



**Chuka University**

✉ info@chuka.ac.ke | ☎ 020 231 0512 / 020 231 0518

**CHANGING TRENDS IN MALE INITIATION RITE OF CIRCUMCISION AMONG THE AMERU OF IMENTI SOUTH SUBCOUNTY (1950-2016)**

*Isaac Kathio<sup>1</sup>, Dickson K. Nkonge<sup>2</sup> and Caroline M. Kithinji<sup>2</sup>*

<sup>1</sup>*P. O. Box 37-60202, Nkubu. Email: kathioisaac15@gmail.com*

<sup>2</sup>*Department of Humanities, Chuka University, P. O. Box 109-60400, Chuka, Email: [dnkonge@chuka.ac.ke](mailto:dnkonge@chuka.ac.ke)  
[cmucece@chuka.ac.ke](mailto:cmucece@chuka.ac.ke)*

**How to cite:**

Kathio, I., Nkonge, D. K., & Kithinji, C. M. (2021). Changing trends in male initiation rite of circumcision among the Ameru of Imenti South sub county (1950-2016). In: Isutsa, D. K. (Ed.) *Proceedings of the 7th International Research Conference held in Chuka University from 3rd to 4th December 2020, Chuka, Kenya*, p.455-465

**ABSTRACT**

Male initiation rite of circumcision has been a subject of discussion but the truth has been concealed because it was often presented as an unpenetratable topic by the Ameru because of the secrecy of the rite. The Bukusu, the Maasai, the Pokot, the Agikuyu and the Ameru have over the years carried out the rite traditionally. Changes in male initiation rite of circumcision from traditional to modern among the Ameru of Imenti South Sub County began way back before 1950s. The changing trend has left the Meru people of Imenti South Sub County in a dilemma on the ideal form of male initiation rite of circumcision. This study investigated the changing trends from traditional to modern in male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016. The objectives of the study were to examine the changes in male circumcision practices, to establish the causes of the changes and the effects arising from changes in male initiation rite of circumcision among the Ameru of Imenti South Sub County. The significance of this study is that it contributes to social historiography of the Ameru of Imenti South Sub County. The study covers the period between 1950 and 2016, the peak of colonial domination and the climax of changes respectively. Literature presented is on male initiation among the Ameru, changes in male initiation rite, causes of changes and effects arising from the changes. The study was guided by Modernization Theory in exploring avenues of transition of male initiation rite of circumcision from traditional to modern. Descriptive research design was used. The location of the study was Imenti South Sub County of Meru County. The target population was 61,091 from three divisions in the Sub County namely Nkuene, Abogeta and Igoji. Simple random sampling method was used in this study. Research instruments used were interview schedules, focus group discussions and observation. Data was collected from oral, secondary and archival sources. Data from oral sources was corroborated with data from archival and secondary sources to ensure validity and reliability of the study. Qualitative data was analyzed using descriptive narratives while quantitative data got was analyzed using descriptive statistics such as percentages and tables. Data got through observation was presented in pictorial form. This study established that changes in male circumcision can be traced from the time of colonialism. The major findings of this research were that traditional practice involved use of same knife on the initiates; the people were superstitious and that interaction between the indigenous people, colonialists and missionaries as early made the Ameru to embrace modern male circumcision. Changes were noted in the education offered, tools used, seclusion, commercialization of circumcision and method of circumcision. Changes were facilitated by urbanization, formal schooling, health facilities and colonization all of which were intended to Christianize the operations. The factors leading to change included Christianity, western formal education, individualism, high cost of living, health concerns, advocacy and urbanization. It was established that effects of changes included but not limited to social disorder, rivalry among groups, HIV protection and bad neighborliness. The study established drastic changes in male initiation rite of circumcision such as involvement of women and documentation of the process. The effects of changes are being dealt with by the government, the church and the civil society through advocacy and blending of traditional and modern aspects of male rite of circumcision. This study will bridge the knowledge gap on male initiation among the Ameru of Imenti South Sub County and provide empirical data that can be of use to other scholars carrying out related studies.

**Keywords:** Circumcision, Initiation rite, Change, Traditional, Modern

## **INTRODUCTION**

The word "circumcision" comes from two Latin words *circum* which means "around" and *caedere* meaning "to cut". Male circumcision is therefore the cutting around of the male genitalia. Among the Agikuyu, it is referred to as "irua" while the Ameru refer to it as "gutaanwa". The traditional process took several months from preparation, physical cut and recovery and after recovery. The rite therefore means more than the physical cut to remove some or the entire foreskin (prepuce) from the penis. Circumcision is one of the oldest and most widespread surgical operations in the world and is frequently carried out by traditional and modern medical providers. The extent of the cut and amount of flesh removed varies from community to community (Silverman, 2004). Male initiation rite of circumcision is much more likely to be performed among adolescents in many African societies (Warner and Strashin, 1981).

