



East African Journal of Health and Science

eajhs.eanso.org

Volume 9 Issue 1, 2026

Print ISSN: 2707-3912 | Online ISSN: 2707-3920

Title DOI: <https://doi.org/10.37284/2707-3920>



EAST AFRICAN
NATURE &
SCIENCE
ORGANIZATION

Original Article

Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project

Enock Omondi¹, Joseph Kokumu^{1*}, Charles Olwamba¹, Beatrice Oluoch¹, Denis Ochiel¹, Martin Muchangi, PhD¹ & Dorcus Indalo¹

¹ Amref Health Africa in Kenya, P. O. Box 30125-00100, Nairobi, Kenya.

* Author for Correspondence ORCID ID: <https://orcid.org/0000-0002-7595-7232>; Email: josephkokumu@gmail.com

Article DOI: <https://doi.org/10.37284/eajhs.9.1.4459>

Date Published: **ABSTRACT**

05 February 2025

Keywords:

Human Centred Design, Positive Masculinity, Male Engagement, Female Genital Mutilation, Sexual and Gender Based Violence, Behavioural Change.

Migori County, particularly the Kuria Community, continues to experience persistently high rates of Female Genital Mutilation (FGM), Sexual and Gender Based Violence (SGBV) and deeply rooted patriarchal norms that limit progress towards gender equality. Despite Kenya's robust legal and policy frameworks, harmful practices remain widespread due to entrenched cultural beliefs, cross-border cutting and limited engagement of men who hold significant influence in community decision-making. This paper documents the application of a Human Centred Design (HCD) innovation pilot implemented under the Power to You(th) (PtY) Project to co-create culturally grounded interventions that reposition adolescent boys, young men and male elders as catalysts for a positive change. Implemented between May 2023 and January 2025 in Kuria East and Kuria West, the HCD process involved participatory research, co-creation workshops, prototyping, testing and piloting two male engagement models- the Positive Masculinity Program and the Kuria Intergenerational Assembly. The intervention reached over 900 participants through debates, film sessions and structured dialogues. Findings indicate meaningful shifts in awareness, attitudes and behaviours among young boys and men, including increased reporting of FGM cases, emergence of male champions, reduced stigma and harassment of uncut girls, strengthened accountability among duty bearers, and growing acceptance of marrying uncut women. Elders and faith leaders became vocal advocates against FGM/SGBV, while schools integrated discussions on masculinity and gender equality into their programs. The interventions were found to be highly desirable, feasible and viable due to strong community ownership, use of local facilitators, strategic timing and the integration of social-behavioural models. Key lessons highlight the need for culturally sensitive approaches, sustained engagement, involvement of male gatekeepers and continuous learning and feedback loops. Overall, the findings demonstrate that when men are given safe, participatory spaces to critique norms, they become allies in protecting girls' rights. This paper demonstrates that HCD is an effective and adaptable approach

for developing culturally grounded male engagement models that promote gender-equitable transformation in high-prevalence contexts. The model shows strong potential for replication in similar settings where cultural norms heavily influence gender dynamics.

APA CITATION

Omondi, E., Kokumu, J., Olwamba, J., Oluoch, J., Ochiel, J., Muchangi, M. & Indalo, D. (2026). Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project. *East African Journal of Health and Science*, 9(1), 249-263. <https://doi.org/10.37284/eajhs.9.1.4459>

CHICAGO CITATION

Omondi, Enock, Joseph Kokumu, Charles Olwamba, Beatrice Oluoch, Denis Ochiel, Martin Muchangi and Dorcus Indalo. 2026. "Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project". *East African Journal of Health and Science* 9 (1), 249-263. <https://doi.org/10.37284/eajhs.9.1.4459>

HARVARD CITATION

Omondi, E., Kokumu, J., Olwamba, J., Oluoch, J., Ochiel, J., Muchangi, M. & Indalo, D. (2026). "Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project", *East African Journal of Health and Science*, 9(1), pp. 249-263. doi: 10.37284/eajhs.9.1.4459

IEEE CITATION

E., Omondi, J., Kokumu, J., Olwamba, J., Oluoch, J., Ochiel, M., Muchangi & D., Indalo "Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project", *EAJHS*, vol. 9, no. 1, pp. 249-263, Feb. 2026.

MLA CITATION

Omondi, Enock, Joseph Kokumu, Charles Olwamba, Beatrice Oluoch, Denis Ochiel, Martin Muchangi & Dorcus Indalo "Using Human Centred Design to Engage Men and Boys in Ending Harmful Practices among the Kuria Community in Kenya: Lessons from the Power to You(th) Project". *East African Journal of Health and Science*, Vol. 9, no. 1, Feb. 2025, pp. 249-263, doi:10.37284/eajhs.9.1.4459.

INTRODUCTION

Migori County, located in Western Kenya along the Kenya-Tanzania border, records one of the highest rates of Female Genital Mutilation (FGM), Gender-based violence (GBV) and other harmful practices in the country. Within this county, the Kuria community has an estimated FGM prevalence of 84%, which is significantly higher than the national average of 15%(KDHS, 2022). More than half (51%) of Kurian women aged 15-49 years have experienced physical violence at some point in their lives, while 17% have experienced sexual violence, higher than the national average of 13%(KDHS, 2022). FGM in Kuria is not simply a health or legal issue; it is deeply rooted in the community's identity and traditions. It makes the transition from girlhood to womanhood and is viewed as a prerequisite for marriage and social acceptance. Girls who resist cutting are often stigmatised, isolated or deemed unmarriageable (Oloo et al., 2011). Male elders and cultural leaders play a dominant role in sustaining

the practice, as they preside over ceremonies, enforce traditions and define moral expectations(Mwendwa et al., 2022). Men who challenge FGM are frequently ridiculed or labelled as weak or disrespectful of the culture(Flood, 2015; Ruxton & van der Gaag, 2013).

