWOs, PGDOs and WEOs. The study excluded individuals who are not respondents and who reside outside of the Tarime District Dc, lack knowledge or Experience related to Prevention Measures on FGM, or Express unwillingness to participate in the study.

### **Study Design**

Research Design refers to the plan or blueprint that guides the Systematic Collection, Analysis, and Interpretation of data to address specific research questions or objectives (Bloomfield & Fisher, 2019). The research design employed is Cross-sectional Design, in which Data is collected at one point.

### **Sampling Procedure**

Sampling Procedure is the act, Process, or Technique of selecting a Respondent or Representative part of the population to determine the population's parameters or characteristics (Verma, 2017). In other words, it is the Method used to select a Subset or Sample from a larger population. Sampling procedures under the study follow two approaches: probability and non-probability. Sampling is Essential under the study once assisted in studying an entire population due to Constraints such as time, Cost, and accessibility.

### **Data Collection**

Data collection is collecting information from all relevant sources to find answers to the research problem, test the hypothesis, and evaluate the outcomes (Kothari, 2014). This study employed a Questionnaire Method to collect Quantitative Data. Kobo toolbox Soft Ware used to collect data. The questionnaires captured data from the Target Sample based on the To Examine the Effectiveness of Social Welfare officers towards Prevention Measures on Female Genital Mutilation among adolescent girls.

### **Data Analysis and Presentation**

Data Analysis refers to Examining what has been collected in a survey and making reductions and inferences (Cohen,2007). The study Examined the Effectiveness of Social Welfare officers Towards Prevention Measures on FGM among adolescent girls In Tarime DC. Using the SPSS program, the researcher was able to determine the relationship between independent and dependent variables and present findings using tables, Pie Charts and graphs. SPSS Version 23 was used to analyze quantitative data under the study.

### **Finding Presentation**

The findings Shows the Effectiveness of the Social Welfare Officer Toward Prevention Measures for FGM among Adolescent girls. The variables mentioned in the effectiveness of social welfare officers include their interventions through outreach campaigns. At the same time, SWOs not use Scientific Evidence to fight against, and also SWOs are not involved in Meetings concerning decision making at Council level so this is a gap that need intervention.

### **Discussion**

Generally, the discussion synthesizes on the empirical literature reviewed provides strong evidence that the involvement of Social Welfare officers in Outreach Campaigns against Female Genital Mutilation among adolescent girls is essential for fostering awareness, engaging Communities, Providing Support Services, and advocating for policy changes (UNICEF,2022). Their unique position enables them to bridge gaps between healthcare providers and communities while promoting a holistic approach to ending FGM practice.

### **1Recommendation**

The Study Findings Show that there are some weaknesses in Prevention Measures in the fight against FGM, as Adolescent girls are the ones who are affected and victims of the Practice. First, The Government should continue to put More Effort into Improving Prevention Measures by getting opinions, suggestions, and Opinions from Community Members. Secondly The Government was Required to Enact the FGM Law and Review the Child Development Policy 2008. Thirdly The Social Welfare Section, which is currently operating under the Division of Health, Social Welfare, and Nutrition, needs to become a Department under the Local Government Authority so that it can have its own budget for operation.

### **Conclusion**

In Conclusion the Examination of the Effectiveness of Social Welfare Officers toward Prevention Measures on FGM among Adolescent girls in Tarime Dc has revealed significance. Based on the Study, various Outreach Campaigns, required.

### **Suggestion for Further Study**

- i) It would be useful if other studies will be conducted in other Councils and Districts.
- ii) More quantitative research is recommended for further studies.

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