In many African societies, most circumcisions are done by traditional circumcisers and the initiation rite is mostly carried out for cultural reasons as a rite of passage into manhood. Several studies have explored the practice of male circumcision in Kenya with special interests on intergenerational shifts in the practice. A study by Rimita (1988) found that male circumcision as a form of initiation is deeply entrenched among the members of Meru community and strict adherence to myths and beliefs in the rite depicts social power and reputable status in the society. Kanake, (2007) however found out that most of the younger generation has no regard of the traditional practice as it is out dated and therefore prefer modern practices of the rite.

The Ameru community has over the years carried out detailed traditional cultural practices in relation to birth, naming, circumcision, marriage and death rites. According to Nyaga, (1997) these cultural rites have social and religious connotations that bind the community together. The rites according to Mbiti (1987) are key moments in the rhythm of individual and corporate group life because what happens to a single youth happens to the parents, relatives, neighbors and the living dead. This study was intended to establish the causes of changes in male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016.

African communities and especially the Ameru of Imenti South Sub County in Meru County have embraced modern hospital male initiation since early 1950's. According to Gray (2002), male rite of circumcision as a form of initiation among the Ameru is not only done for adulthood but also for socio-cultural issues and it is viewed as the yardstick for measuring maturity and responsibility. Njuguna (2016) states that anybody found misbehaving was ridiculed by the phrase, "akari ta mwiji" (he behaves like an uncircumcised boy). The Ameru of Imenti South Sub County have clung to this tradition for decades in order to retain the status quo. They ensure that before traditional circumcision a boy passes through organized associations or guilds for educational purposes where discipline, respect and integrity are instilled to ensure chastity of the boys (Rimita, 1988).

Christianity and western formal education brought different perceptions in the African cultural practices concerning male initiation rite of circumcision as early as 1912. According to (KNA/MRU/1937) the colonial administration resolved to encourage spread of Christianity and establishment of schools with the aim of modernizing communities so that they can leave their backward lifestyles. African communities including the Ameru of Imenti South started to embrace modern male initiation practices since early 1950's. The declaration of the state of emergency in 1952 for instance gave an opportunity to the missionaries to advocate against traditional practices which to them were draw backs to modernization. The concept of male rite of circumcision since then has been changing, though at a slow phase although the traditional practice has been seen as having a negative value on the people's culture.

The colonial government and the European missionaries called traditional male initiation rite primitive and saw the need of modernization and therefore urged people to stop the traditional way of life and adopt westernization. This view has continually been advocated by the Government of Kenya, the church and the civil society by urging people to perform male initiation rite of circumcision the modern way without much emphasis on traditional customs (Kanake, 2007). By 2000 this dynamism presented contrasting circumcision options with its apex being reached in 2016 as a result of widespread advocacy in the community and therefore the need for this study.

The effects of the trends of change in circumcision among the Ameru of Imenti South Sub County have been pronounced. There have been outright different perceptions on the practice between the conservative old people and the young, dynamic and educated members of the community. According to Timothy (2013) the former take traditional male initiation rite of circumcision as ideal while the latter embrace the modern male rite of circumcision hence the struggle for manifestation of social power between the two. Consequently, the modern type of circumcision is today done privately by medical doctors in clinical settings in some cases while other members of the community mix the two in order to make the initiation rite complete. An initiate may undergo the procedure in a modern medical setting but still participate in all other forms of the Ameru traditional circumcision rites.

The changes in male initiation rite of circumcision from traditional to modern among the Ameru of Imenti South Sub County are witnessed in the preparation for circumcision, the actual cut, seclusion and education offered. This has had effects in the social stratification in the community. The practice of traditional circumcision was believed to be in compliance to the social norms such as regulation of people's behavior in the society. Fadiman (1993) in his oral history from Mount Kenya posits strong sentiments about appropriateness or inappropriateness of circumcision in that being uncircumcised is an object of ridicule. This explains why male initiation rite of circumcision is a norm and a standard practice whether traditional or modern among the Ameru of Imenti South Sub County. The primary focus of this study was to look into the changing trends in male initiation rite of circumcision among the Ameru of Imenti South in Meru County between 1950 to 2016, when changes begun and when they became widespread.