Despite Kenya's strong legal and policy environment, including the Prohibition of FGM Act (2021), the National Policy on Gender and Development, and the SGBV Policy (2022), enforcement gaps remain wide. FGM often occurs in secret with families crossing into Tanzania to avoid legal repercussions(UNFPA, 2022). The practice's persistence underscores that legal solutions alone cannot eliminate it; social and cultural transformation are essential(Mwendwa et al., 2020). Traditional interventions have predominantly focused on protecting girls and women, with limited engagement of men and boys, despite their pivotal role in shaping community norms and decision-making (UNFPA, 2023). The

Power to Youth Project implemented in Migori County, therefore sought to shift this dynamic by positioning men as co-creators of change rather than as mere bystanders or enforcers of culture.

The Power to You(th) Project implementation in Kenya adopted the Human Centred Design (HCD) approach to co-create community-driven interventions that engage men and boys in ending harmful practices among the Kuria community in Migori County. The primary goal of this initiative was to test whether HCD could generate culturally relevant and sustainable models that encourage male accountability, promote positive masculinity and foster long-term behavioural change. HCD was selected for its participatory, empathy-based and iterative structure, which allows solutions to be tested and refined with direct input from those most affected by the problem.

Past interventions neglected the psychological dimensions of male identity and the importance of creating safe, reflective spaces for them. The HCD approach bridged this gap by co-creating community-driven solutions that promote empathy and inclusion while respecting local cultural values. The objective of this paper is to document how using the HCD approach promoted behavioural change among men and boys in Kuria by fostering intergenerational dialogue and positive masculinity, and the intervention's potential for replication in other high-prevalence areas.

Description of the Intervention

The HCD process was implemented between May 2023 and January 2025 across Kuria East and Kuria West sub-counties. The participatory design process engaged local CSOs, youth leaders, elders, faith-based institutions and adolescent boys. The six-step HCD cycle – Discover, Define, Ideate, Prototype, Test and Implement – was used to design and refine interventions that addressed harmful gender norms and community-defined barriers to change.

The Design Process and Phases

1) Preparation (Empathy setup): The process began with the development of training and coaching materials. These materials were tailored for use in the local context of Kuria, Migori. Following this, a comprehensive two-day in-person Human-Centred Design (HCD) training session was conducted, alongside scoping for design challenges. Design challenge proposals were developed, and an innovation team drawn from the PTY implementation regions and partners was assembled.

2) Discover Phase: During this phase, the innovation team developed research plans and research tools, after which research participants were mobilised according to the developed plans. Field research was then conducted to capture raw data from these research sessions. The study adopted an exploratory qualitative design embedded in the HCD framework, complemented by Social Norms Theory and Gender Transformative Approaches. This combination allowed for the collection of rich, context-specific insights and facilitated the co-creation of interventions that were culturally grounded and community-owned. The study was conducted in Kuria East and Kuria West Sub-Counties of Migori County. These areas were purposely selected due to the high prevalence of SGBV and harmful practices, cultural significance of male roles in the community decision making, existing Power to Youth programme presence and established local partnerships in those areas. The primary target groups were adolescent girls between 13-17 years, young men aged between 18-30, older men aged 31 and above, adolescent girls aged between 15-19, young women aged 20-39 and older women 40 years and above. The secondary target groups included cultural elders, religious leaders, policy makers and representatives from local Civil Society Organisations (CSOs). A purposive sampling approach was used to ensure that participants represented the diversity of experiences, attitudes and roles within the community. Snowball sampling was also employed

to reach influential community figures who could otherwise have been overlooked. Data collection involved conducting 1) three Focus Group Discussions, each with 8 participants from homogeneous groups (adolescent boys, adolescent girls, and young men) Fourteen In-Depth Interviews with older men, young women, older women, cultural elders, and religious leaders to collect personal narratives on life experiences relating to gender norms, encounters with SGBV and reflections on community change processes, and 3) Seven KIIs targeted policymakers, CSO leaders, and county-level SRHR coordinators to gather insights on policy implementation gaps, opportunities for integrating male engagement in SGBV prevention and their perceptions of the HCD approach. A total of 45 participants were engaged in the research phase. The data was analysed to generate insights, identifying patterns and key learnings to guide the next phase. The insights generated from this analysis provided a clear understanding of community attitudes and the social dynamics influencing harmful practices. The research insights were documented and formed the basis for the co-creation phase of the HCD process.

3) Create Phase: Building on the synthesised insights, the innovation team participated in a four-day in-person design sprint workshop where the research findings were internalised and “How Might We” statements were developed to reframe challenges into opportunities for solution design. Participants engaged in structured ideation sessions, brainstorming multiple concepts before selecting the most promising ideas for prototyping. The overall How Might We statement for research was:

How might we effectively involve adolescent boys, young men and senior men as catalysts for

change, support and safety, in the effort to reduce and prevent regressive social norms that promote FGM and SGBV against women and girls among the Kuria community in Migori County?

