INTRODUCTION

1.1 Introduction

This study seeks to explore how female residence students at the University of KwaZulu-Natal (UKZN) understand and experience gender-based violence and safe sex practices, within the context of the HIV/AIDS epidemic. A social constructionist approach is used to explore how female UKZN residence students' talk reveals the ways in which they construct their understanding of these issues. This research endeavours to explore these discursive constructions of gender-based violence and safe sex practices. It is anticipated that the findings in this research will be used to inform University policy and practice, which will address the problem of gender-based violence at UKZN. This research will also contribute to literature surrounding gender-based violence at South African Tertiary Institutions. This research uses a social constructionist approach to illuminate the problem of gender-based violence amongst twelve female UKZN residence students.

This chapter includes the background and context of the study; the problem statement; statement of purpose and research questions. The research approach, researcher’s perspective, the rationale and the significance of the research will also be discussed.

1.2 Background and Context of the Study

1.2.1 Defining Gender-based Violence
Gender-based violence is closely associated with the unequal distribution of power between the sexes and is defined as "any interpersonal, organisational or politically orientated violation perpetrated against people due to their gender identity, sexual orientation, or location in the hierarchy of male-dominated social systems such as family, military, organisations, or the labour force" (O'Toole & Schiffman, 1997, p.xii). However this research focuses specifically on violence against women.

The term "violence against women" is defined in the Declaration of the Elimination of Violence against Women of December 1993 as "any act of gender-based violence, that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (United Nations General Assembly, 1993). Gender-based violence can take many forms: physical, psychological or sexual. This comprises of acts of sexual harassment and intimidation, emotional and verbal abuse, physical abuse and sexual violence such as rape and indecent assault. Sexual violence refers to any unwanted sexual advances or experiences such as unwanted touching, kissing, forced oral sex or forced penetration (Russell, 1984).

Often women do not define particular experiences as violence because only experiences that fit the narrow legal definition of rape are termed as sexual violence. This tendency is often linked to the practice of victims minimising their experience, which is a common coping strategy of women exposed to gender-based violence (Koss & Cleveland, 1997). Koss and Cleveland (1997) reported that female University students believe that sexual aggression is common and thus harmless as it is considered a common feature of their dating experience. This normalisation
Women are more likely to be victimised by someone they know than by a stranger (Russell, 1984; Vogelman, 1990; Vetten, 1997). Incidences of gender-based violence are rarely disclosed and many women keep their victimisation hidden. In fact, the better acquainted a woman is with her perpetrator the less likely she is to disclose her experiences to others (Koss & Cleveland, 1997). The silence of victims further contributes to the growing fear surrounding gender-based violence. Every woman fears becoming a victim of gender-based violence and this continuing threat of violence can create intense anxiety in a woman (Brown, 1995; Miller, 1997). Living in a society where gender-based violence is prevalent can have serious consequences for women as it facilitates an ongoing internal dialogue of fear.

The unequal distribution of power between the sexes, which characterises gender-based violence, hinders women from negotiating safe sex. Women are more likely to be HIV positive if they are in a relationship characterised by a power imbalance as they often lack the power to implement safe sex practices (Walker, Reid & Cornell, 2004; Martin & Curtis, 2004; Dunkle, Jewkes, Brown & Gray, 2004; Leach, 2002; Vetten, 2000). As KwaZulu-Natal is the province worst affected by the HIV/AIDS pandemic the implementation of safe sex practices by young women is highly relevant. Safe sex practices tend to require negotiation between sexual partners, but sexual coercion disallows this negotiation and thus places people at risk. This is highly relevant as sexual coercion is now known to exist in many encounters between social acquaintances. The inability of victims of gender-based violence to implement safe sex practices
up the topic of HIV/AIDS for discussion. The problem of gender-based violence needs to be addressed as it not only has physical, social and psychological effects, but also hinders women from negotiating safe sex and protecting themselves from HIV infection.

1.2.2 The Emergence of Gender-Based Violence at UKZN

The emergence of gender-based violence as a prominent challenge facing the University of KwaZulu-Natal community has led to the impetus for a qualitative study which aims to focus specifically on female residence students on Howard College Campus. The Gender-based Violence Lobby Group, formed in 2006 was born out of lecturers’ concern over escalating gender-based violence in UKZN residences. Many incidences of gender-based violence have gone underreported because of students’ reported lack of confidence in University services (Tolsi, 2007). Rhodes University in South Africa experiences similar student responses in which students have little confidence in the University’s handling of sexual harassment and rape and subsequently believe that their complaints are disregarded by management (De Klerk, Klazinga & McNeil, 2007). The Gender-based Violence Lobby Group in partnership with other important University figureheads developed a booklet, entitled ‘The Right Moves’ which was placed in every room in University residences in 2007. This booklet included information regarding student services, gender-based violence, HIV/AIDS, sexuality, sexual orientation and issues surrounding racism, however due to a lack of funding this booklet is no longer placed in residences (The Right Moves, 2007).
The well publicised rape of an international student at the Mabel Palmer residence on Howard College campus in 2007 led to further attention directed toward the problem of gender-based violence. This increased attention led to the formation of the gender-based violence working group. This group developed a safety review which highlighted the problem of gender-based violence on UKZN campus and offered relevant suggestions and guidelines to improve the situation (UKZN Gender-based Violence Review, 2007). The safety review argues that "if we simply assume that UKZN follows international trends, as many of 2000 of our students are being sexually assaulted annually- more than 10 for every single day of the academic year" (UKZN Gender-based Violence Review, 2007, p.4). These statistics are alarming and create a disturbing reality for UKZN students. Although University management has expanded its security budget in an effort to combat gender-based violence at UKZN, many other relevant suggestions in the safety review, have not yet been implemented by UKZN management. This has led to student mobilisation in the form of a new university society, Students against Rape and Hate (S.A.R.A.H) in 2008, further drawing attention to students' growing concern surrounding gender-based violence at UKZN. Research conducted at UKZN concerning gender-based violence has also identified the need for further research in this area (Phungula, 2007; Chetty, 2008). There appears to be increasing attention gathering around the issue of gender-based violence at UKZN, however it seems that little has been done in terms of the development and implementation of relevant interventions that could sufficiently combat this problem.

1.3 Problem Statement

The emergence of gender-based violence as a significant problem at UKZN has created the need for relevant research addressing these concerns. Despite the extensive literature on gender-
Research on gender-based violence in tertiary institutions in South Africa. Research indicates that South Africa has a high base rate of gender-based violence and the HIV prevalence rate is estimated at 29% (Van Rensburg, 2007; Human Rights Watch, 2001; Vetten, 2000). These statistics create the precedence for research which addresses how women understand and experience the issues of gender-based violence and risk of HIV infection, specifically focusing on safe sex practices. Gaining an understanding of these issues will allow us to develop effective policy and interventions.

1.4 Statement of Purpose and Research Questions

The purpose of the study is to explore and understand the discursive constructions of gender-based violence and safe sex practices amongst female residence students at UKZN. This study seeks to understand the way in which discourses position participants in relation to gender-based violence and safe sex practices. Once discursive constructions of gender-based violence and safe sex practices were identified and explored, recommendations were made to address the problem of gender-based violence. The following research questions shed light on this problem:

The key research questions are: What discourses do these women use when discussing gender-based violence? and How do these discourses intersect with the risk of HIV/AIDS infection?

These key questions are divided into the following sub-parts:

- How do these women experience the fear and threat of gender-based violence?
- What measures do women employ to reduce their risk of gender-based violence and HIV infection? Are these measures effective?
1.5 Research Approach

Since many beliefs and perceptions surrounding gender-based violence and safe sex practices are socially constructed, a social constructionist approach guides this qualitative research. After approval from the ethics committee, the researcher interviewed twelve female UKZN residence students from Howard College Campus. All interviews were transcribed verbatim and participants were given pseudonyms. Interview texts were analysed using discourse analysis. Various strategies were implemented to ensure the trustworthiness of the research such as reflexivity, peer reviewing, debriefing and rich thick description.

1.6 The Researcher

At the time of conducting this study I, the researcher was a female UKZN student on Howard College Campus. The problem of gender-based violence at UKZN is highly applicable to my life because being a female student places me at risk. As a woman living in South Africa I am aware of the constant fear and threat of gender-based violence. In addition to establishing the personal orientation of the researcher at the outset of the study, I engaged in ongoing critical reflection and put in place safeguards to ensure the quality of the research.

1.7 Rationale and Significance

This research is situated in a much larger problem of gender-based violence at UKZN and will hopefully culminate in interventions and policy that will improve the situation on campus.
This will allow female students to feel safe from gender-based violence when they are at University, affording them a new sense of freedom and perhaps improving their academic performance. This research is also part of an effort to raise consciousness around gender-based violence and HIV/AIDS in South African universities. This study also contributes to literature surrounding gender-based violence and HIV infection at South African Tertiary Institutions.

1.8 Conclusion

Gender-based violence and the HIV/AIDS epidemic are some of the greatest challenges facing South Africa. Reports of gender-based violence at the University of KwaZulu-Natal residences has created the space for research which addresses how female residence students at UKZN understand and experience gender-based violence and safe sex practices. The intersection between gender-based violence and HIV/AIDS is explored in this research. This research adopts a social constructionist approach and focuses on language as the object of study. Twelve female residence students from Howard College Campus were interviewed and interview texts were analysed using discourse analysis. This research is interested in how discourses constrain and shape participants' understanding of gender-based violence and safe sex practices. The research findings emanating from this study were used to highlight relevant recommendations. These recommendations will hopefully be used to inform University policy and practice, and as a result improve the lives of female students at UKZN. However, researching violence against women is not free of emotional complications for any female researcher. This research process became intertwined with my identity and experiences as it set me on a personal journey, as both a researcher and a woman.
LITERATURE REVIEW

2.1 Introduction

This chapter reviews the literature relating to gender-based violence and safe sex practices. The following areas will be discussed: the interrelationship between gender-based violence and HIV/AIDS; themes such as insidious trauma, the stranger rape myth, transactional relationships, rape supportive cultures and societies which sustain violence against women; various forms of gender-based violence and the HIV/AIDS epidemic in South Africa. All the themes will be explored and the relationships between these themes will be identified and extrapolated upon. Inconsistencies, gaps and contradictions in the literature will also be explored. The issues of gender-based violence and safe sex practices will be grounded in relevant South African literature. Much of the available South African research on sexual violence and HIV/AIDS reviewed is quantitative, creating the need for additional qualitative research in this area.