Male initiation rite of circumcision is an important rite of passage among the Meru people of Kenya. It marks the transition from childhood to adulthood alongside offering informal education that inculcated values that included but not limited to discipline, responsibility and industriousness. The dynamism in male initiation rite of circumcision has presented a contrasting and confusing male circumcision option which has affected its traditional meaning. Changes in male initiation rite of circumcision among the Ameru of Imenti South Sub County have not been documented. This scenario necessitated this study which aimed at investigating the changing trends in male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016.

## **OBJECTIVES**

This study was guided by the following objectives:

- i. To examine the changes in male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016.
- ii. To establish the causes of changes from traditional to modern male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016
- iii. To establish the effects of the changes arising from male circumcision among the Ameru of Imenti South Sub County between 1950 and 2016.

## **METHODOLOGY**

The study employed descriptive research design. This design according to Mugenda and Mugenda (2003) is a process of collecting data in order to answer questions concerning the current status of the problem of the subject of study and that it determines and reports the study findings as they are. Kombo and Tromp (2006) concur with this and points out that the design enables description of the state of affairs as they exist. The design was used in this study to gather information from different people whereby the researcher collected, described, recorded, analyzed and reported changes, factors for change and subsequent effects in male initiation rite of circumcision by observing aspects of the practice and then search back for possible causal factors. The study also fitted within the provisions of descriptive research as noted by Kinoti (1998) that descriptive design permits participation of a large sample of respondents and promotes objectivity because the researcher has no control of information.

### **Target Population**

Imenti South Sub County according to the Kenya Bureau of Statistics has a total population of 126,268 of which 61,091 are men who formed the target population (GoK, 2010). The target population for the study was therefore 61,091 people. This is in line Mugenda and Mugenda (2003) who refer target population as the population with observable characteristics which the researcher wants to generalize the results of the study on.

### **Sampling Procedure and Sample Size**

According to Kombo and Tromp (2006), sampling is the act, process or technique of selecting a suitable sample or representative part of a population for the purpose of determining characteristics of the whole population. Kathuri and Pals (1993) agrees with this and states that if a sample is to provide adequate information to make judgments it should be a good representative of the population characteristics on which the judgments is to be based.

Kathuri and Pals (1993) suggests that in determining a sample size for a minor subgroup the sample size should be between 20-50 people. The population under study being a major sub group in Imenti South Sub County a total of 381 cases was interviewed. This study used simple random sampling procedure. This procedure was used because it provides an unbiased presentation of a group under study. In addition, selecting subjects at random from a larger population yields a sample that is representative of the group being studied.

## **RESULTS**

### **Respondents Information**

Information from respondents of different age categories were used in the study which provided different responses concerning the male initiation rite of circumcision among the Ameru of Imenti South Sub County. Ages 18-35 was useful in this study because they experienced the rite of circumcision when changes had already taken place and therefore informed the study. Ages 36-59 was useful to this study because they experienced male initiation rite of circumcision when traditional male circumcision was being cherished and at the same time modern rite of passage was taking root and therefore provided information based on their experience on the changes in the Meru male initiation rite of circumcision. Respondents in the age category of 60 years and above were used to provide accounts of the changing trends in the male initiation rite of circumcision having had experienced pre-colonial, post-colonial and the contemporary periods. A total of 381 respondents were sampled and were requested to state their age in years as illustrated in table 1.

**Table 1. Respondents' Age**

Age group	Frequency	Percentage (%)
18-35	126	33.1
36-59	160	41.9
60 and above	95	

Source: 1950-2016 Male Initiation Respondents

The study examined the religion of the respondents. Information on religion was meant to examine whether there were religious practices, customs and beliefs that caused changes in male initiation rite of circumcision in the area of study. The study revealed that the population under study was religious by the fact that all respondents had a faith to claim. Religious background of the respondents was found to enhance the practice of male circumcision. According to KNA/MRU (1937), the Christian missionaries did whatever was possible to Christianize male initiation rite of circumcision. Circumcision as a religious ritual therefore played a central role in the changing practices in the male initiation rite of circumcision among the Ameru of Imenti South Sub County. This is ascertained by Kanake (2007) in his "Transformation of the Traditional Circumcision Rite of Passage for Meru Boys in Kenya". Table 2 shows representation by religion of the respondents.

**Table 2. Respondents' Religion**

Religion	Frequency	Percentage (%)
Christianity	321	84.3
Islam	44	11.5
African Traditional Religion	16	4.2
Any other	0	0

Source: 1950-2016 Male Initiation Respondents

### **Changes in Male Initiation Rite of Circumcision among the Ameru of Imenti South Sub County between 1950 and 2016**

The study was periodized to help understand the changes in Male initiation rite of circumcision among the Ameru of Imenti South Sub County. The period between 1950 and 1963 is historically remarkable because the state of emergency was declared in 1952 by the governor Sir Evelyn Baring. According to (Fadiman, 1993) the missionaries took advantage of this to advance not only their religion and education but also the modern form of circumcision. The emergency led to suspension and suppression of African traditional practices such as public gatherings in which the Africans would meet, sing and dance as they enjoyed different festivities which included male initiation rite of circumcision. The study established that male initiation rite of circumcision was predominantly traditional because few individuals who had received western education feared to openly oppose traditional male initiation rite of circumcision due to their small number and ridicule they faced from the general public.

