

Congregation of Our Lady of Charity of the Good Shepherd

**Individual Report**

To the Resolution 35/16 of the HRC

**On child, early and forced marriage**

**With a focus on humanitarian settings**

**At its 41st session**

**June 2019**

**(Can be posted on the website)**

**Kenya**

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**Report Tool**: Questionnaires to the project managers of the NGO ministries in Kangeta[[1]](#endnote-1) were used to obtain disaggregated data on the issues they are responding to.[[2]](#endnote-2)

**Prologue:** The congregation of Our Lady of Charity of the Good Shepherd works in 73 countries in five continents. The NGO has ECOSOC status since 1996. We are guided by our position papers: migration, economic justice, girl child trafficking, prostitution and integral Ecology with a focus on the dignity of every girl, woman and child. We therefore advocate to change policies that exclude and systems that dehumanize.

1. P**opulation**

In this report[[3]](#endnote-3), we refer to 2243 persons in five of our projects: sponsorship programs with 500 children, adult literacy program with 89 women, day care centre with 96 children and three schools with 1558 pupils as shown in Appendix No. IV[[4]](#endnote-4).

The demographic illustrates Ntuti primary school as the largest population accessing nutritional and psychosocial services with 46 % boys and 54 % girls. Rikiau 51 % boys and 49 % girls and Kandubai 54 % boys and 46% girls subsequently. Last year alone witnessed 47 girls drop from the 3 schools of 772 girls served. This is 6 % of the 49 % girls served compared to 51 % boys in the schools. Members from our Organization in collaboration with childrens officers, teachers, staff and collaborators visited, rescued, counselled, re-integrated and re-enrolled 15 girls in schools from forced and early marriages. They referred some to children offices for legal actions.

The question of stigma and bullying cannot be underrated since the girls were subjected to early and forced marriages and often into polygamy where husbands are well advanced in age. Others are, as a result of early pregnancies which degrades their identity, unable to re-enrol in the previous school.

**2. Data gathering and dissemination**

The managers collaborate with partners, staff, community leaders, teachers, and social workers to conduct family visits, meet the girls and families to gather disaggregated data and document the contextual analysis of the social factors contributing to child, early, and forced marriage (CEFM) in Kangeta. They hold ongoing sessions and meetings with community leaders, and teachers of the specific schools who provide information.

The social factors leading to CEFM are as demonstrated; extreme poverty, high illiteracy, insecurity *(parents are sometimes killed by bandits from neighbouring agricultural[[5]](#endnote-5) counties of Isiolo, Samburu, Somali and Boran who fight for grazing fields).* Chronic sicknesses such as cancer, HIV and Aids resulting in the death of parents which subjects children to orphanhood and vulnerability.

Drug and substances abuse mainly miraa, a local brew alcohol; girls are subjected to sell traditional brew to drunkards in families who brew. This exposes them to men who sexually assault them and some end up being betrothed to these old men for little or no dowry.

Lack of food; girls are subjected to negligence, forced child casual labour as parents leave for livelihood in distance places. As some end up as car washers and miraa harvesters no wonder records illustrate less girls compared to boys in 2 schools. This vulnerability forces girls out of school to earn money for the family at tender age.

FGM; harmful cultural practice (*rite of passage to woman hood*), the girls are immediately betrothed often into polygamy. In such contexts, girls *(pre-mature wives)* are illtreated by co-wives; remain illiterate in respect to marital and family laws; lack of knowhow of their right to education and do not educate their children.

Dysfunctional families, polygamy/series of divorce where the responsibility of parenting is left under custody of wives who in most cases is housewives. Some under undergo vigorous land objections[[6]](#endnote-6) when death of spouse occurs.

High birth rate; the average birth rate is 10 children, exposes families to chronic poverty. Overwhelming parental responsibilities; some parents dispose of a girl child with little or no dowry as early as 15 years or below after undergoing FGM.

**3. Specific challenges in prevention of CEFM in Kangeta**

* Patriarchal society; men control families. More often there is lack of consensus of number of children to bear in a single couple.
* High consumption of miraa which is stimulant; 85 % adults consume miraa; minimal dialogue on family upbringing, some men spend more time in miraa farms leaving the family responsibility to wives.
* Gender inequality; women and girls are traditionally viewed as properties. They are sexually assaulted by men leading to unplanned pregnancy hence high birth rates and to female genital mutilation.
* Chronic poverty leaves girls fragile; they loiter in search for food and walk long distance for water, this exacerbate vulnerability to CEFM to abusers.
* The government has not effectively implemented the Preventive Sexual Exploitation and Abuse (PSEA) child policies in respect to child rights.
* Perpetrators are not reported in fear of patriarchal abusers who may be in authority.