2.2 Interrelationship between HIV/AIDS and Gender-Based Violence

This research is situated in a growing epidemic in South Africa in which a woman is raped every twenty six seconds, (What the stats say: What’s actually happening in our country, 2009) and the national HIV prevalence is estimated at 29% (Van Rensburg, 2007). KwaZulu-Natal is the province worst affected by the HIV/AIDS virus, placing women in KwaZulu-Natal at increased risk (Vetten, 2000). Women are at both high risk of HIV infection and gender-based violence (Pendry, 1998). There appears to be a circular relationship between gender-based
violence and HIV/AIDS as gender-based violence is often seen as the result of HIV infection and gender-based violence can contribute to risk factors associated with HIV (Van Rensburg, 2007). The inter-relationship of HIV/AIDS and gender-based violence has been identified as a relevant area for further research (Van Rensburg, 2007; Pendry, 1998; Wood & Jewkes, 1997; Martin & Curtis, 2004; Walker et al., 2004).

The Human Rights Watch (2001, p. 70) reports that “In South Africa, the prevalence rate of HIV in girls and young women aged fifteen to twenty-four is almost twice that of boys and young men of the same age.” Research reports that 30% of women in KwaZulu-Natal described their first sexual encounter as ‘forced’ (Wood & Jewkes, 1997). However although many women describe their first sexual encounter as ‘forced’ other research shows that younger women consider introducing condom use into a relationship as relatively easy (Van Rensburg, 2007). Women are more likely to be HIV positive if they are in a relationship characterised by a power imbalance and abuse as women appear unable to introduce condom use because they lack power in the relationship (Walker et al., 2004; Martin & Curtis, 2004; Dunkle et al., 2004; Leach, 2002; Vetten, 2000).

Dunkle et al. (2004) identifies this link between gender-based violence and HIV/AIDS and argues that the experience of violence may lead to risky behaviour which may result in HIV infection. The realities of power dynamics and gender inequalities in relationships contribute to a woman’s inability to negotiate condom use in particular circumstances (Wood & Jewkes, 1997; Walker et al., 2004). Women who are both HIV positive and victims of gender-based violence find it increasingly difficult to disclose their HIV status and access relevant services (Van
Van Rensburg (2007) research further shows that women would be more likely to disclose abuse than their HIV status. This is attributed to the social stigma surrounding HIV/AIDS. Women are exposed to high risks of HIV/AIDS infection and gender-based violence, and often lack the power necessary to protect themselves against these health concerns. Through the exploration of gender-based violence and relevant concerns surrounding this area, the difficulty of implementing safe sex practices in sexual encounters will be exposed.

2.3 Insidious Trauma: Every Woman's Concern

Brown (1995, p.105) argues that a woman does not have to be raped to experience the psychic trauma of gender-based violence as the "absence of safety in the daily lives of women and other nondominant groups" becomes a source of trauma. Brown (1995) further argues that women who have never been raped may develop symptoms of rape trauma because the fear and threat of trauma becomes a continuing background noise within their own lives. In South Africa one in two women will be raped in their lifetime and one in four women are believed to be involved in an abusive relationship (Van Rensburg, 2007). As a woman living within this dangerous context where gender-based violence is prevalent, normalized and eroticized by men, the implications for trauma are inevitable. Root (1995, as cited in Brown, 1995, p.107) identifies this as "insidious trauma." This "insidious trauma" affects women who have not necessarily been a victim of gender-based violence because the fear and anticipation surrounding gender-based violence creates this trauma. Miller (1997, p.150) argues that women live their lives according to a "rape schedule," in which their behaviour is constantly shaped by the fear of being raped. Since every woman is exposed to "insidious trauma" and lives according to a "rape schedule," the women sampled in this research do not necessarily have to have personal experiences with
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Dosekun (2007) conducted similar research among fifteen women studying or, in one case working at the University of Cape Town, on how women construct meaning around rape. The women sampled in the research also did not necessarily have personal experiences with gender-based violence because the research was based on the same principles of Root’s (1995, as cited in Brown, 1995) ‘insidious trauma’ which implies that every woman is adversely affected by gender-based violence, regardless of whether or not they are a victim. Dosekun’s (2007) research showed that all of the fifteen women were affected by the prevalence of rape in South Africa and that this fear of rape is as Dosekun (2007, p.98) states “a possibility they factor into their daily decisions, movements and interactions.” This ongoing dialogue of fear in the lives of women will be explored in this research.

2.4 The Normal Man Becomes the Perpetrator

Significant research demonstrates that sexual violence usually does not occur between strangers, but rather between individuals who know each other (Vogelman, 1990; Vetten, 1997; Schwartz, 1997; Russell, 1984). Women are more likely to be attacked by someone they know than by a stranger (What the stats say: What’s actually happening in our country, 2009). The stranger rape myth is so dominant in the discourses of everyday vernacular that often sexual violence that does not fit this specific rape script is not defined as sexual violence by society (Frazier & Seales, 1997). Research collaborates this argument and indicates that a third of South African men and women believe that forcing sex on someone you know is not sexual violence.
Russell (1984) further argues that women commonly share some degree of previous consensual intimacy with their perpetrator and highlights the prevalence of date rape and acquaintance rape in our society. Vetten (1997, p.46) reports that forty-two percent of women who are raped know their perpetrator and most rapes take place in the perpetrator’s home. This further intensifies the fear surrounding gender-based violence as the ‘normal man’ becomes the perpetrator. Since most perpetrators of gender-based violence are known to their victim it becomes important to understand and explore how women negotiate sexual boundaries as well as condom use in their relationships. It is in this way that “the personal is political” (Hooks, 1986, p. 24).

2.5 Transactional Relationships

Transactional relationships in which a woman is expected to have sex with a man in exchange for money, clothes, presents, food, transport, housing, protection etc. is a growing trend in South Africa and places women at increased risk for HIV infection and gender-based violence (Wood & Jewkes, 1997; Dunkle et al., 2004; Leach, 2002; Walker et al., 2004 Hendriksen, Pettifor, Lee, Coates & Rees, 2007). Although this study focuses on University students, who are likely to fit in the age bracket 18-24, research shows that women over the age of 35 are more likely to engage in transactional sex as opposed to younger women (Dunkle et al., 2004). However Leach (2002) reports high levels of transactional sex among school girls in many African countries, in which ‘sugar daddies’ prey on young girls for sex and in exchange provide these girls with various material gains. Young girls and women are placed in vulnerable circumstances in which they are unable to exercise power in this type of relationship and unable to negotiate safe sex.
Young girls and women, whose families are unable to provide for them financially and cannot afford to pay their school or university fees, may seek out transactional relationships (Leach, 2002; Walker et al., 2004). Research in KwaZulu-Natal has shown that women, who are unemployed and financially dependent on men, choose boyfriends who can provide material gains, for example a woman in the study was reported as saying “One for rent, one for food, and one for clothes” (Walker et al., 2004, p.42). However women in slightly more secure economic positions may keep a boyfriend because he provides her with luxuries such as designer clothes or an expensive cell phone (Walker et al., 2004). Research conducted at the University of KwaZulu-Natal found that female students engage in transactional relationships in which they exchange sex for material gains (Phungula, 2007). Women generally earn less than men in South Africa and experience higher levels of unemployment than men (Vetten, 2000; Walker et al., 2004). Women are often economically dependent on men and are trapped in abusive relationships, in which they are unable to protect themselves from HIV/AIDS, because they do not have the power to negotiate safe sex (Vetten, 2000; Hendriksen et al., 2007). Poverty, gender inequalities and the power imbalances inherent in this type of relationship prevent women from implementing safe sex practices. The prevalence of transactional relationships in South Africa is symptomatic of the wider patriarchal society in which men exercise power and privilege over women.

Women are unlikely to insist on condom use when material gains are at stake and may also have multiple transactional relationships to supplement their income (Dunkle et al., 2004; Leach, 2002; Walker et al., 2004; Hendriksen et al., 2007). These two factors will increase their risk of
transactional relationships may enable the man to feel he has the right to abuse the woman and enables the woman to feel she has the right to be abused because she is receiving material gains. Women in this type of relationship are not in the position of power to insist on condom use and an insistence of condom use may be interpreted as a sign of unfaithfulness or disobedience by her partner, which could instigate abuse (Hendriksen et al., 2007; Walker et al., 2004). In some instances, young men become angry when their partners wish to use contraceptives and forbid condom use in a relationship because they feel it emasculates them (Wood & Jewkes, 1997).

Other contributing factors may put women in transactional relationships at further risk of HIV infection. Women are at higher risk of HIV transmission for several reasons. Biologically HIV is transmitted more easily from man to woman than woman to man (Human Rights Watch, 2001). Vaginal tearing may occur during acts of sexual violence and increases women’s chances of contracting STDS and HIV (Human Rights Watch, 2001). Women are also more at risk due to social factors such as prevailing gender-inequality and patriarchy in society and are more likely to be in vulnerable circumstances where they are unable to negotiate condom use.

2. 6 The Creation of a Rape Supportive Culture

South Africa has one of the highest rates of violence against women in the world, which serves to create a society in which violence against women is sustained (Human Rights Watch, 2001; Vetten, 2000). According to research in Gauteng, three in ten men thought that women who were raped asked for it and eight in ten young men believed that women were responsible for sexual violence (Human Rights Watch, 2001, p. 27). Recent research displays similar results
that victims of sexual violence are to blame (Population Council, 2004, as cited in Van Rensburg, 2007). The myth of the "willing victim" of gender-based violence only serves to further uphold the power relationships in a hetero-patriarchal society between men and women (Brown, 1995, p.105). Rape myths sustain a culture where gender-based violence is considered normal, prevalent and even erotic (Brown, 1995; Russell, 1984). Rape myths further ensure that victims blame themselves and that those victims that do report are exposed to insensitive and hostile treatment (Russell, 1984). Rape myths such as "in the majority of rapes, the victim was promiscuous or has a bad reputation" sustain victim blaming, which appears to be prevalent among South African men (Russell, 1984, p.139; Human Rights Watch, 2001).

Men in an African township in Cape Town were reported as explaining to their "girlfriend/s" that sex was the "purpose of love and that people in love must have sex as often as possible" (Wood & Jewkes, 1997, p. 42). Walker et al. (2004, p. 57) also reported similar results as many young men believe "love is synonymous with sex" and that "love means sexual access to girlfriends at all times. This insistence that sex is a requirement in a relationship, a nonnegotiable issue serves to create a rape supportive culture in which any resistance to this sexual requirement is met with force and abuse. Forced sex is seen as legitimate in the eyes of these men. The insistence on sexual access of women also undermines the safe sex practice of abstinence and the choices women make regarding their bodies. A CIET (2000) survey (as cited in Leach, 2002) performed in Johannesburg found that half of the men and women surveyed considered "forced sex" as rough sex and did not consider it as a form of violence or abuse.
Significant amounts of research seem to identify the existence of sexist ideology and patriarchal beliefs in South Africa, which sustain and generate violence against women.