By the end of 1960s there was a negligible number of the Ameru in Imenti South Sub County who briskly embraced modern circumcision due to spread of Christianity which was enhanced by lifting of emergency laws and resumption of normal life among the community (DC/Meru/2). According to oral respondent Riungu (O.I, 2018) the lift led to general decrease in the intensity of traditional circumcision practices such as songs and night dances because they had been banned by the colonial masters. A study by Rimita (1988) found male circumcision deeply entrenched among the members of Meru community with existence of strict adherence to myths and beliefs in the society. Specified diet was designed for the initiates during seclusion. There was also high level of discipline and moral values such as honesty, unity, integrity and hard work that was upheld and inculcated into the initiates by the sponsors and also by junior warriors who frequently visited the seclusion hut. In addition, the initiates were given new names and were supposed from then on to live as responsible and honorable men as they prepared for the next stage in life as comrades in circumcision and in community life in general (Kiruki O. I, 2018). This changed after Kenya attained independence in 1963 because Kenyans had self-determination on their political, economic and social life devoid of any influence from the colonialists.

During the post-independence era between 1964 and 1978 Christianity attracted some following in Imenti South Sub County. The practice of modern male initiation rite of circumcision in spread more than the period between 1950 and 1963. Kithinji (O.I, 2018) one of the oral respondents asserted that changes included abandonment of the common ground (*Kigiri*) circumcision and bathing in the ice cold river.

Western formal education and Christianity gradually transformed the Ameru of Imenti South Sub County and rid them off their “savage and primitive” behavior by the 1970’s. It was also established that traditionalists subjected the modern male circumcision adherents to open ridicule by calling them “iroge” meaning people circumcised in hospital under pain relieving medication (Mputhia O I, 2018). This was a strategy devised to discourage the practice of modern male initiation rite of circumcision and ended creating social stigma, enmity and bad neighborliness but it did not deter the spread of modern circumcision according to Timothy (2013).

Between 1979 and 2000 individuals who had received western education were now openly opposed to traditional male initiation and ensured initiation rite of circumcision was carried out in either hospital or at home (Mwiti, O I, 2018). It was established that individuals arranged for circumcision of their sons and took them to the hospitals for modern circumcision and admission. Oral respondents, Micheni, Mung’atia and Mutwiri (2018) stated that non- Christians found it difficult to continue with the obsolete traditional male initiation practices making modern male rite of circumcision to gain popularity. A drastic change in the rite was effected in the 1980’s with the rise into power by the retired President Daniel Arap Moi when he outlawed female circumcision and directed that boys be circumcised strictly after completion of Primary Education due rise in indiscipline cases such as drop out and absenteeism in schools according to (Kimathi & Mutwiri O I, 2018).

Boys were no longer circumcised just for preparation for adulthood and social status but as a preparation to join secondary school and for health considerations especially with the discovery of HIV/Aids in the 1980’s according to Warner and Strashin (1981). This period was also marked by change from the use of one knife for all thus bringing to an end the “one knife, one field” tradition to the era of one blade for each candidate. In addition, the concept of togetherness that was embraced traditionally according to Kanake (2007), Rimita (1988) and Mbiti (1987) became meaningless. An oral respondent, Mung’atia (2018) differed with Nyaga (1997) on corporal punishment (*Kianga*) designed as form of discipline as it was no longer applicable because it was considered a criminal offence of taking law into one’s hands. This was a clear indication that male initiation rite of circumcision among the Ameru of Imenti South Sub County was changing at a high rate.

With the new millennium traditional communal beliefs and cultural practices proved to be hindrances to meaningful social, economic and political development (KNA/MRU, 1930). For instance, traditional circumcision lost popularity not only because of the unhygienic environment and tools used in circumcision but also because it was becoming an outdated practice. According to Nkubitu (2018), modern practitioners acquired and used local traditional circumcision techniques and carried out traditional form of male circumcision in a hygienic and safer manner. In addition, it was the preserve of the initiates and their parents to choose the type of rite to undergo.

Advocacy by churches, social media and the government intensified the importance of boys undergoing circumcision the modern way. This lessened negative perception of modern male circumcision such that traditional circumcisers lost their honoured position and the few who underwent traditional circumcision were stigmatized. Stephens (2008) agrees that modernization is historically an avenue of cultural change and social progress.