The community interviewees who had participated in the Discover Phase were also engaged in reviewing and diagnosing the data to validate findings and ensure community resonance of ideas. Early prototypes were sketched and tested through rapid feedback cycles, ensuring that potential solutions address both the root causes of harmful practices and barriers to male involvement in prevention efforts.

4) Develop Phase: From the sprint process, two high-potential prototypes were selected for further development and refinement. These included the **Positive Masculinity Program** and the **Kuria Intergenerational Assembly**. The Positive Masculinity Program involves a set of interactive sessions targeting adolescent boys, incorporating film screenings to spark discussions and reflections on gender norms, respect for women and girls, and rejection of violence. These sessions provide an opportunity to showcase relatable, real life scenarios to foster peer-led advocacy for behaviour change. Kuria Intergenerational Assembly is a structured intergenerational dialogue forum bringing together young men and senior men (elders) to openly discuss masculinity, cultural practices and alternatives to FGM. This platform allows for challenging harmful norms in a respectful, culturally grounded manner, with elders playing a central role in endorsing and modelling positive change.

Table 1: Solution Landscape

Intervention	Positive Masculinity Program	Kuria Intergenerational Assembly forums
	Engaging adolescents in film for edutainment sessions and debates challenging harmful norms and promoting men's engagement in positive behaviours.	Structured, intentional sessions that engage men in open discussions to challenge harmful norms and attitudes, promoting behaviour change.
Approaches	<ul style="list-style-type: none"> • Constructive dialogue & critical thinking on masculinity and societal norms. • Adolescent-centric sessions, tailored specifically to the needs and development of adolescent boys • Encourages positive change through peer learning and entertainment-education. • Utilises consistent reinforcement through peer recognition, rewards, and positive feedback loops to strengthen and sustain behaviour change. 	<ul style="list-style-type: none"> • Constructive dialogue & critical thinking on male authority and societal norms. • Local facilitators drive event planning, topic selection, and session moderation for relevance and community ownership. • Posters subtly promoting changes in attitudes, cultural norms and beliefs, guiding men toward positive, sustainable behaviour change. • Continuous facilitator training and mentorship
Tools	<ul style="list-style-type: none"> • Trained local facilitators • SBCC tools: posters & storyboards • Event calendars and topic selection • IEC materials (branded anti-FGM messages) • Systems trackers (attendance, topic coverage, attitude & behaviour change indicators) 	<ul style="list-style-type: none"> • Trained male youth champions and school teachers • Films & Projector • Reward mechanisms • Activity materials (debate motions, discussion prompts)

5) Prototype testing: The innovators finalised the medium-fidelity prototypes, which were tested in real community settings, with the community members who participated in the field research (FGDs, KIIs, IDIs) being the key participants in the testing sessions. The prototype testing revealed key gaps and areas for adjustment, with a lot of emphasis on language, settings in social context for high desirability, with participants expressing strong interest in continuing the activities beyond the pilot. The feedback from participants and local leaders informed further refinement, resulting in high-fidelity prototypes and integrated cultural elements, community leadership and sustainable delivery models.

Implementation of the Intervention (Piloting)

The HCD Pilot innovation was implemented in the target Kuria community between August 2024 and January 2025, a period of 6 months. The pilot commenced with the selection of a guiding behavioural framework, integrating the COM-B Model and the Transtheoretical Model to underpin the intervention design. This was followed by community engagement activities that brought together key local stakeholders who are actively involved in anti-FGM efforts to ensure that the intervention was contextually grounded and locally owned. To operationalise the pilot, a Human-Centred Design-embedded Facilitator Training Manual was developed, incorporating HCD principles and social and behaviour change communication methodologies. Using this manual,