The patriarchal beliefs, rape myths and gender-inequalities embedded in South African society support this culture of violence against women. South Africa’s high prevalence of sexual violence appears to be seated in South Africa’s violent history of racial oppression in which most South Africans during Apartheid were exposed to degradation and humiliation (Moffet, 2006; Vetten, 2000, Vogelman, 1990; Human Rights Watch, 2001). Vetten (2000) further argues that men commit these violent acts as a way of upholding particular gender-identities and maintaining their place in South African society. South Africa’s culture of violence, created during Apartheid, comprising of violent repression by the Apartheid government and the use of violence during the anti-apartheid struggle, has led to the belief that violence is a legitimate means of conflict resolution (Vetten, 2000). The development of this culture of violence may have contributed to the prevalence of gender-based violence in South Africa. The transition from an oppressive Apartheid government to a new democratic government which values human rights has created a gap which may be seen as contributing to the high incidence of violence against women.

Patriarchal beliefs appear to fuel gender-based violence in society. The existence of culturally embedded gender-inequalities in which women are confined to the home and are expected to fill their appropriate roles such as mother, caregiver and wife, only serve to highlight how women are treated as second class citizens in South Africa (Vetten, 2000). De Keseredy and Schwartz (1998, p.96) report that discourses that support the abuse of women consists of an
ideology which emphasizes the insistence of “women’s obedience, respect, loyalty, dependence, sexual access and sexual fidelity.” Any violation of this ideology invokes abuse. Violence against women can also be considered as a means to punish women for stepping out of their narrowly prescribed gendered roles (Vetten, 2000). The gender-inequalities embedded in South African society have contributed both to the rapid spread of HIV/AIDS and gender-based violence (Walker et al., 2004).

Brownmiller, as cited in Russell (1984) argues that men use their penis as a weapon to generate fear in women, to reaffirm their masculinity and maintain the patriarchal power relations in society. This reference to the penis may also refer to a man’s symbolic power within patriarchal society because he rapes a woman to reassert this power and privilege over women. By gaining dominance over a woman he is able to maintain his particular gender identity in society. However critics might argue that Brownmiller does not provide a sufficient argument of why men would want to terrorize women and just asserts this claim.

Russell (1984) further argues that from an early age men are taught to separate love and caring from sexual desire, resulting in women being regarded as sexual objects. Vogelman (1990) also identifies how the objectification of women allows perpetrators of gender-based violence to commit these violent acts as they divorce emotion from sex and their victims become dehumanised. The perception that women are objects and are the property of men leads to the dehumanisation of these women. This perception is often linked to contemporary understandings of lobola as some men interpret the cash payment to their wives family as a financial transaction- in which he was bought his wife (Vetten, 2000). This perception that a woman is a
The man may have the license to abuse his wife, because she belongs to him (Moffet, 2006; Vetten, 2000; Walker et al., 2004). The man may also believe that because he has ‘bought’ his wife he is entitled to decide whether or not they practice safe sex. This patriarchal discourse that women are considered the property of men only further sustains the prevalence of gender-based violence and HIV/AIDS in South Africa.

2.7 Forms of Gender-Based Violence

Various forms of gender-based violence such as sexual harassment, emotional or verbal abuse, partner abuse, rape and sexual assault will be discussed. Although research shows that women may also act as the perpetrators of gender-based violence, although this is not in the majority of cases, this text aims to focus on violence against women in which men are the perpetrators. South African society appears to create a culture which sustains and supports violence against women. This patriarchal society generates various forms of gender-based violence, which is sustained through gender inequalities, power imbalances in relationships, sexist ideology, rape myths and the vulnerable position of women. Gender-inequalities, violence and sexual coercion contribute to the spread of HIV/AIDS in South Africa as women in unequal and abusive relationships are unable to exercise the power necessary to implement safe sex practices (Walker et al., 2004; Vogelman, 1990; Russell, 1984; Wood & Jewkes, 1997; Vetten, 2000; Martin & Curtis, 2004).

2.7.1 Sexual Harassment

Sexual harassment consists of unwanted sexual advances such as touching, suggestive looks, sexually inappropriate comments, gestures and unwanted sexual propositions (Russell,
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The recent Promotion of Equality and Prevention of Unfair Discrimination Act of 2000 defines harassment as "unwanted conduct which is persistent or serious, demeans, humiliates or creates a hostile or intimidating environment or is calculated to induce submission and which is related to sex, gender or sexual orientation" (Vetten, 2000, p.51-52). Sexual harassment is seated in patriarchal power dynamics in which men try to assert their power over women by harassing them sexually.

De Keseredy and Schwartz (1998) argue that boys engage in the sexual harassment of girls from an early age, in which they learn from a young age to dehumanize women and portray an image of being sexually aggressive. Leach (2002) and the Human Rights Watch (2001) cite the prevalence of sexual harassment in South African schools by both teachers and boys. De Klerk et al., (2007) argue that sexual harassment is a problem amongst students at Rhodes University and is seated within a frame of patriarchy and gender inequalities inherent in South African society. Daniels’ (2002) research findings revealed that students at the University of Stellenbosch did not understand what behaviour constituted sexual harassment. These research findings are similar to other research which also highlights how sexual aggression is considered a common feature of male-female interaction, therefore making it difficult for women to label particular behaviours as violence (Daniels, 2002; Koss & Cleveland, 1997). The University of Cape Town set up a committee of enquiry into sexual harassment on campus and the findings revealed that 45% of female UCT students who participated in the study, experienced sexual harassment within one month of being at the University (Ramphele, Molteno, Simons & Sutherland, 1991). None of these women reported these incidents to the University. This finding is similar to research conducted at Rhodes University which found that students do not report incidents of gender-
Most research surrounding sexual harassment focuses on sexual harassment within the workplace, whilst this research aims to focus on how female residence students at UKZN are subjected to sexual harassment within their specific sphere. Gender-inequalities, sexist ideology, rape myths and patriarchal society serve to sustain sexual harassment because sexual harassment is a subtle everyday act in which women are placed lower than men (Vogelman, 1990; Russell, 1984, Schwartz, 1997, Brown, 1995). The same ideology that sustains partner abuse, rape and sexual assault serves to sustain sexual harassment in a society in which men feel it is appropriate to assert their power over women, often hurting them in the process.

2.7.2 Emotional or Verbal Abuse

Emotional or verbal abuse usually occurs within the context of an intimate or dating relationship in which the man may humiliate and psychologically abuse the woman through the use of insults, swearing, put-downs, threats of violence and accusations of infidelity (De Keseredy & Schwartz, 1998). Perpetrators of emotional abuse may try isolating their victim from their support network of friends and family. They may try monitor and control the activities of their victim, setting down ground rules such as Óno talking to menÓ or Óno going out without their partnerÓ. De Keseredy and Schwartz (1998) argue that a growing amount of research has shown that this emotional abuse can be equally or even more damaging to a woman than physical and sexual abuse. They further argue that students who have been exposed to emotional abuse experience poor academic performance and symptoms of depression.
De Keseredy and Schwartz (1998) quantitative research in a private high school in Canada found that the majority of respondents, both male and female, cited jealousy as the most important cause of emotional abuse. Jealousy, although believed by some as a sign of love, is often used as an excuse for abusive behaviour. Wood and Jewkes (1997) take this slightly further in their research, in which young black South African women describe in interviews how beating and physical abuse are signs that their partner loves them. Research shows that women in South Africa, who are suspected of cheating on their partners or flirting with other men, are often beaten and then raped by their partner (Human Rights Watch, 2001; Wood & Jewkes, 1997; Dunkle, et al., 2004; Leach, 2002; Walker et al., 2004). There appears to be a need for more South African qualitative research on emotional abuse in intimate relationships and the link between emotional and physical abuse.

2.7.3 Violence in Intimate Relationships/ Partner Abuse

Partner abuse in which the man will physically abuse the woman in an intimate relationship has been identified as highly prevalent in South Africa (Human Rights Watch, 2001; Wood & Jewkes, 1997; Dunkle, et al., 2004; Leach, 2002). A woman is killed every six days by her intimate male partner in South Africa and one in six women are regularly assaulted by their partner (Van Rensburg, 2007; Vetten, 2000). Women who are hit by someone they are intimate with and might even love, react differently to a singular physical assault by a stranger (Hooks, 1997). They may experience a deep sense of dislocation and disorientation, when trying to make sense of their experience. In severe cases of partner abuse women are reported as retaliating and killing their abusive partner, alternatively the abusive partner may kill the woman (Vetten, 2000).
Women with abusive partners are often unable to refuse sex or negotiate safe sex practices such as abstinence, monogamy, or the use of condoms (Vetten, 2000; Walker et al., 2004; Dunkle et al., 2004).

The sexual double standard common in South Africa, in which men have multiple sexual partners whilst women are expected to have one partner, places women at increased risk of HIV/AIDS infection as they do not have the power to negotiate monogamy in their relationship. The patriarchal belief that men should be allowed sexual access to their girlfriends or wives at all times also undermines the safe sex practice of abstinence and the autonomy of women (Vogelman, 1990; Russell, 1984; Wood & Jewkes, 1997; Vetten, 2000; Walker et al., 2004). Often women fear introducing condom use into a sexual relationship because men may see this as a ré admission of infidelity, which could lead to violence in the relationship (Hendriksen et al., 2007, p. 1246; Walker et al., 2004). Unprotected sex is also interpreted by some as a sign of love, intimacy and trust and many women may engage in unprotected sex to demonstrate these feelings to their partner (Walker et al., 2004). Women in abusive relationships lack the power and agency necessary to negotiate safe sex practices and as a result are exposed to serious health risks such as STDS and HIV/AIDS.

The Domestic Violence Act of 1998 defines domestic abuse as the following: physical abuse; sexual abuse; emotional, verbal and psychological abuse; economic abuse; intimidation; harassment; stalking; damage to property; entry into the home without the complainant's permission; and any other abusive, controlling behaviour (Vetten, 2000, p.51). This act is applicable to married women, partners who are living together and dating and intimate
relationships. This act covers a range of abuse, which is discussed under the various forms of gender-based violence in this text, however it makes it difficult to determine the prevalence of domestic violence in South Africa as this type of abuse is not reported as no crime entitled ‘domestic violence’ exists (Vetten, 2000).