Male initiation rite of circumcision was highly publicized during this period through the electronic media, bill boards and in the churches (Kiathi, Mwija and Mung’atia, O I, 2018). With the dynamism in the society, modern circumcisers were seen to perform male rite of circumcision as desired by either the parent or the initiate and that circumcision was done during the time and place dictated by the parents or guardian of the candidate. A significant change in the practice in 2016 is the aspect of detailed documentation and formalization of male initiation rite of circumcision. There was found to be proper record keeping with all details of the candidate and the parent or guardian (Mputhia, O I, 2018). This was a sign of professionalism that was meant to build confidence on the part of those seeking such services. Figure 1 shows a sample enrolment form.

**Figure 1: Initiate's Enrolment / Application Form 2016**  
**MCK NKUBU CIRCUIT**

INITIATE'S ENROLMENT / APPLICATION FORM 2016

Name of initiate (Candidate) .....  
 Age.....  
 Religion .....  
 Name of Parent /Guardian .....Tel No .....  
 Sub County..... Division..... Location..... Sub Location.....  
 Relationship with the initiate.....

**1. MEDICAL BACKGROUND**

i) Has the candidate suffered any of the following ailments? Please tick appropriately

- |  |     |    |
|--|-----|----|
| a. Heart complication                                  | Yes | No |
| b. Anemia  | Yes | No |
| c. TB  | Yes | No |
| d. Hepatitis B   | Yes | No |
| e. Asthma  | Yes | No |
| f. Diabetes  | Yes | No |
| g. Does the candidate suffer from any allergy? Yes/ No |     |    |

If Yes, specify .....

ii) Is there certain food stuff that the candidate does not eat? Yes / No

If yes specify the medical diet (special food) .....

**2. PERSONAL EFFECTS**

The candidate is expected to come with the following personal effects

- i) Dettol soap
- ii) Towel
- iii) Lesso/ Kikoi
- iv) Basin
- v) Pair of slippers
- vi) Toothbrush and tooth paste
- vii) Vaseline
- viii) Exercise book and ball pen

Initiate's Signature .....

Parent/ Guardian's signature .....

Source: MCK Nkubu Circuit Office.

A peculiar development in male initiation rite of circumcision in 2016 is the involvement of women especially mothers in matters of male circumcision as a result of single parenthood, urbanization, absent fathers and western influence such as Christianity and education (Njeru, O I, 2018). In addition, individualism, modernization, high cost of living and job demands have made the Ameru of Imenti South Sub County to adopt western lifestyle concerning male circumcision. Most of the contemporary parents are enlightened and demand value for their money.

The period of seclusion according to majority of the oral respondents is between two to three weeks for those in the camps and hospitals and up to one month for those confined in their respective homes. The initiates are given instructions on personal hygiene and morality by the caretakers who are also educated. The initiates are also given medical checkup at least twice while in the camps. Little or no traditional education is transmitted to the initiates (Mutwiri & Mwiti, O I, 2018). The study established existence of certification in the modern male initiation rite of circumcision. Figure 2 shows a sample certificate of initiation into adulthood.



**Figure 2: Sample Certificate of Circumcision**

Source: MCK Nkubu Circuit Office.

### **Causes of Changes in Male Initiation Rite of Circumcision among the Ameru of Imenti South Sub County between 1950 AND 2016**

#### ***Safety and Hygiene***

According to Bailey and Egesah (2006), horrifying stories about life threatening outcomes of traditional male circumcision make headlines in various countries every year. The study established that the one of the reason for the change from traditional to modern male initiation rite of circumcision was safety and hygiene of the procedure. Professionalism in the surgical procedure in hospital or modern male initiation rite of circumcision is associated with modern medicine ensure safety of initiates. The study established preference of modern rite of circumcision because there is certainty of safety of initiates given that the instruments used are sterilized and therefore hygienic (Nkubitu & Riungu, O I, 2018). In addition, Mwit (O I, 2018) states that education and formalized counseling offered is in modern male rite of circumcision enhance mental health unlike the traditional male circumcision and acts as a way of curbing drug and substance abuse.