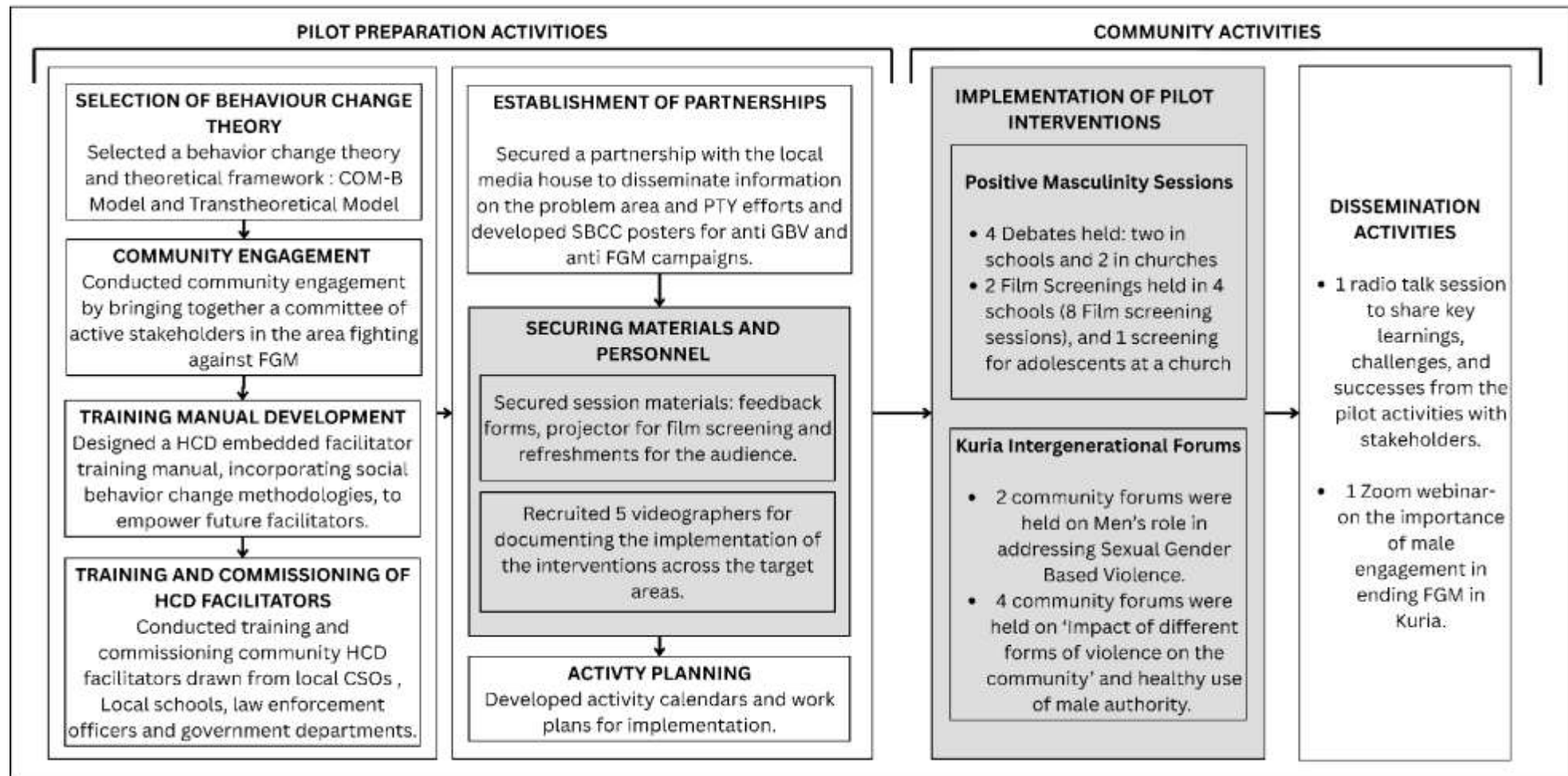
a cohort of 20 community-based HCD facilitators drawn from local CSOs, schools, law enforcement agencies and relevant government departments was trained and commissioned. Activity calendars and work plans were curated to structure the implementation, while media partnerships were secured to enhance awareness efforts. SBCC posters focused on anti-GBV and anti-FGM messaging were produced, as well as feedback forms to collect the views and opinions of participants. To ensure thorough documentation of activities and outcomes, 5 videographers were engaged to support the documentation of the implementation process.

The Human-Centred Design (HCD) Innovation Pilot was successfully implemented in Kuria, Migori County, through the two models, the Positive Masculinity Program and the Kuria Intergenerational Assembly dialogue forums. Under the Positive Masculinity Program, a total of 4 debate sessions were held, including 2 sessions in schools and 2 sessions within church premises. In addition, two (2) film screening sessions were conducted across four schools, while another session was held in a church. The 4 debate sessions and 9 film screening activities reached 340 adolescent boys who participated in edutainment, film-based discussions and dialogues designed to foster positive masculinity.

Through the Kuria Intergenerational Assembly forums, six (6) structured sessions were held in Taranganya, Komotobo, Nguruna, Igena, Kemakoba and Kurutyange, engaging over 250 young and senior men in open discussions on masculinity, gender norms and the role of men in addressing SGBV. Two of these sessions focused on men's role in addressing sexual and gender-based violence, while the other 4 focused on the impact of different forms of violence on the community and healthy use of male authority. To enhance community visibility, a radio talk show was aired on a local radio station to share key learnings, challenges, and successes from the pilot activities with stakeholders. Additionally, one webinar was

convened on the importance of male engagement in ending FGM. These platforms complemented physical dialogues and extended the reach of the program to broader audiences. The pilot innovation implementation reached approximately 900 direct participants comprising adolescent boys, young men and community elders. It trained and commissioned a pool of facilitators drawn from schools, CSOs, law enforcement and local administration. Figure 1 below summarises the implementation of the pilot activities.

Figure 1: Implementation Framework



FINDINGS

The implementation of the innovation pilot produced meaningful outcomes that reflected progress in shifting social and gender norms in Kuria. The outcomes of the intervention were visible across behavioural, attitudinal, social, educational and structural dimensions, evidenced by improved reporting of FGM cases, strengthened community-led advocacy, enhanced accountability among duty bearers and shifting marital preferences of young boys toward uncut girls. Additionally, the intervention contributed to increased male engagement in safeguarding girls, reduced stigma and harassment of uncut girls, stronger community leadership by cultural and faith leaders in speaking against cultural practices, greater community participation in sensitisation sessions and greater integration of gender equality, positive masculinity and SRHR discussions within schools.

Increased awareness and advocacy among boys and men against SGBV and FGM: Young boys and men became increasingly aware of their contributions in propagating harmful practices, and their potential role in the mitigation. These interventions shifted their mindset, attitude and perception on gender relations, evidenced through their involvement in facilitating peer-led sessions where the boys themselves led debates and sessions, inspiring peers. While the initial sessions were led by the HCD facilitators, successive lessons were led by the men and boys themselves. Out of the 19 sessions held (6 for intergenerational dialogues, 4 for positive masculinity sessions, and 9 for film screening), 6 of these sessions were led by the men and boys, as some had gained the courage and developed a positive attitude, enabling them to take the forefront in engaging and sensitising their peers.

