This research investigated the ways in which Maasai culture, as practiced in a rural and relatively isolated area of Kenya, impacted upon the transmission of HIV/AIDS. The author focused her field research on women aged 16–25, and a range of cultural practices contributing to and influenced by gender roles in Maasai society. Local practice has been addressed and recommendations made in relation to the position of the Maasai community in the wider political economy and Kenya’s ethnic wars.

The study also investigated strategies the women considered appropriate, practical and effective to cope with these risks. The field study was conducted in the Loitokitok district of Kenya.

**Methodology** The research is within a qualitative paradigm. Choice of methodology was mainly based on ethic consideration of research within cultural context of Maasai Indigenous people. Data was generated through use of focus group discussions, semi structured interviews and informal observation methods. An extensive review of the literature was also conducted. The influence of gender based customs and practices are highlighted in a number of scholarly works, Governmental and non-governmental documents with regard to women’s vulnerability to Sexually Transmitted Infections (STIs).

The researcher maintained an “insider-outsider” position and a participatory role in order to try to identify the current state of Maasai women’s reproductive health at the grass roots level.

**Findings** Research findings have found that there is a challenge in young pastoralist women’s reproductive health autonomy. Their risk of STIs especially HIV infection is strongly determined by cultural and sexual practices that are gender related.

Existing customs and practices tend to be more repressive to the women’s autonomy in sexual health matters as men hold power in most important roles in society.

**Conclusions** The study does not call for cultural change or reformation of traditional culture within the Maasai community; rather it appeals for transformation of customs and practices that cause harm on women’s reproductive health. Valuable cultural practices and intentions that recognise women and celebrate their womanhood should be encouraged in a way that is not physically or psychologically daunting experience on their wellbeing.

To this end, the understanding and knowledge of the Maasai worldview is critical to the intervention of Maasai women’s reproductive health rights. A more cultural approach to Maasai women’s reproductive health is suggested to be more effective. In relation to the adoption of STI prevention measures, Maasai culture plays a key role towards identification of preventive measures and strategies.