### ***Religion***

The study established that the Ameru of Imenti South Sub County were very religious and prayers were said at every stage in life, including male initiation rite of circumcision. Fadiman (1993) quotes some words used by Christian converts that “*now we are people of light and we don't like darkness*” which indicate the extent Christianity has on male rite of circumcision. The missionaries often referred to African practices as ‘heathen and anti-God’ and therefore encouraged people to seek western medication and male circumcision instead of traditional systems that were often influenced by magic. The missionaries’ best way to deal with traditional African practices was therefore to Christianize male circumcision. Christian converts were used by missionaries as agents of change in their villages as they sought for the best method of impinging modern progress into the ‘primitive’ society. This according to Fadiman (2012) and Kanake (2007) became the genesis of changes in male initiation rite of circumcision. Because of these calculated moves, missionary influence made Africans to modernize

### ***Education***

Kanake (2007) states that right from the colonial period schools and churches were built in the same pieces of land. According to (KNA/MRU/1937) the colonial administration resolved to encourage spread of Christianity and establishment of schools with the aim of modernizing communities so that they can leave their backward lifestyles. The mission educated elite’ complied silently to colonial conquest and expansion because they embraced Christianity and civilization (Kang’ara & Mutwiri, O I, 2018). According to Rostow (1967) and Huntington (1968) affirms relevance of modernization theory by the fact every ‘backward’ society must go through the dynamics that come with long periods of association between ‘natives’ and representatives of ‘superior culture’ as is evident in education as the reason why some parents prefer having their children circumcised even before adolescence.

### ***Advocacy and Urbanization***

Advocacy by the government and church through seminars and sensitization of public made people to discard retrogressive traditional rites they have embraced for a long time (Mwiti, O I, 2018). Although some people in Imenti South Sub County were alienated in their tribal past and desired to retain the status quo in the community according to KNA/MRU (1937) and KNA/MRU (1939). The study established that from the colonial time the government has always used its civil servants and mission centers to influence Africans who were the minority and separated them by a psychological gap from the primitive and illiterate tribesmen (KNA/MRU/1956). Changes in male initiation rite of circumcision was realized through Africans who started to live in towns and cities because the rural people were changed through the influence of the urbanites among them (Kimathi and Mwiti, O I, 2018).

The county government of Meru since 2013 has enhanced inclusion of sustainable culturally accepted initiation practices that support modern health initiatives. Moreover, several dispensaries have been established in the rural areas to ensure accessibility of modern medical services to the general public (Gitonga, O I, 2018). Changes were therefore eminent with the advent of missionaries and the subsequent activities of colonial administration because the association of the Ameru with a superior race resulted to dynamism in aspects of life

## **Effects of Changes in the Male Initiation Rite of Circumcision among the AMERU OF Imenti South Sub County between 1950 AND 2016**

### ***Level of Discipline***

All the age categories (100%) of the respondents insinuated that change in the rite from ritualistic point of view has adversely affected the Ameru of South Sub County. For instance, 306 (80.3%) of the respondents said that the high level of discipline that existed traditionally has gone out of hand. Oral respondents, Mugambi and Riungu (2018) asserted that changes in male initiation rite of circumcision have precipitated effects such as drug abuse, stigma and misunderstanding. Mbiti (1987) asserts that bonding, discipline and informal education carried out during seclusion in traditional male initiation rite of circumcision inculcated values and high levels of morality in the society. According to Kanake (2007) this practice is almost nonexistence today traditional mechanisms of instilling discipline in initiates such as revealing the misdeeds (*Kuuga mithega*) and severe beating (*Kianga*) for those who contravened any laid down standard are no longer in place. The changes in male initiation rite of circumcision in this regard has adversely affected discipline levels and lowered morality in society.

### ***Reduced Sexual Sensation***

A small number, 125 (32.8%) of the respondents in the three age categories in the study differed with Warner and Strashin (1981) that changes in male initiation rite of circumcision has variable and inconsistent effects such as reduction of sexual sensation and maintenance of erection. In regard to sexual sensation and maintenance of erection

respondents in respective age brackets reported that exposure of the glans makes the penis more sensitive and arousal is therefore high. A few of the respondents were reluctant to divulge any information on sexual matters. The study made a conclusion similar to that by Niang (2006) and refuted the claim that exposure of the glans through circumcision lead to desensitization of the glans.

### ***Social Disorder***

Majority of the respondents represented asserted that a major effect of the changes is misunderstanding that lead to bad neighborliness which becomes extreme during the initiation period in the month of December. According to KNA/MRU/1937 and KNA/MRU/ 1939 those alienated in their tribal past struggle to retain status quo which Mwiti (2018), an oral respondent asserts has led to peer pressure and misunderstanding as traditional and modern circumcised individuals challenge one another that may at times lead to physical confrontations in the course of creation of a new cultural forms that modernize a society.