2.7.4 Rape

2.7.4.1 Defining Rape

Rape has been legally delineated into two different forms in South Africa: statutory rape and forcible rape. Statutory rape law refers to ‘the man who engages in sexual intercourse with a female under the age of consent, even if she participates willingly’ (Vogelman, 1990, p.2). It is important to note that the age of sexual consent in South Africa is sixteen years old (The New Sexual Offences Act, 2007). Forcible rape was defined as consisting of ‘intentional unlawful sexual intercourse with a woman without her consent’, which comprised of the forcible insertion of the penis in the vagina (Vogelman, 1990, p.2). However the new Sexual Offences Act, passed by the national assembly on 22 May 2007, broadens the definition of rape to include forced anal or oral sex, irrespective of the gender of either the victim or the perpetrator, thus recognising male rape and widening the definition of sexual penetration to include inanimate objects or animal genitalia (Mattheyse, 2007). The preferred definition suggested by Vogelman (1990, p.4) ‘rape is any sexual intimacy forced on one person by another’ finally becomes applicable. The act also recognizes the dangers of rape and HIV infection. It is important to examine how the legal definition of rape has changed in South Africa and how certain acts committed prior to 2007 were considered as indecent assault but now under this legislation can be defined as rape.
Often women who have been raped are scared to report the incident due to several factors such as self-blame and lack of faith in social institutions such as police services (Russell, 1984; Vogelman, 1990; Dosekun, 2007). The National Institute for Crime Prevention and Rehabilitation (NICRO) estimated that only one in twenty rapes are reported in South Africa whilst the SAPS estimate that only one in thirty six rapes are reported (Vetten, 2000). The reliability of this claim is questionable as there is an absence of reliable statistics in this area and it is difficult to assess whether the amount of rapes have actually increased or more women are just reporting rapes (Vetten, 2000). It is also possible that awareness and activism surrounding violence against women has led to increased reporting of sexual violence. The underreporting of rapes is due to the victim’s fear that others will not believe her and the public unwillingness to believe women that report rape. There have been reports of members of the South African Police Force acting insensitively and harshly towards women who try report cases of rape (Vogelman, 1990). Research conducted in the USA reports that police believe that approximately eighty to ninety percent of rapes reported are false; however similar research has not been conducted in South Africa (Vogelman, 1990). It is important to note at this point that according to South African statistics it is estimated that less than two percent of reported rapes in South Africa are false (What the stats say: What’s actually happening in our country, 2009).

If a woman chooses to continue with her complaint she must submit to a medical exam by the district surgeon which is often humiliating and uncomfortable as the woman is prohibited from washing the semen and blood from her body (Vogelman, 1990). Levett, as cited in Vogelman, (1990), reports that many district surgeons in South Africa express the belief that
Women complain of rape falsely, further subjecting the rape victim to more humiliation and insensitivity. Police have also been reported for handing rape cases insensitively. Pendry (1998) suggests that police services, district surgeons and social services undergo training which teaches them how to deal sensitively with rape survivors. The insensitive and hostile treatment of rape victims, who report rape, is symptomatic of the sexist ideology, rape myths, and gender inequalities existent in South Africa’s patriarchal society. Examples of how defence counsel tries to tarnish the image of the rape victims through insinuations of sexual promiscuity and immorality are common in South African rape cases and serve as a deterrent to other rape victims who want to file charges (Vogelman, 1990). The social stigma attached to the label of rape victim combined with the hostile and insensitive nature of police questioning, the medical examination and cross examination in the court case, ensures that only one in twenty rapes in South Africa are reported (Vogelman, 1990). Since vast numbers of rapes are underreported and difficult to prove in court, many men are likely to rape again (Russell, 1984, Vogelman, 1990). This becomes a scary reality for women who have to constantly fear the threat of rape as this fear serves to reshape their lives and behaviour (Brown, 1995; Schwartz, 1997). The fear of being raped becomes a continuing background noise within a woman’s life in which she has to daily reintegrate this persistent fear with her sense of self.

The risk of HIV transmission during rape is high however rape survivors can now access post-exposure prophylaxis (PEP) within seventy two hours of the incident (Human Rights Watch, 2001; Mattheyes, 2007). Post-exposure prophylaxis (PEP) comprises of anti-retroviral treatment (ARVS) and a counselling regime. The Sexual Offences Bill, passed in 2007 allows for the provision of compulsory HIV testing for alleged rape offenders (Mattheyes, 2007). However
whether a rape victim is able to access these drugs or ensure the compulsory testing of their alleged offender is another story and often not a reality for most women (Walker et al., 2004; Pendry, 1998). However these provisions in the bill have highlighted the government’s acknowledgement of the relationship between sexual violence and HIV infection.

2.7.4.3 Date Rape and Acquaintance Rape

Gender-based violence does not commonly occur between strangers but rather between individuals who have some degree of previous consensual intimacy (Vogelman, 1990; Vetten, 1997; Schwartz, 1997; Russell, 1984). More than forty percent of perpetrators of gender-based violence are known to their victims, which casts the ‘normal man’ the man you’re friends with, the man you’re dating, into the role of rapist (What the stats say: What’s actually happening in our country, 2009). Rape and sexual assault on campus are often committed by other students, men who know the victim quite well because they often attend similar classes, see each other around campus and have friends in common (De Keseredy & Schwartz, 1998). De Keseredy and Schwartz (1998) further argue that the prevalence of gender-based violence on University campuses is due to Universities lack of recognition for women and the promotion of gender inequality among the student body. De Klerk et al. (2007) argues that at Rhodes University the under-representation of women at higher levels of authority at the University, results in women’s issues not being addressed, seriously further side-tracking the promotion of gender equity at the University. Most comprehensive research on gender-based violence at University Campuses has been conducted in North American Universities. There has been scant research on gender-based violence and safe sex practices across all South African Universities, which creates the space for more definitive research in this area.
When a woman is raped by a man she is dating she often feels, and is seen, as partially and wholly responsible for the event (Russell, 1984; Pitts & Schwartz, 1997). Victim blaming is common in South Africa and is a rape myth which diverts the responsibility away from the perpetrator and onto the victim (Human Rights Watch, 2001; Population Council, 2004, as cited in Van Rensburg, 2007). Research shows that in South Africa many young men believe coercion is an acceptable part of sexual conduct (Walker et al., 2004). Sexual violence that does not fit the stranger rape script is often not considered as rape by men (Frazier & Seales, 1997; Human Rights Watch, 2001; Leach, 2002). Men who accept rape myths are more likely to blame a rape victim and think that she must have done something to deserve the rape. However women may also blame rape victims because it makes them feel safe from the danger of rape and it helps them to continue to believe that if they just change their behaviour then they can avoid rape (Vogelman, 1990; Frazier & Seales, 1997). Dosekun’s (2007) research conducted at UCT shows that women who have never been victims of rape tend to distance rape from ever occurring within their immediate social worlds. For women who have to continuously cope with the background noise of the fear and anticipation of rape, the acceptance of rape myths may help them ease their fear (Brown, 1995).

2.7.4.4 The Role of Alcohol Consumption and Date Rape Drugs

The lifestyle of university students is known to be characterised by a heavy drinking culture, highlighting the role of alcohol consumption, which is important as drunken women become easy targets for sexual assault and rape as they are less able to resist sexual advances due to their condition. There appears to be an association between sexual violence among university
Students and drug and alcohol use (De Keseredy & Schwartz, 1998; Crawford, O'Dougherty, Wright & Birchmeier, 2008; Koss & Cleveland, 1997; Frinter & Rubinson, 1993; Phungula, 2007). Crawford et al (2008) further argues that 50% of sexual assaults and rape among university students are linked to heavy alcohol consumption. Koss and Cleveland (1997) argue that alcohol consumption by the victim, perpetrator or both increases the risk of gender-based violence. Alcohol is often used by men as a strategy to gain sexual access to women (Koss & Cleveland, 1997; De Keseredy & Schwartz, 1998; Phungula, 2007). Two thirds of men in the research reported that getting a woman drunk was considered an easy way to have sexual intercourse with her (Koss & Cleveland, 1997). Phungula’s (2007) findings revealed that it is during parties where there is a high consumption of alcohol that female students are most at risk of sexual violence. The relationship between sexual coercion and alcohol use is a disturbing finding for the University community as student life is often marked by a heavy drinking culture. There needs to be further research into the exact nature of this relationship and what measures South African universities can use to combat this relationship.

The use of date rape drugs by perpetrators is an increasing trend in South Africa, in which a drug is slipped into the victim’s drink, usually at parties, clubs or bars (Gounden, 2007). Common date rape drugs are Rohypnol, gamma hydroxybutyrate (GHB), and Ketamine, although new date rape drugs are always being developed and illegally distributed (Crawford, 2008; Girard & Senn, 2008). The drug usually slows down the psycho-motor functioning of a woman and may even cause memory black outs in which hours of the night are absent from her memory. The perpetrator then rapes the woman while she is under the influence of the drug. She is less able to resist the advances of the man and may not remember the incident due to the
effects of the drug. These drugs are easy to administer and may cause the following symptoms:
dizziness, loss of motor coordination, loss of consciousness, impaired judgment, nausea, amnesia
and visual disturbances (Gounden, 2007; Crawford et al., 2008; Girard & Senn, 2008). However
research shows that many victims of date rape drugs blame these symptoms on their alcohol
intake and not on the possibility that they ingested a date rape drug (Crawford et al., 2008;
Girard & Senn, 2008). After the incident the woman may experience flashbacks, become
violently ill and have a strange unsettling feeling that something is not right. Most of the research
on drug facilitated rape or sexual assault, which is a new phenomenon, is from North America.
Although there has been increasing media reports on drug facilitated rape or sexual assault in
South Africa, there has been very little formal research, if any in this area.

2.7.4.5 Gang Rape

Gang rape refers to a situation in which a group of men take turns raping one woman. One
quarter of all rapes reported are committed by gangs involving two to ten men (Vetten, 1997). In
this situation all the men are usually supportive of raping the victim or too afraid to contradict
the others for fear of rejection by the group. Gang rape is often committed to encourage group
bonding and demonstrate masculinity within the group (Vogelman, 1990).

Jack-rollers a gang originally from Soweto, which was formed around 1976, after the
Soweto Riots, was involved in abduction rape in which they raped young girls or women still at
school, with the intention of making them pregnant and ending their education (Vetten, 2000).
The women targeted were in better social circumstances then the members of the gang and were
raped as a deliberate attempt to keep them within their designated place and to destroy their
opportunities for a better future (Vetten, 2000). The Human Rights Watch (2001, p.28) report that eleven percent of fifteen year old male youth thought ‘jack-rolling’, commonly called recreational rape, was ‘cool’. This particular type of gang rape was formed out of the political turmoil at the time in which these men had no perceived future or opportunities. The South African Rapist Association (SARA) is another example of organised gang rape in which men raped women to punish them for not acting in ways which the members of SARA thought were appropriate and to express their frustration at the current government (Vetten, 2000). Gang rape appears to be embedded within the violent history of South Africa.