“It was amazing seeing one of us students leading an FGM discussion during the positive masculinity session, it makes me feel like I too can do it.” - Student, Kurutyange Secondary School.

Improved reporting of cases by boys and men:

Behavioural outcomes were particularly notable among boys and men who became increasingly self-driven advocates against FGM and SGBV. Schoolboys took an active role in reporting cases of violence they came across in schools and at home, and in two instances, some boys even accompanied their sisters who are at risk of undergoing FGM to rescue centres to ensure their safety. This clearly illustrated growing male involvement in protecting girls from harmful practices.

“For the first time, I have seen girls coming to the (rescue) centre accompanied by their brothers. One brother in particular was so concerned that they were ready to stay around and ensure they (sisters) were safe. This is something so touching for me, it means our efforts are being appreciated....” Admin at Rescue Centre, Kehancha

Shifting marital preferences of young boys toward uncut girls: As FGM is considered a necessary rite of passage into womanhood, marrying uncut girls has remained an unacceptable practice among the Kuria community. Men are generally not expected to marry uncut girls; within the community, an uncut woman is still perceived as a child. With the increased sensitisation, attitude shifts were also noted, as young men increasingly expressed a preference for marrying uncut women, marking a significant attitudinal shift from entrenched traditional expectations.

“It has come to a point where, as young men, when we find out our girlfriends have undergone the cut, we break up immediately and without notice! We no longer tolerate girls who are cut, nothing there to enjoy...” Youth, Kehancha

Reduced stigma and harassment of uncut girls:

Following the in-school sensitisation sessions, some participants reported a noticeable decline in stigmatisation and verbal harassment of uncut girls by schoolboys, contributing to a more respectful and

inclusive learning environment. School boys are committed to ending intimidation and stigma against uncut girls, fostering a more inclusive and respectful environment.

‘I have become a protector of women’s rights and my sisters’ keeper... my younger sister will never undergo the cut ever. This is because of the positive masculinity sessions in our school.’

-Schoolboy, St Annes Getongoroma Secondary School.

Enhanced accountability among duty bearers:

Law enforcement agencies improved coordination during the cutting season, resulting in proactive prevention of FGM cases, timely arrests of offenders and successful prosecution of perpetrators. Two female cutters were arrested, one sentenced to six years in prison, and the second one is awaiting trial, while a local legislator reported his wife for arranging their daughter’s FGM, leading to her conviction and sentencing.

“I have been in Kehancha for over 5 years, and I have never seen a politician come to the police to report his wife for abetting FGM. This is very new, and we, as the police, felt very motivated to make arrests not only for this particular woman but for any other person we find responsible for conducting FGM and other crimes.” Police Officer, Kehancha Police Station.

Stronger community leadership by male cultural and faith leaders in speaking against cultural practices:

At the community level, transformation was visible through increased participation and leadership among local influencers. Cultural elders and faith leaders became outspoken advocates against FGM and SGBV, and began to openly challenge the harmful traditional practices that had long been normalised in the Kuria community. This growing sense of accountability was complemented by public denouncements of FGM and GBV by men and community leaders, signalling a gradual

cultural shift toward collective responsibility in protecting women and girls.

“I have made it clear in my home that no girl will undergo the cut, whether I’m there or not. I have learnt the effects of FGM, and it is something I will not allow my daughters to experience”. Elder, Taranganya area, Kehancha.

Greater inclusion of girls in community spaces:

Men progressively acknowledged their pivotal role as cultural custodians and agents of positive change. This newfound awareness translated into greater respect and inclusion for uncut girls in community spaces, reducing stigma and discrimination that had previously marginalised them.

“Today we have seen girls and boys having discussions on the effect of FGM together, and we were allowed to share our feelings and views openly. I feel this is the only way to make us participate in fighting FGM and even early pregnancies. We as girls feel respected.” Student, St Tereza’s Girls High School, Kehancha

Emerging champions of positive masculinity, steering greater community participation in sensitisation sessions:

Local administrators, such as chiefs, emerged as champions of positive masculinity, leading regular sensitisation sessions. Successive community dialogues and film sessions recorded higher attendance and engagement, demonstrating community confidence, acceptance and demand for the interventions. Communities also voluntarily provided venues for forums and dialogues, reflecting trust, ownership and sustained community buy-in for the initiative.

Greater integration of gender equality, positive masculinity and SRHR discussions within schools:

In terms of educational outcomes, teachers began integrating discussions on masculinity, gender equality and sexual and reproductive health and rights into school programs. Schools

themselves requested additional film screenings and debate sessions, indicating institutional endorsement and commitment to sustaining the conversations initiated by the project.

Unintended Outcomes

There has been a noticeable increase in public and media attention on FGM in Kuria, extending beyond the initial pilot area. There is also a growing demand from women for mother-daughter dialogue forums that mirror the male engagement model, highlighting a desire for inclusive approaches to ending harmful practices. Cross-generational collaboration is also emerging, with elders inviting youth to participate in community ‘barazas’, fostering shared responsibility and dialogue. Participants have shown rising interest in integrating livelihood opportunities with gender dialogue activities, indicating a link between economic empowerment and social change.