### ***Surgical Complications***

The study also revealed possible common complications of modern circumcision that includes but not limited to damage to urethra. A study by Gollaher (1994) revealed that there may be incidences of botched circumcision. Majority of the respondents were however in agreement that professionalism has reduced such occurrences hence no fear of unprecedented deep cutting or delayed wound healing which would otherwise pose danger to life. It was concluded that changes in male initiation rite of circumcision has a positive effect on the people of Imenti South Sub County in relation to the safety of male circumcision.

### ***Economic Implications***

A study by Mbachi & Likoko (2013) on the social economic implications of traditional male circumcision practices among the Bukusu of western Kenya proved very expensive. This study established that ceremonies during traditional male initiation rite of circumcision were elaborate and therefore took up so much time and community's economic activities almost came to a standstill. Although some respondents declined from giving the economic implication of male initiation rite of circumcision, they consented that male initiation rite among the Ameru of Imenti South Sub County are economically expensive especially because of feeding the initiates and visitors during the initiation period.

### ***HIV/Aids Protection***

The study also sought to establish the protective effects of male circumcision on HIV/Aids. A study by Brown et al (2001) indicated that male initiation rite of circumcision has a close correlation between areas of higher prevalence of HIV/Aids and lower prevalence of male circumcision. Majority of the respondents in the study alluded that even those who practice traditional male circumcision today adopt modern health considerations such as use of one blade for one initiates because of the advocacy in health matters in the society. A conclusion was made that modern practices in male circumcision improves protection against HIV infection. The respondents were in agreement with the WHO/UNAIDS (2007) on the health benefits that circumcision reduces chances of male infection of HIV/Aids.

### ***Training of Practitioners***

A profound effect of the changes in male initiation rite of circumcision ascertained by the study is on the training of modern male circumcision practitioners. According to WHO, (2016) modern health concerns link male circumcision to other sexual and productive health services and can therefore be carried out by either gender in the medical field. This according to the study degraded and undermined the men circumcised the modern way for they are ridiculed as having been circumcised by women contrary to the Ameru tradition. The effect of this is that men are reluctant to receive treatment from females in medical facilities. This is confirmed by a joint research report on male circumcision under local anesthesia by World Health Organization, USAID and UNAIDS (2016) that shows that adult males seeking circumcision are reluctant to undergo physical examination and circumcision by a female provider.

### **Addressing the Effects of Changing Trends in Male Initiation Rite of Circumcision.**

To address the effects of the changes the community needs proper dissemination of knowledge to educate the populace on the advantages of modern male rite of circumcision to ensure peaceful co-existence among the people. This will according to KNA/MRU (1956) bridge the psychological gap and enable people to accommodate the changes and therefore liberate those who still embrace traditional male initiation rite of circumcision as ideal.

A major land mark in addressing the effects of changes in male initiation rite of circumcision is creation of synergy between the traditional and modern practices of the rite. For instance, a colonial medical officer of health suggested ages 6-10 as suitable for circumcision while traditionalists were in support of late adolescent (KNA/MRU/1956). Kanake (2007) suggests that performing the rite after standard eight graduation before joining secondary education is the routine in the society today.

## CONCLUSION

Based on the findings of the study, it can be concluded that male initiation rite of circumcision is highly cherished and remains a very important ritual among the Ameru of Imenti South Sub County. This is alluded by Fadiman (1993) in his assertion that some communities are entrenched in their customs. The study established that changes have taken place in male initiation rite of circumcision among the Ameru of Imenti South Sub County between 1950 and 2016. The modern practice has been encouraged by formal education, Christianity and other modern life styles as opposed to traditional circumcision that was purely based on the culture of the people.

Traditional male initiation rite of circumcision has dwindled with time and modern male initiation is encouraged because of cleanliness and professionalism of the procedure. Similarly, the study concedes with the church and governments advocacy to build synergies by blending aspects of traditional and modern male initiation rite of circumcision in camps as well as homes. This indicates the relevance of MT because modernity in male initiation rite of circumcision in Imenti South Sub County is a result of dynamism necessitated by colonialism, Christianity, western education and urbanization.

The effects that come with the changes in male initiation rite of circumcision include social stratification, drug abuse, dropping from school, bad neighborliness, breakdown of norms and truancy have been addressed in different ways such as advocacy where people are sensitized on the benefits of modern circumcision. From the changing trends witnessed in male initiation rite of circumcision, the Ameru of Imenti South Sub County are slowly and willingly giving up traditional male initiation rite of circumcision in favor of modern male circumcision. In relation to oral, archival and secondary sources, the researcher has the conclusion that male initiation rite of circumcision the Ameru of Imenti South Sub County was like a social-military award of achievement to an outstanding individual.