Another common theme is that the act of gang rape is seen as a way of punishing a woman for inappropriate behaviour such as having multiple sexual partners and not behaving the way men in her community deem acceptable. A ‘steam-line’ (istimela), is a type of gang rape, which is organised and carried out at the boyfriend’s home to punish the woman for her inappropriate behaviour (Walker et al., 2004, p. 28). This is common to other research which shows that in South Africa men believe they have the right to punish or discipline their girlfriends for acting in ways they consider inappropriate (Human Rights Watch, 2001; Wood & Jewkes, 1997; Dunkle, et al., 2004; Leach, 2002).

2.7.4. 6 Marital Rape

In marriage, a man is believed to have sexual access to his wife at all times (Vogelman, 1990). Research conducted in Western Cape found that out of the eighty-three women in the sample, two percent of the group had experienced marital rape (Vetten, 2000, p. 51). Although within the context of this study this appears to be a small percentage, if this study is reflective of
the wider population then a significant number of women have been raped by their husbands. However although rape is a crime in South Africa, marital rape is especially difficult to prove in court and many South Africans believe that the term ‘marital rape’ is a contradiction in itself as many believe that a man cannot rape his wife.

2.8 Effects of Gender-Based Violence

Women who have been victims of gender-based violence exhibit a broad spectrum of symptoms. They are more likely to develop depressive symptoms such as suicidal ideation, loss of pleasure or interest in usual activities, disturbance of appetite, sleep disturbance, loss of energy and feelings of worthlessness and guilt (Hamilton & Jensvold, 1992; Alloy, Riskond & Manos, 2005; Koss & Cleveland, 1997). These women may also experience heightened sensitivity, agitation, restlessness and even paranoid like behaviour as they are constantly anticipating their next attack (Root, 1992). Victims of sexual violence often blame themselves and try to minimise their experience by imagining how it could be worse (Koss & Cleveland, 1997; Pitts & Schwartz, 1997; Russell, 1984). They may feel shame, guilt and may experience physical symptoms such as nausea, stomach aches, headaches and vaginal pain (James & Gilliland, 2001). Victims of sexual violence may also experience a lowered quality of relationships with men and sexual satisfaction (Koss & Cleveland, 1997). The academic performance of female students exposed to gender-based violence may also be adversely affected (De Keseredy & Schwartz, 1998; Frinter & Rubinson, 1993). Research reports that 37% of female students who have experienced gender-based violence will experience a decrease in their academic performance (Frinter & Rubinson, 1993). The range of symptoms and implications as a result of gender-based violence, only further signal the urgency to address this problem.
2.9 HIV/AIDS in South Africa

Poverty and disease are widespread in South Africa and are major factors in the rapid spread of the HIV/AIDS epidemic (Walker et al., 2004). The gender-inequalities, sexist ideology, the fusion of sex and aggression, rape myths and the dehumanisation of women by reducing them to objects, have further contributed to the spread of HIV/AIDS and gender-based violence in South Africa. KwaZulu-Natal is the province with the highest rate of HIV/AIDS infection in South Africa. Vetten (2000) argues that in certain parts of KwaZulu-Natal a positive HIV diagnosis is treated as both a death sentence and a passport to sexual license. The desire to spread HIV/AIDS to ensure that one does not die alone is common in South Africa and may be a possible factor in the prevalence of sexual violence in South Africa (Vetten, 2000). Another factor contributing to the rapid spread of HIV/AIDS is the social stigma attached to the epidemic in which people would rather ignore the disease then acknowledge its existence. The tendency to deny the presence of HIV/AIDS within your own community, allows the disease to spread as the importance of safe sex practices become diminished (Simabyi et al., 2005; Eaton, Flisher & Aaro, 2003; Van Rensburg, 2007). Witchcraft is even considered a popular explanation for the origins and symptoms of HIV/AIDS, removing the responsibility away from safe sex practices to fate (Walker et al., 2004). For some men in South Africa the exchange of fluids during sexual intercourse is linked to strong cultural beliefs about maintaining health, which deters men from using condoms as it is seen as culturally taboo (Walker et al., 2004).

There are various myths and beliefs in South Africa which serve to worsen the situation of HIV/AIDS. The dangerous practice of dry sex in South Africa is based on the belief that the
Vaginal lubrication that women experience when they are sexually aroused can be interpreted as a sign of promiscuity (Vetten, 2000; Simbayi et al., 2005). Women as a result, attempt to dry out their vaginas with methylated spirits, vinegar, sniff, zambuk cream and alum powder (Vetten, 2000, p.59). These products may lead to vaginal tearing, which poses significant health risks as they increase the risk of STDS and HIV/AIDS. The myth that having sex with a virgin can cure HIV/AIDS is prevalent in South Africa and only further seeks to spread the HIV/AIDS virus (Simbayi et al., 2005; Human Rights Watch, 2001). Simbayi et al. (2005) conducted a quantitative study among youth in an African township in Cape Town, and found that one in five men believed that washing themselves after sex can reduce the risk of HIV. Sexual double standards in which men can have multiple sexual partners whilst women may only maintain one partner further exasperates the spread of HIV/AIDS, as these men may have unprotected sex with many women, contract the virus and then infect their primary partner (Vetten, 2000). Sexual double standards in relationships are demonstrative of the gender-inequalities in South Africa's patriarchal society that sustain the spread of HIV/AIDS. Myths and beliefs surrounding sexual double standards, the virgin cure, washing after sex, dry sex etc. further contribute to the spread of HIV/AIDS in South Africa.

Social inequalities in South Africa have only worsened the situation of HIV/AIDS because those who are most in need of medical treatment for HIV/AIDS receive the least as only nineteen percent of the population are on medical aid and the public health facilities are understaffed, under resourced and ill equipped to deal with this epidemic (Walker et al., 2004). It is also difficult to obtain medicine for opportunistic infections from these state facilities.
To gain a greater understanding of the HIV/AIDS epidemic it is important to note that sex is about power dynamics: who initiates sex and who decides whether or not to use a condom (Walker et al., 2004). Women in abusive and controlling relationships are more likely HIV positive than other women because they lack the agency necessary to implement safe sex practices (Martin & Curtis, 2004; Dunkle et al., 2004; Vetten, 2000; Walker et al., 2004).

According to Eaton et al. (2003, p.151), “over 90% of young South Africans in the 1990’s knew that AIDS is a fatal, sexually transmitted disease.” but many South Africans have unrealistically low perceptions of risk and do not engage in safe sex practices. Research further reveals the irregularity of condom-use among sexually-active South African youth, including a “50-60%” statistic for the complete absence of condom-use among these youth (Hendriksen et al., 2007; Eaton et al., 2003).

Through the exploration of myths and incorrect beliefs regarding HIV/AIDS, this statistic becomes more understandable. Many adolescents also believe that condoms lead to reduced sexual pleasure; feel awkward introducing condoms in a sexual encounter, believe “that too many condoms are required for many rounds of sex” and fear that condoms will break or slip and feel awkward buying condoms, although in South Africa many health clinics provide condoms free of charge (Eaton et al., 2003, p.158). Many young men state that they prefer sex “skin on skin” and that “condoms waste sperm” and display incorrect beliefs regarding condoms including the “belief that condoms can disappear into women and cause them serious injury” (Eaton et al., 2003, p.157-158, Walker et al., 2004). These beliefs and the gender-inequalities in society, which prevent women from exercising the power and agency necessary to negotiate condom use, hinder safe sex practices, which worsens the HIV/AIDS epidemic in South Africa.
2.10 Conclusion

The HIV/AIDS epidemic is embedded within the power relationships that exist between men and women. Gender-inequalities and the sexist ideology governing South Africa’s patriarchal society only further sustain the already growing culture of violence against women in South Africa. The HIV/AIDS epidemic needs to be understood within the context of violence against women and the power inequalities in sexual relationships, which prevent women from implementing safe sex practices. Significant research has highlighted the interrelationship between HIV/AIDS and gender-based violence and cited this relationship as an area for further research.

Through the discussion of various issues related to gender-based violence, such as the fear every woman experiences regarding gender-based violence, transactional relationships and rape-supportive cultures, the context in which gender-based violence flourishes is established. The various forms of gender-based violence were explored and the power dynamics in relationships discussed in relation to gender-based violence, showed how women often lack the agency necessary to negotiate safe sex.

The large amount of quantitative research surrounding gender-based violence and HIV/AIDS has created the space for qualitative research to examine this relationship. There has also been insufficient research in the area of gender-based violence at South African Universities, despite the fact that young women are at high risk of gender-based violence and HIV infection. There has also been scant research on how women use language to construct their
understanding of gender-based violence and safe sex. The emergence of gender-based violence as a current problem at the University of KwaZulu-Natal residences has highlighted the need to explore how female residence students at UKZN use language to construct their understanding of HIV/AIDS and gender-based violence. Since many ideas surrounding gender-based violence and HIV/AIDS are socially constructed, as shown throughout this text in the discussion of various myths and incorrect beliefs surrounding gender-based violence and HIV/AIDS, it is appropriate to explore the way women use language to construct these concepts in order to deconstruct what is typically seen as normal or taken-for-granted knowledge.
CHAPTER THREE

THEORETICAL FRAMEWORK

3.1 Introduction

This chapter outlines the theoretical underpinnings of the research, namely social constructionist theory, feminist theory, theory related to safe sex and trauma theory. Through examining social constructionist theory and the use of discourses we will be able to deconstruct preconceived perceptions and beliefs surrounding gender-based violence and safe sex practices. Discussion around feminist theory and theory related to safe sex and trauma theory, will be facilitated to expand our understanding of how female residence students understand the issues of gender-based violence and safe sex practices. The overarching theory of social constructionism will frame these discussions.