Assessment of Desirability, Viability and Feasibility of the Intervention

Desirability: The initiative demonstrated strong appeal, evidenced by high engagement from both adolescents, young people and elders. Over 340 adolescent boys participated in positive masculinity sessions, 250 young and senior men attended the Intergenerational dialogues, and over 300 adolescents attended film screening sessions. Film screenings and debates received positive feedback, sparking critical conversations on gender norms and harmful practices. Participants expressed a growing interest in learning and advocating for change; school learners requested the films to watch again with a larger number of students, while some of the community members expressed interest in being facilitators in future sessions. These patterns collectively suggest strong user acceptance and growing demand for the intervention.

Viability: The initiative is cost-effective, leveraging partnerships with CSOs, schools and local government programs such as community meetings to maximise resources. Community-based

implementation ensures sustainability by integrating existing structures and collaboration with women who rejected female genital mutilation: inspiring examples of educated, successful and “marriageable” women. To sustain these efforts, continuous mentorship for the community facilitators was conducted, coupled with the use of male role models and champions of change to inspire the target audiences. The intervention was timely in that it was implemented just prior to the cutting season in Kuria, making it relatable and effective for the users to spread awareness and report cases.

Feasibility: The model proved operationally feasible in the Kuria context. Adolescents were effectively mobilised through schools with support from teachers, while young and senior men were engaged through local leaders at the chief’s camp. The use of local facilitators fostered ownership, cultural resonance and community trust. Structured planning through work plans and monthly event calendars ensured timely delivery and coherence across interventions. Continuous capacity-building deepened facilitator competencies, and the formation of a coordinating committee created a unified structure for sustaining momentum.

Lessons Learnt

One of the key lessons learnt was the importance of being cognizant of culture when addressing deeply rooted norms. Lasting behaviour change is achieved when interventions engage, reinterpret and work within existing cultural values rather than confront them. Second, male engagement proved transformative. Male engagement is transformative: Boys and men are catalysts for ending harmful practices such as FGM/GBV. Involving men and boys not only strengthened accountability but also accelerated shifts in harmful norms by positioning them as allies and custodians of positive change. The implementation experience also showed that behaviour change is a cumulative and iterative process and takes time. Shifting attitudes and perceptions need sustained engagement and

reinforcement. Consistent reinforcement of messages through films, debates and dialogue forums significantly enhanced both reach and uptake of the intervention. Gatekeepers and stakeholders are critical; timely involvement of elders, religious leaders, and law enforcement officers builds legitimacy, their support accelerates community acceptance and adoption of new practices. It builds community trust and local ownership. Finally, continuous learning was essential, as real-time monitoring and feedback loops enabled adaptive decision making and more responsive context-sensitive implementation.

What Worked and Success Factors

The identification, training and deployment of local facilitators played a crucial role in ensuring cultural relevance, credibility and trust within the communities. Continuous capacity building and mentorship programs for trained facilitators ensured that skills and acknowledgement gained in the pilot phase would be retained and expanded, supporting the long-term sustainability of the intervention. The use of edutainment approaches such as film and debates proved particularly effective in capturing the attention of young people and simulating meaningful dialogue. Regularly organised debates, film screenings and intergenerational forums, rather than one off session, created sustained engagement, reinforced key messages over time and contributed to deeper reflection and gradual norm transformation within the community. Peer influence, coupled with reward and recognition mechanisms, further reinforced positive behaviour change among participants. The program's design was also informed by behavioural models such as the GTA and the trans-theoretical model, which guided motivation strategies and enhanced progressive behaviour shifts. Strong partnerships and collaboration with chiefs, police officers, teachers and faith leaders strengthened the legitimacy of the intervention, improved access to

participants, strengthened local coordination and enabled smoother implementation. Local venues and schools offered their spaces free of charge, thereby demonstrating strong community ownership and support for the intervention. Strategically timing the intervention just before the cutting season increased its relevance and urgency as communities were already mobilising around FGM-related activities. Finally, integrating social behaviour change communication (SBCC) with Human-Centred Design (HCD) tools enriched the quality of engagement, fostering deeper participation and improving prospects for sustainability. The development of HCD-embedded facilitator manuals, activity calendars and feedback tools enhanced program structure, organisation, and accountability.

What Did Not Work and Inhibiting Factors

Despite the successes highlighted, several implementation barriers constrained the intervention's overall effectiveness. Concurrent cultural rituals, particularly the circumcision season, further reduced attendance among adolescent boys and elders, whose involvement was critical for intergenerational norm transformation. The compressed pilot timeframes also precluded a comprehensive assessment of long-term behavioural trajectories and sustained norm shifts. Moreover, entrenched socio-cultural resistance, especially from conservative group persisted due to long-standing belief systems and the risks of social exclusion associated with rejecting traditional practices.

Challenges and Mitigation Measures

The implementation of the intervention faced various challenges, ranging from cultural resistance and fear of backlash, overlap with traditional circumcision ceremonies and maintaining momentum post-implementation.

Table 2: Challenges and Mitigation Measures

Challenge	Mitigation Strategy
Overlap with traditional circumcision ceremonies.	Rescheduled sessions and engaged chiefs' barazas to retain male audiences.
Cultural resistance and fear of backlash	Used respected elders, religious leaders, and male champions to lead dialogue.
Inadequate facilitation resources	Relied on volunteers; CSOs provided logistical and material support.
Maintaining momentum post-pilot	Established a facilitator committee and mentorship system for continuity.