**4. Overcoming the gaps**

* Urgently provide civil education, documentaries and frequent awareness grassroot campaigns to the schools, churches and entire community, in “Barazas” (*Administrative gatherings by local state administrators- Chiefs)* on the rights of children, dangers of FGM and CEFM.
* Network with provincial administrators, religious leaders, and NGOs and social media in these campaigns to amplify the extent of these atrocities for legal action.
* Penalizing perpetrators of FGM and CEFM.
* Develop efficient-child friendly referral systems between serving providers and the public to report identified cases.
* To provide borderline lasting solutions to Kangeta ward and the entire Meru county.

**5. Lessons learned and promising practices identified in prevention of CEFM**

* High rate of illiteracy has been significantly reduced by managers of the day care program (4-13 years) of unschooled children. Due to harsh conditions in the families, other children from Kangeta flock to the centre for food, as they are fed while they are in attendance. They have a formal education and register for the Kenyan primary education certificate.
* The government has provided some teachers to the centre where children can have a formal education in preparation for exams. It also provides food, cooking oil, milk, support the children to continue with the education in the centre. The organization provides medication for the children through St. Joseph Dispensary and refers severe cases to Maua General Hospital.
* Sponsorship program for 500 children in various primary and secondary schools; children undergo moral formation on behaviour change, child rights and transition from childhood to adulthood. This is done in collaboration with Chalice Canada.[[7]](#endnote-7)
* The children undergo developmental stages sessions in place of FGM; it is translated into rite of passage and sensitization on dangers which cause physical ailments such as obstetric fistula and sexual transmitted infections (STI) among others. *(Failure to undergo this subject’s individual girls into rejection by peers).* A previous report to CEDAW[[8]](#endnote-8) on fistula and its attributing factors illustrates 10 % patients treated as a result of FGM and 12 % attributed to early and child pregnancies in Meru and other pastoralist communities 10 %
* Planned 7-day workshop, December 2018, funded by Chalice Canada on children rights and protection subject to funding from funds from Chalice.
* Progressive empowerment life- skills to 19 faith circles group 530 and girls.
* Ongoing group formation for mentors in schools, day care and other programs on FGM.
* High rate of domestic violence; women are physically and psychologically assaulted, and children are defiled yet remain unreported to authority for discipline measures due to threats by male; the organization conducts family rights sessions for women and children in the projects.

**5. Exacerbating factors impacting CEFM**

School drop-out: 47 more patients from obstetric fistula treated in Jamaa Hospital, and other hospitals. In a study on Fistula 2017, Meru recorded 10 % patients treated from obstetric fistula due to FGM and forced and early marriages as their bodies had not fully developed in preparation for motherhood. Others are low self-esteem and chronic poverty where unschooled parents fail to educate children.

**6. Measures adopted to address the root causes and exacerbating factors**

* Gradual implementation of child protection policies by children officers for few reported cases. They forward to court for legal action
* Network between government, our staff and community leaders to address reported cases to seek justice
* Follow-ups on defilements in hospitals to help survivors attain justice
* Documentation by children officers, police and the members of our NGO for follow-up and referral for legal action
* Integration of 15 rescued girls from child early and forced marriages; counselling family / survivors by professional counsellors.
* The children department provide bursary for few needy cases as well as our staff through support of Chalice Canada and well-wishers.
* Referral to orphanages of children/girls who are homeless.

**7. Measures undertaken to enhance the agency and autonomy of girls and women in Kangeta**

Education; prevention / protection FGM to save the girls from undergoing through the cut. Ongoing sessions for the rights of the child; education, health reproduction in the progression to good value to womanhood.

**8. Measures taken to effectively engage family members, community and religious leaders in raising awareness on countering CEFM**

* Parents of children in day care are sensitized to report cases of child and early forced marriages and FGM.
* Day care staff is trained to recognize, counsel, and report suspected cases of child abuse.
* Children are taught moral[[9]](#endnote-9) values and self-protection from all abuses.[[10]](#endnote-10)
* Our staff / community members participate in formation of children in all the programs.
* Selected community leaders help in mentoring children in families. Parents are sensitized on dangers of betrothing girls as an abuse to girls’ rights.
* The Catholic Church conducts youth programs while parents exchange opinions/ challenges during schools-parent days.