3.2 Introducing Social Constructionism

A social constructionist approach was used to understand how female UKZN residence students’ talk about gender-based violence and safe sex practices, reveals how they construct their understanding and experience of these issues. The theoretical framework of social constructionism underlying this research, determined the data collection technique of relatively unstructured interviews and the data analysis process of discourse analysis. Social constructionism adopts a critical stance towards our conventional understanding of the world and argues that our understanding of the world is both culturally and historically relative (Burr, 1995). Burr (1995) further argues that knowledge is constructed through social processes. It is
Social constructionism invites us to examine the world through a critical lens, challenging our conventional understanding of the world through closer examination of everyday concepts that are not questioned, such as gender (Burr, 1995). Gender may appear to be a concrete concept, however many ideas surrounding what defines a man or woman have changed over history and time. In the past it was seen as inappropriate for women to be in the workplace as their place was in the home, however in today’s society women are expected to ‘have it all’ by fulfilling multiple roles such as wives, mothers, caregivers and career-women. Although this example can be seen as specifically Western comparisons can be drawn between traditional perceptions of women in African culture and changing modern perceptions that are occurring in South Africa. In the past or within traditional African culture a woman was expected to engage in rural agricultural labour, bear children, cook and clean, however perceptions are changing and African women are migrating to the urban areas, pursuing careers and opting to have children later. These shifts in understanding demonstrate how our understanding of concepts can change according to particular cultures and periods of history (Burr, 1995). Knowledge is both historically and culturally relative. It is through people’s everyday social interactions and the medium of language through which they are expressed that knowledge is constructed (Burr, 1995).

The social constructionist approach of discourse analysis emphasises the importance of language and how language constructs individuals’ understandings about the world. Language is
constantly changing and varies in meaning (Burr, 1995, p.31). It is through language that we construct our understandings of the world and are constructed by these understandings. It is important to note that people do not intentionally use language to construct their understandings of the world; this process occurs unintentionally whenever someone speaks. Language becomes the place where identities are built, maintained and challenged (Burr, 1995, p. 43). It is through language that discourses operate. Research operating within a social constructionist framework focuses on the discourses people use in their interaction with others. A discourse refers to a set of meanings, metaphors, representations, images, stories, statements and so on that in some way together produce a particular version of events (Burr, 1995, p.48).

Burr (1995, p.53) argues that a multitude of discourses are constantly at work constructing and producing our identity. The discourse of submissive female sexuality may construct women as sexually passive and disinterested in sex. Within this discourse women cannot appear to enjoy sex as sex is only seen as a means for securing love. Having multiple partners is not surprisingly deemed unacceptable within this discourse. Women are chastised for any appearance of sexual desire or sexual exploration. Negative terms such as slut or whore are used to refer to women who have multiple sexual partners. These terms have negative implications for the identity of the women, however a man who has had multiple sexual partners enjoys terms with positive connotations such as stud or playboy. The discourse of submissive female sexuality is tied to social structures and practices, and masks the underlying gender-inequalities in patriarchal society. Through examining discourses we are able to see things that are not really there and once an object has been elaborated in a discourse it is difficult not to refer to it as if it were real (Parker, 1992, p.5).
The discourse of submissive female sexuality operates to legitimise the views of the
dominant group in society by making these views appear to be widely accepted and taken-for-
granted knowledge. Foucault (1976, p.86, as cited in Burr, 1995, p.71) states that power is
tolerable only on condition that it masks a substantial part of itself. Its success is proportional to
its ability to hide its own mechanisms. Discourses disguise the power dynamics which underlie
society. Discourses are thus implicated within the structure of institutions, reinforcing the power
of institutions (Willig, 1999). Through examining discourses we are able to highlight the ways in
which different versions of reality are constructed through language (Willig, 1999).

Another discourse, relevant to this research is the “male sexual drive discourse” (Holloway,
1981, 1984, as cited in Burr, 1995). This discourse constructs men as possessing a powerful
biological male sex drive, which cannot be ignored and must be satisfied. Men are considered to
‘need’ sex and are therefore considered not entirely to blame for their subsequent actions to
satisfy this ‘need’. A rape victim, who was provocatively dressed at the time of the attack, may
be considered within this discourse to have ‘triggered’ her attack (Burr, 1995). Blame is shifted
to the victim for exciting the powerful and uncontrollable male sex drive. This discourse upholds
the gender-inequalities in a patriarchal society which sustains gender-based violence. Discourse
analysis serves to deconstruct, question and challenge dominant constructions operating in
society, such as gender and the male sex drive (Willig, 1998). Willig (1998, p.94) argues that by
analysing these discourses we achieve a ‘liberatory effect’ in which we are able to identify
alternatives to what is and make recommendations for improved change. Through analysing the
Discursive Constructions surrounding gender-based violence and safe sex practices, we were able to identify alternatives to the existing discourses and create social transformation.

It is important to explore how the language that female UKZN residence students use, inadvertently constructs their understanding of gender-based violence and safe sex practices. Since many beliefs and perceptions surrounding gender-based violence and HIV/AIDS are socially constructed it is appropriate to explore the way in which people use language to construct these concepts in order to deconstruct what is typically seen as normal or taken-for-granted knowledge.

3.3 Feminist Theory: Constructing Gender

Through the lens of social constructionist theory and discourse analysis we are able to deconstruct particular discourses which serve to legitimise, rationalise and normalise gender-inequalities in society. Discourses are implicated within social institutions and practices (Willig, 1999). They play out in the most intimate contexts, the home, family unit, romantic relationships and in the workplace. Discourses pervade both the public and private spheres of life. It is in this way that the ‘personal is political’ (Hooks, 1986, p.24). For example, society supports patriarchy in a number of ways. One is through the popular dissemination of the discourse of romantic love (Burr, 1995; Walby, 1994).

Romantic love is depicted as the foundation for sexual relationships, marriage and family, in which women care for the children and engage in domestic housework. The romantic notion of ‘falling in love’ popularised by film, television and music ensures that women are part of
specific social practices and institutions such as marriage and the family unit, in which women provide unpaid domestic services to men (Burr, 1995; Walby, 1994). Women are expected to bear children, raise them and engage in domestic housework. These are the duties and expectations of a married woman in love. This allows men to fulfil their roles in the workplace more freely as they are not expected to share the workload of these duties. The majority of women in the world are economically dependent on their male family members and male sex partners (Wilton, 1997). This places women in an economically inferior position to men, weaving gender-inequality into the fabric of everyday life. Women’s dependency and subordination to men is naturalised by society through religious doctrine and traditional myths which argue that a woman’s position is naturally and rightfully inferior to men (Wilton, 1997, p.29). Through exploring the discourse of romantic love we are able to see how patriarchy could possibly operate within our own lives. This discourse can be seen as disguising the power dynamics of patriarchy and gender-inequality through the mechanism of romantic love. This mechanism is seated in the social institutions of marriage and family. It is important to deconstruct what appears as taken-for-granted knowledge to identify the underlying power dynamics that exist in our daily lives and how we are affected by these dynamics. It is only through the awareness of these power dynamics that the empowerment of women can take place.

However some may consider this feminist analysis as extremist and even paranoid as it can be seen as negating the agency of women. One must be careful that we do not contribute to a specific construction of “woman-as-victim-of-patriarchy” which hinders the overall goal of empowerment (Wilton, 1997, p.9). Constructing women as the frail, weak, vulnerable victims of patriarchy only reinforces patriarchy’s discursively constituted idea of women as powerless and
It is important to emphasise the agency of women and the role they play in their decision-making process especially with regard to relationships and sexual encounters. There needs to be a shift from casting women as the sole powerless victims of patriarchy as this only facilitates the further oppression of women, to creating solutions for change and empowerment.

The discourse of romantic love is also linked to constructions of trust within a relationship. A woman in love is expected to trust her partner and this demonstration of trust is often depicted by the practice of unprotected sex. Wilton (1997, p.50) argues that this romantization of unprotected sex was inevitable because the safe sex education disseminated to the public depicts HIV/AIDS as a punishment for ‘sexual deviance’ or ‘morally repugnant behaviour’ such as homosexuality, promiscuity, sex-outside marriage and prostitution. Condom use has become associated with this ‘sexually deviant behaviour’ and becomes characterised by deviance and distrust. Heterosexual couples, who believe that their romantic relationship is not deviant or immoral, will avoid condom use as a way of demonstrating trust and intimacy within their relationship (Wilton, 1997). This is demonstrated in research in which both men and women argue that introducing condom use into their relationships would signal distrust in their partner and may even imply infidelity (Willig, 1999; Hoosen & Collins, 2004). Speaking about issues of sexual safety within a romantic relationship may cause conflict and is as a result usually avoided within romantic relationships (Willig, 1999). Silence surrounding sexual safety in relationships further increases an individual’s risk of HIV infection.

3.4 Theorizing HIV/AIDS: Negotiating sexual encounters
A woman’s positioning in society can significantly alter how she responds to HIV infection. Wilton (1997, p.14) argues that "The institutions and practices of patriarchy significantly impede women’s abilities to avoid or to live well with HIV infection." Factors such as class, age, race, sex, nationality and disability shape an individual’s social construction of HIV/AIDS and the individual’s ability to protect themselves from HIV infection (Wilton, 1997). However again we must not fall into the trap of reinforcing the "woman-as-the-victim-of-patriarchy" and negate the agency of women in their sexual encounters, but just account for the social factors that could impede a woman’s ability to negotiate safe sex.

"Sex" itself carries meanings which are associated with social constructions of masculinity and femininity (Wilton, 1997). Jackson (1998, as cited in Wilton, 1997, p.28) argues that "sex is something done by men to women." The "male sex drive discourse" constructs female sexuality as passive and male sexuality as aggressive and uncontrollable. Within the terms of this discourse sex is something men do to women and not vice versa, men are capable of initiating and forcing sex, despite non-consent (Holloway, 1981, 1984, as cited in Dosekun, 2007). Hegemonic discourses place women as vulnerable to gender-based violence because of their gender, creating a sense of fear in every woman. When talking about sex one talks about what men do to women, which implies that sex, heterosexuality and thus power relationships between men and women go hand in hand. Gender-inequalities, patriarchy and power imbalances are attached to how sex is discursively constituted. This highlights the difficulties women experience in the negotiation of safe sex.
Women are also more at risk of HIV infection than men because they are more biologically predisposed to this infection. The social consequences of patriarchal power relations also hinder women from negotiating safe sex practices (Wilton, 1997). Women battle for safe sex in their intimate relationships with men and it is this private domain that feminists identify as the most dangerous place for women (Wilton, 1997). Women are not typically raped by strangers in dark alleys. They are more commonly assaulted by men they know and have some degree of previous consensual intimacy with (Vetten, 1997; Vogelman, 1990). It is important to deconstruct this stranger-rape myth and deconstruct how we would typically think about gender-based violence. Forty-two percent of women who are raped know their perpetrator and most rapes take place in the perpetrator’s home (Vetten, 1997). Women are placed in the position where they are expected to maintain a successful intimate relationship, avoid becoming victims of gender-based violence, whilst simultaneously ensuring that they are implementing safe sex practices to avoid HIV infection.