CONCLUSION

The study applied a Human-Centred Design approach to co-create, test and refine innovative community-based interventions aimed at reducing and ultimately eliminating sexual and gender-based violence, female genital mutilation, early marriages and related harmful practices in the Kuria Community of Migori County. The findings demonstrate that men, particularly elders, remain the principal gatekeepers of cultural norms and practices, exerting decisive influence over the continuation or abandonment of harmful traditions. However, the intervention also revealed a generational shift: younger men are increasingly open to rejecting FGM and supporting gender equitable practices, influenced by education, exposure to alternative viewpoints, and targeted sensitisation efforts. Through participatory engagement, the HCD process successfully bridged the gap between traditional authority structures and emerging youth voices. The two co-created interventions, Positive Masculinity Program and Kuria Intergenerational Assembly, not only challenged entrenched norms but also created new inclusive spaces for dialogue, learning and advocacy. Positive Masculinity sessions enhanced boys' understanding of gender equality and SRHR, while intergenerational assemblies enabled respectful, structured conversations between youth and elders that had previously been rare or non-existent.

The pilot interventions demonstrated that shifting harmful norms requires both cultural legitimacy and

community ownership. Chiefs, elders and religious leaders played a pivotal role in legitimising conversations that had traditionally been taboo, while the involvement of young people ensured the interventions were forward-looking and sustainable. Notably, the study developed and tested a framework for measuring male engagement at the local level – an innovation in its own right – which provides a structured approach to tracking awareness, advocacy and action among men. This framework offers a practical tool for future programming and policy-making in similar contexts. The innovation demonstrates that it is possible to challenge and transform harmful norms when interventions are designed with, not for, the community. By anchoring change in culturally resonant dialogue, amplifying youth voices and institutionalising male engagement frameworks, the foundation is laid for lasting reductions in SGBV, FGM and other harmful practices. The lessons learned and prototypes tested in Kuria have strong potential for replication and scale-up in other regions facing similar challenges. Future interventions should continue to apply participatory frameworks such as HCD to ensure communities remain central in shaping intervention design and implementation. Longitudinal studies are also required to capture extended behavioural trajectories and assess the durability of attitudinal change among male participants. Finally, scaling up the model beyond the Kuria context is crucial to evaluating the intervention's scalability across diverse cultural settings and determining the

conditions under which its outcomes can be replicated and sustained.

Recommendations

- **For Policy Makers:** Policy action should prioritise the integration of male engagement into national and county-level GBV and FGM strategies, recognising men, particularly elders, as pivotal cultural gatekeepers. Institutionalising male-focused interventions within county and national-level frameworks would enhance accountability and community ownership in combating harmful gender norms. Meaningful youth participation must also be institutionalised by mandating representation of both male and female youth in governance platforms such as community policing structures and cultural forums. Allocating dedicated funding for HCD-based interventions would ensure that government-supported social transformation programs remain community-driven, culturally appropriate and contextually responsive.
- **For NGOs and CBOs:** Civil society actors should prioritise replication and contextual adaptation of the Positive Masculinity Program and the Kuria Intergenerational Assembly in other high-prevalence regions, tailoring activity formats, language and cultural symbolism to local realities. Strengthening the capacity of male champions and community HCD facilitators through structured mentorship, training and incentives is vital for sustaining advocacy and behaviour change beyond pilot phases. Programmatic efforts should also reinforce sexual and reproductive health and rights (SRHR) initiatives, especially those that strategically engage fathers, male guardians and religious leaders to enhance girls' access to services. Expanding engagement with localised media – such as community radio, drama groups and film screenings can effectively diffuse gender equitable norms and reduce stigma against uncut girls. Collaborations with

schools are recommended to expand debates. In addition, systematic documentation and dissemination of impact stories featuring men, boys and community leaders can serve as powerful tools for public persuasion and donor engagement.

- **For local leaders in the Kuria community:** Local leadership is central in catalysing normative change. Chiefs, elders and cultural influencers should lead publicly endorsed alternative rites that celebrate girlhood without cutting, reinforcing cultural pride while eliminating harm. Sustaining intergenerational discourses is critical, and efforts should be made to institutionalise the assemblies initiated under the pilot innovation implementation within existing governance and cultural systems. Local leaders must also work closely with law enforcement to ensure the consistent application of legislation related to FGM, early marriage and GBV, especially during high-risk initiation seasons. There should also be formal recognition of male role models who actively oppose harmful practices, given its potential to reinforce and amplify emerging champions of positive masculinity within the community.

Ethical considerations in the research: The research component conducted in the Discover Phase adhered to ethical principles such as Respect for Persons, Beneficence and Justice, with national-level ethical clearance obtained from the Amref Ethics and Scientific Review Committee (ESRC) before data collection (**ESRC Approval No. ESRC/P1619/2024**); Informed consent was obtained from all the participants, with forms provided in local languages and provision of witnesses and thumbprint for the illiterate. For minors (13-17 years) both parental consent and adolescent's assent were secured. To ensure confidentiality, participants' identities were anonymised using codes. Consent forms were stored separately and securely, and no identifying details were included in reports. The study adhered

to Power to Youth Safeguarding Policy, ensuring protection of participants from sexual exploitation, abuse, harassment and fraud and maintaining cultural and gender sensitivity. The information sheet for minors was explained in simple language, and their rights and welfare were prioritised to prevent harm. Photographs were only taken with prior written consent from adults. No photos of minors were taken, and all images were vetted and securely stored.