## REFERENCES

- Bailey, R.C, et al (2002). The Acceptability of Male Circumcision to Reduce HIV Infections in Nyanza Province, Kenya. *AIDS CARE* 14 (1): 27-40
- Bailey, R.C. and Egesah, O. (2006). Assessment of Clinical and Traditional Male Circumcision Services in Bungoma District, Kenya: Complication Rates and Operational Needs. Retrieve <http://www.aidsmark.org/resources/pdfs/mc.pdf>; 15 August 2007.
- Brown J.E et al (2001). Varieties of Male Circumcision: A Study from Kenya: Sexually Transmitted Diseases 2001(28), 608-612.
- Fadiman, J.A (1993) *When we Began, There Were Witch Men: An Oral History from Mount Kenya*. Berkeley: University of California Press.
- Gitonga, J (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.
- GoK (2009) Kenya National Bureau of Statistics. 2009 Population Census. Population Distribution by Age Sex and Administrative Units. August 2010.
- Gollaher, D.L (1994) "From ritual to Science: The Medical Transformation of Circumcision in America". *Journal of Social History*, 28(1):5-36
- Kanake, J.M (2007) Transformation of the Traditional Circumcision Rite of Passage for Meru Boys in Kenya: A Critical Response to HIV/AIDS and Gang Formation. Dissertation. Asbury
- Kang'aara, E & Mutwiri, E (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.
- Kathuri, N.J and Pals, D (1993) *An Introduction to Educational Research*. Njoro. Egerton University. Kiathi, J, Mwija, O & Mung'atia, F (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.

- Kimathi J and Mwiti, J (2018) Interview by the author on 9<sup>th</sup> February at Mikumbune.
- Kinoti, H. W. (1998). A Hand Book of Social Research Methods. Nairobi. The National Council of Churches Press. Kombo, D.K. and Tromp, D.L.A. (2006) Proposal and Thesis Writing. Paulines Publications Africa.
- Mbachi, F & Likoko, S (2013) Traditional Male Circumcision and its Implications on Socio-Economic and Psychosocial Life of the Bukusu Community in Kenya. [www.iiste.org](http://www.iiste.org). Vol.3, No.1, 2013.
- Mbiti, J.S (1987) African Religions and Philosophy. Nairobi. Heinemann Educational Books Ltd. Mputhia, E (2018) Interview by the author on 11<sup>th</sup> February at Nkubu.
- Mungatia, F (2018) Interview by the author on 11<sup>th</sup> February at Nkubu.
- Mugambi, M & Riungu, F (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.
- Mugenda, O. M. & Mugenda, A. G. (2003). Research Methods. Quantitative and Qualitative Approaches. Nairobi. Act Press
- Mwiti, J (2018) Interview by the author on 13<sup>th</sup> April at Kathera.
- Niang, C.I. (2006). Strategies and Approaches for Male Circumcision Programming. Geneva: World Health Organization
- Njeru, K (2018) Interview by the author on 11<sup>th</sup> February at Nkubu.
- Njuguna, G et al (2016) The Indigenous Knowledge of the Amiiru of Kenya. Nairobi. University of Nairobi Press.
- Nkubitu, I (2018) Interview by the author on 13<sup>th</sup> April at Nkubu.
- Nkubitu, I and Riungu, F (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.
- Nyaga, D (1997) Customs and Traditions of the Ameru. Nairobi. East African Educational Publishers Ltd.
- Rimita, M. D. (1988). The Njuri-Ncheke of Meru. Nairobi. Koble Press.
- Riungu, F (2018) Interview by the author on 9<sup>th</sup> February at Nkubu.
- Silverman, E.K. (2004). Anthropology and Circumcision. Annual Review of Anthropology.
- Timothy, H.N (2013). Socio-cultural Conflicts arising from the Male Rite of Circumcision in Meru Community 2007-2012: A case of Nkuene Division. (Unpublished MA Thesis), Kenyatta University. Nairobi.
- Warner, E and E. Strashin. (1982). Benefits and Risks of Circumcision. CMA Journal 125 (9) 967-976, 992
- WHO/UNAIDS (2007). Joint press release between WHO / UNAIDS issued on 28 March: WHO and UNAIDS Recommendations from Expert Consultation on Male Circumcision and Prevention <http://www.who.int/mediacentre/new/releases/2007/pr10/en/index.html>: 10 Sept 2007.
- KNA/MRU/1937.Meru District Annual Report.
- KNA/MRU/ McKeag, V.M (1939) Meru District Annual Report. DC/Meru/2 Religious Order Methodist Church in Kenya 1940-1962
- KNA/DC/MRU/ Cumber, J.A (1956) Meru District Annual Report. KNA/DC/MRU/
- Cumber, J.A (1957) Meru District Annual Report.
- \*\*\*\*\*