Negotiating love in an era where gender-based violence and HIV/AIDS is prevalent, presents a significant challenge to women today. Wilton (1997) argues that disease and women are similar as they are both devalued and perceived as undesirable, it is in this way that disease such as HIV/AIDS is feminised. Patton (1994, as cited in Wilton, 1997, p.69) states that “When women are not vaginas waiting to infect men, they are uteruses, waiting to infect foetuses.” If HIV/AIDS is considered feminised then this has serious implications for how women protect themselves against the virus.
Wilton (1997) argues that condom use threatens the security of masculine identity because condom use is seen as feminising to men. Condom use is seen as feminising because agreeing to use a condom is often associated with caretaking which is a stereotypically feminine activity. The man is putting the woman’s needs before his own. He is demonstrating a degree of control in his sexual behaviour which contradicts the male sex drive discourse which stipulates that the male sex drive is biologically powerful and uncontrollable (Wilton, 1997). Performing an action such as condom use which contradicts this discourse, will threaten his masculine identity. Risk taking is also commonly associated with masculinity and engaging in safe sex behaviour places this identity at risk (Wilton, 1997). The argument that asserts that men avoid using condoms because this is an attack on their masculine identity is compelling, however one can also argue why men would not choose to protect themselves from HIV infection by using condoms themselves.

3.5 Identifying Trauma

Trauma according to the DSM III was defined as “an event outside the human range of experience” however if we assume that the University of KwaZulu-Natal follows international trends than as many as 2000 UKZN students are being sexually assaulted annually (Brown, 1995, p.100; UKZN Gender-based Violence Review, 2007, p.4). This experience of gender-based violence is certainly not out of the range of female UKZN students’ normal experiences. However this definition of trauma has been criticised for being vague, inaccurate and unreliable and the current DSM IV defines trauma as “The person experienced, witnessed or was confronted with an event or events that involved actual or threatened death or serious injury or a threat to the physical integrity of self or others.” (Spitzer, First & Wakefield, 2007, p.235).
However this new definition of trauma still doesn’t account for what is meant by the term ‘experienced’ (Spitzer et al., 2007). Does this refer to an indirect experience such as hearing about stories of rape in University residence or a direct experience of such an event? There appears to be a need for a definition of trauma which accounts for the effects of both direct and indirect experiences of trauma.

Living in a society that tolerates violence against women and devalues the experiences of women exposes women to continuing anxiety and trauma. Women are often accused of overreacting when exposed to sexual harassment, unfair treatment and indecent assault because the only form of trauma deemed fit to be labelled as ‘real trauma’ appears to be rape (Brown, 1995). The statement ‘Well, she wasn’t raped, was she?’ is a common response, when women try question these experiences (Brown, 1995). It is used by those responding to the situation and those experiencing it to try to explain away the fear and trauma that has begun to creep into their daily lives. The face of trauma begins to change as it moves from a singular event, to a continuous, ongoing experience that features in the daily life of the individual.

It is out of this line of thinking that Root (1992) developed the term ‘insidious trauma’. She argues that insidious trauma is most commonly experienced by individuals of a low social status, who are different from the powerful dominant groups in society. This difference and low social status is attributed to intrinsic physical characteristics such as gender, race, physical ability or sexual orientation (Root, 1992). For example, women in a patriarchal society would be exposed to continuous insidious trauma, because of their low social status that patriarchal society attributes to their gender. An African American woman would be considered a member of
would be exposed to racial and sexual exclusions by the dominant groups in her society (Commas-Diaz, 1996). Her identity as an African American woman in the Western world would expose her to continuous oppression and victimisation. Similarly an African female University student in South Africa would also be exposed to continuous oppression and victimisation as she is exposed to sexual exclusion because of her status as a woman in a country where gender-based violence is prevalent. She may also face class exclusion as her status as a student may limit her economic means. Her limited economic means may also affect her ability to determine the terms of her sexual encounters.

It is important to recognise these “interlocking systems of domination—sex, race and class” to understand the complex female experience and the nature of its relationship with power and domination (Hooks, 1986, p.21). These systems of domination will determine the extent to which a woman is dominated and oppressed within her culture. Hooks (1986, p.23) argues that “sex, race and class” are factors that together determine the social construction of femaleness. It is important to avoid constructing a simplistic model of patriarchy which ignores race, class, sexual identity, nationality and other oppressions, because then we fail to understand the complex experience of the oppression of women (Wilton, 1997, p.14).

Brown (1995, p.107) identifies “insidious trauma” among women who are living in a culture where gender-based violence is both prevalent and considered normal and even erotic by men. This “insidious trauma” affects women who have not necessarily been a victim of gender-based violence because the fear and anticipation surrounding gender-based violence creates this trauma. Women are affected by living in a society where violence against women is prevalent.
Women to trauma even though they are not necessarily direct victims of violence they experience the fear of trauma and anticipation that they could be. The constant fear and threat of trauma can become like a continuous background noise in the lives of these women (Brown, 1995).

Herman, (as cited in Miller, 1997, p.150) argues that women live their lives according to a ‘rape schedule’ in which their behaviour is constantly shaped by the fear of being raped. Women’s lives are structured around their personal safety, in which they build precautionary strategies to protect themselves against gender-based violence (Stanko & Radford, 1997). Women’s behaviours and decisions are then considered automatic measures implemented to prevent potential sexual violence. Stanko (1996) argues that women may change the way they dress to avoid unwanted sexual comments or a battered wife may wear the dress her husband likes and cook him the food he wants to avoid potential abuse. She further argues that women’s anxieties around the potential dangers of heterosexual relationships have become part of the daily lives of women, which they factor into every encounter. Every encounter for a woman is wrought with potentialities for gender-based violence, which she is expected to defend herself from. Violence against women is part of the backdrop of all women’s lives and is not just the experience of a minority (Stanko & Radford, 1997). Women’s daily activities and interactions are shaped and constrained by the fear of sexual violence. South Africa experiences some of the highest rates of sexual violence in the world and the implications of trauma for the women living in this society are inevitable (Human Rights Watch, 2001; Vetten, 2000). Since every woman is exposed to ‘insidious trauma’ and lives according to a ‘rape schedule’ the women sampled in
When an individual is exposed to constant insidious trauma such as constantly dealing with the fear and threat of racism, sexism or homophobia this accumulation of experience may result in fluctuation of survival behaviours, heightened sensitivity, paranoid-like behaviour and hostility (Root, 1992). Brown (1995) argues that women living in culture where there is a high base rate of sexual violence are exposed to insidious trauma, and may experience the same symptoms as noted above. This trauma destroys an individual’s sense of security within their daily lives and they will constantly seek a sense of congruency to make sense of their world (Root, 1992). Women who have never been raped experience similar symptoms of rape trauma because the trauma and anxiety surrounding the thought ‘I could be next’ manifests these symptoms. Root (1992) further argues that ‘trauma permanently changes one’s personal construction of reality’. Individuals affected by insidious trauma will constantly be reconstructing their understanding of the world, as they struggle to re-integrate these experiences. Female students at UKZN, regardless of whether they’ve had direct experiences of trauma are affected by the growing gender-based violence in South Africa, as they are part of a culture where the fear of violence against women is always present.

3.6 Conclusion

By using social constructionist theory we were able to adopt a critical stance towards these issues as we challenged our taken-for-granted knowledge on the issues of gender-based violence and safe sex practices. By examining feminist theory, theory related to safe sex practices and
With a critical social constructionist stance we were able to gain a greater understanding of the experiences of gender-based violence and safe sex practices. By identifying discourses in gender-based violence and safe sex practices we were able to deconstruct these discourses and re-frame our understanding of these issues. The analysis of these discourses allowed us to identify alternatives to existing discourses and make recommendations for change. The use of social constructionist theory in this research creates the possibility for social transformation which is vital to this research because it aims to improve the lives of female residence students at UKZN.
4.1 Introduction

The growing problems of gender-based violence and general safety in UKZN residences have created the need for relevant research addressing these issues. This research aims to explore and analyse the discursive constructions of gender-based violence and safe sex practices amongst female residence students at UKZN (Howard College Campus). A better understanding of how female residence students understand and experience gender-based violence and safe sex practices, will inform policy and practice regarding safety and security at University. Hopefully the findings from this research will be used to implement interventions that will improve the problems of gender-based violence and risk of HIV infection on campus. In seeking to understand these discursive constructions, the study addresses the following five research questions: (a) What discourses do these women use when discussing gender-based violence? (b) How do these discourses intersect with the risk of HIV/AIDS infection? These two research questions are divided into the following subparts: (c) How do these women experience the fear and threat of gender-based violence? (d) What measures do women employ to reduce their risk of gender-based violence and HIV infection? Are these measures effective? (e) What can the university do to enhance safety, both in terms of gender-based violence and HIV?

This chapter describes the study’s research methodology which includes the discussion of the following areas: (a) rational for qualitative research design; (b) rationale for social
4.2 Rational for Qualitative Research Design

Qualitative research strives to understand "that deep structure of knowledge that comes from personally visiting informants, spending extensive time in the field, and probing detailed meanings" (Cresswell, 1998, p.193). Qualitative research is naturalistic, holistic and inductive (Durrheim, 1999). It attempts to study a real-world social situation or interaction by entering the worlds of others and watching it unfold naturally (Durrheim, 1999). It inductively explores this social situation or interaction and seeks to achieve a holistic understanding of it (Durrheim, 1999). Qualitative methodology seeks to interpret the meaning of these experiences. Adopting a quantitative approach was unlikely to elicit the kind of information which was necessary to address the research purposes and questions. Following the tenets of qualitative research (design flexibility, interactive researcher-participant relationship, holistic and interpretive perspective) enabled the researcher to address the particular research purposes and questions within this study (Durrheim, 1999).

4.3 Rational for Social Constructionist Approach (Discourse Analysis)

Since many beliefs and perceptions surrounding gender-based violence and safe sex practices are socially constructed, a social constructionist approach guides this qualitative research. Social constructionist theory advocates that there are alternative constructions of events and that language constructs this reality (Burr, 1995). Social constructionism seeks to analyse...
create particular representations of people and objects - that underlie our experiences of these people and objects (Terre Blanche & Durrheim, 1999, p.148). Social constructionist methodology places language as the object of study and within this study, used unstructured interviews and discourse analysis to address the research purposes and questions.