Author Contributions

Enock Omondi Contributed to conceptualization of the innovation, conceptualization of the research component, protocol development, validation, drafting of report, original drafting of the manuscript. Joseph Kokumu contributed to conceptualization of the research component, protocol development and review, validation, monitoring the implementation of the innovation, review of report, drafting, review and editing of the manuscript. Charles Olwamba Contributed to conceptualization of the innovation, conceptualization of the research component, protocol development, overseeing project implementation, and review of the manuscript. Beatrice Oluoch contributed to review of manuscript. Denis Ochiel contributed to documentation of innovation learnings and review of the manuscript. Martin Muchangi contributed to the overall programme oversight and review of the manuscript. Dorcus Indalo contributed to the overall project management, funding acquisition from donors, and review of the manuscript.

Acknowledgement

The authors gratefully acknowledge the Ministry of Foreign Affairs of the Netherlands for their financial support, which made the innovation pilot and accompanying research possible. Their continued investment in youth empowerment, gender equality, and the elimination of harmful practices has been instrumental in advancing sexual

and reproductive health and rights (SRHR) across the region.

We extend our deep appreciation to the Proportion Global consulting team. Tracy Lihanda and Sarah Mpapuluu, for their invaluable technical support throughout the design and execution of the intervention and the research study. Their expertise, methodological guidance, and sustained mentorship of HCD facilitators significantly strengthened the quality and depth of the insights generated during implementation.

We also sincerely acknowledge the Kenya Country Management Team from partner organisations, led by Amref Health Africa in Kenya and the Network for Adolescent and Youth in Africa (NAYA), alongside four partners at the county level – Siaya Muungano Network (SIMUN), Tunaweza Empowerment Organization, Naret Intoiye CBO, and Wanawake Wavuvi (WaWa) CBO. Their leadership, collaboration, and dedication were central to the successful implementation of the Power to You(th) Programme, ensuring alignment across institutions, engagement of community stakeholders, and cultural relevance of the interventions.

Our gratitude further extends to the innovation implementation and oversight team from the partner organisations, including Immaculate Oliech, Euphrasia Oduor, Emmanuel Mwita, Alice Masinte, and Winnie Ongere. Their commitment, professionalism, and dedication during the planning, coordination and field implementation, often under challenging circumstances, ensured the meaningful participation of community members and the accurate representation of their voices.

Finally, we express our heartfelt gratitude to the Migori County Government, including sectoral officers and local administrators, for their collaboration and sustained support throughout the implementation.

Funding: The implementation of the Human Centred Design approach was embedded within the Power to Youth Project in Kenya, which is funded by the Ministry of Foreign Affairs of the Netherlands.

Conflict of Interest: The authors declare no known conflict of interest associated with the development of the intervention, implementation and publication of this paper. The implementation partners, community facilitators, and local stakeholders who contributed to the project did so within their institutional and community roles and had no competing interests related to the outcomes of the intervention. Any potential biases arising from the authors' involvement in project management or oversight were mitigated through structured verification processes and adherence to research ethical standards.

REFERENCES

- Flood, M. (2015). Work with men to end violence against women: A critical stocktake. *Culture, Health & Sexuality*, 17(sup2), 159–176. <https://doi.org/10.1080/13691058.2015.1070435>
- KDHS. (2022). *Kenya demographic and health survey, 2022*. Kenya National Bureau of Statistics.
- Mwendwa, P., Kaimuri, M., Kalondu, E., Karani, C., Behnam, R., Al-Rousan, T., Kroll, T., De Brún, A., & McAuliffe, E. (2022). Female genital mutilation and male involvement: Insights of men and women in two counties in Kenya. *African Journal of Reproductive Health*, 26(11), 106–118. <https://doi.org/10.29063/ajrh2022/v26i11.10>
- Mwendwa, P., Mutea, N., Kaimuri, M. J., De Brún, A., & Kroll, T. (2020). “Promote locally led initiatives to fight female genital mutilation/cutting (FGM/C)” lessons from anti-FGM/C advocates in rural Kenya. *Reproductive Health*, 17(1), 30. <https://doi.org/10.1186/s12978-020-0884-5>
- Oloo, H., Wanjiru, M., & Newell-Jones, K. (2011). *Female genital mutilation practices in Kenya: The role of alternative rites of passage. A case study of Kisii and Kuria districts*. Population Council. <https://doi.org/10.31899/rh2.1075>
- Ruxton, S., & van der Gaag, N. (2013). Men's involvement in gender equality – European perspectives. *Gender & Development*, 21(1), 161–175. <https://doi.org/10.1080/13552074.2013.767522>
- UNFPA. (2022). *Female Genital Mutilation Among Cross-Border Communities-Ethiopia, Kenya, Somalia, Tanzania and Uganda*. https://esaro.unfpa.org/sites/default/files/pub-pdf/summary_fgm_among_cross-border_communities_final_web.pdf
- UNFPA. (2023). *Gender-transformative approaches to achieve gender equality and sexual and reproductive health and rights*. https://www.unfpa.org/sites/default/files/pub-pdf/UNFPA_GTA-2023.pdf