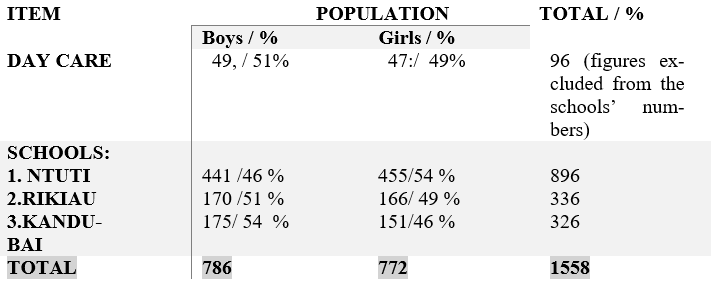
**9.** **Concrete actions taken to provide appropriate protection and accountability mechanisms for women and girls at risk and victims/ survivors of CEFM, including those living in isolated and remote areas**

* Visits to market places, schools, villages and families where girls are abused to collect facts for further action and reports children officers for legal action.
* Our staff remove children from abusive set-up and provide care, protection and prevention from sexual abuse and forced marriages.
* The organization partners with Chalice Canada which offers financial support for children in all levels of education.
* In partnership with Chalice Canada, the staff have drilled bore holes in remote areas (Rikiau village) where girls are forced to drop out of school to search for water in distance places.
* They have furthered piped clean water from the borehole to communities of Eastleigh in the lower Kangeta, Mangoya and Kiunjurini villages.
* Food nutrition programs to children living in remote areas, (*prevents girls from loitering in abusive streets in search for food).*
* They conduct eRoot[[11]](#endnote-11) farming in Gods way (a program funded by Chalice Canada) to help families to be food secure and supplement feeding programs in schools to prevent children from dropping out of schools.

**10. Efforts taken to enhance coordination of Programmes against CEFM in Kangeta towards prevention / elimination of CEFM**

Networking with local government (children officers, police, area chiefs, district commission officers, and community administrators), other NGOs such as Chalice Canada and the faith-based institutions as well as other learning institutions.

**Appendices**:

1. Kangeta is semi-arid with perennial adverse drought; farming is rare with extremely minimal rains hence lack of water. The larger population is illiterate, earns living by selling `miraa` (khat – the leaves of the shrub Catha edulis which are chewed like tobacco, it has the effect of an euphoric stimulant), burning charcoal and pastoralist and agricultural farming. [↑](#endnote-ref-1)
2. As a result, at the request of the Human Rights Council, the UN High Commissioner for Human Rights will present a written report, with input from all relevant stakeholders, on child, early and forced marriage with a focus on humanitarian settings at its forty-first session (June 2019). [↑](#endnote-ref-2)
3. This input is a submission, featuring our experiential work in Kangeta an electoral Ward in Igembe central constituency of Meru. It is aimed to bring to the UN the concerns of CEFM. We present cases of high prevalence of CEFM in Kangeta that covers approximately118.20 Sq. Km with approximate 30,643 inhabitants. The larger Meru had 685,645 Female and 670,656 male and total population of 1,356,301(2009 census) There is no accurate statistics of male / female in this ward however, in general set-up. However, Kenya has 24,983222 men to 25,035797 Women of 50,019020 population with 42.2% under 15years. <http://countrymeters.info/en/Kenya> 27/8/2018 13.47pm. [↑](#endnote-ref-3)
4.  [↑](#endnote-ref-4)
5. Counties dominated by communities that entirely depend on rare cattle for livelihood. They roam around in search of grazing grounds for the animals [↑](#endnote-ref-5)
6. land objection is a refusal by other wives to share land to the young wives [↑](#endnote-ref-6)
7. http://chalice.ca/our-impact/who-we-are [↑](#endnote-ref-7)
8. <https://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/KEN/INT_CEDAW_NGO_KEN_29286_E.pdf> [↑](#endnote-ref-8)
9. Societal/ universal morals which are the rules that govern which actions are right and which are wrong. In other words, they are in line with the individual's beliefs [↑](#endnote-ref-9)
10. *The center is a safe ground to protect children from being abused in the streets* [↑](#endnote-ref-10)
11. KENYA AND TANZANIA SCHOOL FARMING PROJECT <http://chalice.ca/ways-to-give/community-projects/4674-african-home-grown-school-feeding-program>

    Dear Ms Wafang,

    please find attached an individual report about CEFM from Kenya, answering your call from 19 July 2018

    Regards

    Mirjam Beike

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    The Congregation of Our Lady of Charity of the Good Shepherd is an NGO in special consultative status with ECOSOC, UN [↑](#endnote-ref-11)