4.4 The Sample

Twelve female UKZN residence students from Howard College Campus were identified using snowball sampling. Snowball sampling is a technique for locating participants by asking others to identify individuals who have a specific understanding of the topic you are researching (Ulin, Robinson, Tolley, & McNeill, 2002). This is a purposive sample as it is a deliberately non-random method of sampling which aims to sample a group of people with particular characteristics that will provide the researcher with the most valuable information (Ulin et al., 2002). The inclusion criteria used to select the sample stipulates that participants had to be female UKZN students currently living in one of the Howard Campus residences. Participants did not necessarily have to have a personal experience of gender-based violence to participate in this research as every woman is affected by the fear and threat of gender-based violence. This text has already established that the emergence of gender-based violence in UKZN residences places female residence students at risk and may also hinder their ability to negotiate safe sex. Every woman struggles with feeling safe and secure in an environment where gender-based violence is prevalent therefore any female residence student from Howard College Campus was applicable for this research.
The researcher approached her supervisor, a psychology lecturer who lectures a course on interpersonal violence at UKZN, for permission to access a sample of female residence students. The lecturer asked his students if they would like to participate in the research and gave them details about the study. Participation was emphasised as voluntary. The contact details of those who wished to participate were given to the researcher. The researcher contacted these women and addressed any concerns they had about the study. The researcher developed a rapport with one of the women, who agreed to participate and she volunteered to help identify other participants for the study. The contact details of these women were then given to the researcher. By asking a number of people to help locate participants the snowball gets bigger and bigger as you accumulate "new information-rich cases" and eventually the snowball is big enough to satisfy sample requirements (Patton, 2002, p.237).

An important concern in research is the representativeness of the sample, in which the sample group must reflect the properties of the population (Patton, 2002). Participants were drawn from various levels of study, both undergraduate and postgraduate and from various residences on Howard College campus, to ensure that the sample group reflected the wider population of female residence students at UKZN. However representativeness is secondary to collecting rich information representative of the range of experiences and perspectives relevant to the research questions (Ulin et al., 2002, p.58).

4.4.1 Participants’ Characteristics

This is not racially focused research however all twelve participants were African since the majority of students living in UKZN residences are currently African students. It is important to
recognise this racial factor to understand the possible power dynamics present in the interview situation as the researcher is a white female student who has never lived in UKZN residence. Ten of the participants were South African whilst two participants were foreign students from the SADEC region (Zimbabwe and Botswana). Participants were primarily Zulu and Xhosa with the exception of the foreign students. Participants ranged from undergraduate students to postgraduate students. Participants were also from different disciplines including, psychology, law, music and community and development studies. Participants’ ages ranged from nineteen to twenty-three years old. All participants claimed that their families lived far away and that they had travelled far to study at University. Several participants were previously from rural areas. Most participants claimed that they had received financial aid from the University because they had limited economic means. Participants were from various residences on Howard College campus such as Anglo Cluster residence, Tower residence, Louis Botha residence and Four Seasons residence, which is an off-campus residence.

4.5 Overview of Research Design

Prior to the collection of data a literature review was compiled to determine what other research was done in this area of study. However the literature review was an ongoing process which focused on gaining a better understanding of the area of study. Following, the approval of the research proposal and ethical clearance, the researcher accessed her sample and proceeded to conduct unstructured interviews with twelve participants. Interviews were transcribed and analysed using discourse analysis. Recommendations were then made.

4.6 Data Collection
Unstructured interviews were conducted with twelve female residence students from Howard College campus, in a private interview room in the Howard College psychology department. Interviews were audio-tape recorded. Individual interviews are suitable when conducting research on highly sensitive topics such as gender-based violence and safe sex practices (Ulin et al., 2002). This interview format maximises the privacy of the participant and facilitates intimate discussion. Parker (1992, p.123) argues that “structured interviews which have pre-set categories smother the variability that is celebrated in discourse analysis” hence unstructured interviews were considered most appropriate for this research. Unstructured interviews were more likely to facilitate an open-ended conversational exchange which allowed for spontaneity and flexibility in participants’ responses (Patton, 2002). Interviews were conducted by the female researcher to facilitate disclosure and rich discussion (Russell, 1984).

Participants were contacted by the researcher and a time and place was scheduled for the interview. All participants opted to be interviewed in one of the rooms in the psychology department. The interviews were approximately an hour long and each participant was interviewed only once. Following feminist methodology, the researcher began each interview by introducing herself, speaking a bit about herself and asking the participant if they’d like to know anything about her (Renzetti, 1997). This helped establish intimacy and reciprocity within the interview context. It is important to note that the researcher viewed herself on the same plane as the women she interviewed, in order to deconstruct any perception that the relationship between the researcher and the participants was hierarchical (Huisman, 1997). Informed consent was obtained before each interview began.
The following question was asked in the interview:

“What problems do you and other women face living in residence?”

The interviewer probed the following relevant areas of interest in response to this question:

- Participant’s perception of the incidence of violence on campus and general feelings of safety and fear.
- The negotiation of sexual boundaries in relationships.
- Safe sex practices and issues surrounding condom use.
- Whether students are concerned about the risk of HIV infection.
- How women reduce their risk of gender-based violence in their own lives and whether these measures are effective.
- Measures the university could utilise to prevent and improve the situation regarding gender-based violence on campus.
- How the university could facilitate safe sex practices in residences.

Follow up open-ended prompts were used to probe into the issues surrounding gender-based violence and safe sex practices. Probes consisted of a combination of verbal and non-verbal cues (Patton, 2002). The researcher practiced active listening in which she followed-up issues which participants may have brought up in the interview and reflected back to participants (Patton, 2002).

When conducting interviews that pertain to sensitive issues such as gender-based violence it is important to develop trust between the researcher and participant (Lalor, Begley & Devane,
Maintaining a detached objectivist stance in this interview situation was unlikely to establish rapport with participants (Lalor et al., 2006). Hopefully the presence of a female interviewer allowed participants to feel more comfortable when discussing sensitive issues such as gender-based violence. Furthermore, participants may have felt more comfortable disclosing experiences of gender-based violence to a female interviewer because participants may have felt that the female interviewer would be able to relate to their experiences better. Practicing reciprocity and empathy in the interview situation is essential. This facilitates closure for the researcher and helps them 'let go' of their participants when the data collection process is complete (Lalor et al., 2006).

4.6.1 The Transcription Process

All interviews were audio-recorded and transcribed verbatim by the researcher herself. Transcripts were not edited or 'tidied up' because the readability of interview material is not an area of concern as it is important to capture the complex emotionality of these experiences. Pseudonyms were given to participants and any identifying information was excluded to protect the confidentiality of participants. Though the transcribing process itself is not a limitation as it provides rich material in the form of life experience for analysis, the lengthy nature of transcription did place time constraints on the research (Huysamen, 1994).

Transcripts displayed an outpouring of emotion, in which the women in the study shared their experiences and feelings surrounding gender-based violence and safe sex practices. The sensitive nature of the interview texts influenced the nature of the transcription process. It is important to recognise the emotional implications that transcribing sensitive material can have on
The research and the importance of debriefing in these circumstances. The emotional impact of sensitive research on participants is always considered and efforts are made to protect the participants (Lalor et al., 2006). However the potential for researchers, transcribers and supervisors to be harmed by this research is rarely considered (Lalor et al., 2006; Stanko, 1997).

In addition to becoming upset during the transcription process the researcher started to feel vicariously responsible for her participants (Lalor et al., 2006). Lalor et al. (2006) further argues that during the process of transcription it is important to let go of any feelings of responsibility that the researcher may have for the participant. The researcher discussed the emotional implications she experienced as a result of the transcription process with her supervisor and a fellow colleague to ensure that she was regularly debriefed. Recording personal reflections and feelings that emerge during the transcription process are also essential to protecting the emotional safety of the researcher (Lalor et al., 2006).

4. 7 Data Analysis

Interview texts were analysed using discourse analysis, following Willig’s (1999) applied discourse analysis and Parker’s (1992) discourse analytical guidelines. This research focuses on the identification of discursive constructions (e.g. sexual safety, fear, gender-based violence) and the subject positions contained within them (Willig, 1999, p.113). Discourse analysis explores the way individuals use coherent systems of meaning to create particular versions of reality and how individuals position themselves in relation to these versions of reality (Burr, 1995). The subject positions within these discursive constructions constrain and shape how an individual constructs their understanding of gender-based violence and safe sex practices (Willig,
This research aims to understand the way in which discourse positions participants in relation to safe sex practices and gender-based violence. By analysing discourses we are able to achieve a liberatory effect in which we can identify alternatives to ‘what is’ and make recommendations for change (Willig, 1998, as cited in Parker, 1998). Careful attention is paid to the social conditions of discourse within applied discourse analysis which is useful for addressing practical social problems such as gender-based violence on UKZN campus (Willig, 1999). This discourse analysis moves beyond critical engagement with the text and towards active social and political engagement with the problems of gender-based violence and HIV/AIDS at UKZN. Since many perceptions and beliefs surrounding gender-based violence and safe sex practices are socially constructed it is important to use discourse analysis to deconstruct these perceptions so that we are able to re-frame our understanding of these issues and make recommendations for improved social change.

4.7.1 Step-by-Step Process

Following Parker’s (1992) discourse analytical guidelines, discourses were identified in the interview texts, explored and interpreted.

Firstly, the researcher read and re-read the interview texts until she was familiar with the content. She also transcribed all the interviews which further facilitated this familiarisation process. Discourses were then identified in the interview texts. Parker (1992, p.6) refers to a discourse as ‘a system of statements that construct an object’ People use meanings, metaphors, stories and images to construct an object in a particular way, to produce a particular version of reality (Burr, 1995). The researcher identified the objects in the text and the talk that surrounded these objects (Parker, 1992). These were then termed discourses.
Secondly, the researcher identified what types of persons are talked about in the discourse and speculated about what you could say if you prescribed to such a discourse (Parker, 1992). The researcher examined the picture of the world that this discourse presented and how this discourse could possibly interact with other discourses (Parker, 1992).

Thirdly, the researcher located the discourse historically by looking at how the discourse has emerged or how it has changed over time (Parker, 1992, p.16). The researcher then explored how this discourse could be disseminated, for example in jokes, literature and social institutions and practices.

Fourthly, the researcher explored the power relations that discourses may produce by "looking at the kind of people who would gain or lose from the employment of this discourse" (Parker, 1992, p.18).

Finally, patterns and relationships between these discourses were explored. Tensions and contradictions in discourses were also explored. Relevant suggestions and interventions were drawn from the identification and analysis of discourses. A colleague familiar with the method of discourse analysis checked these steps.

4.8 Reflexivity of the Researcher

As the researcher, I must recognise my own positioning as a white South African female student at UKZN (Howard College Campus) because it would be simplistic of me not to account for the interlocking systems of domination such as race, class and sex that work in this research. I did have a few concerns about conducting this type of research as I had never lived in UKZN residence and was concerned that my status as a white woman would further alienate participants. I felt that these factors may cause participants to feel that I wouldn't understand
I endeavoured to gain a rapport with my participants. However, participants were willing to share their experiences and feelings in the interviews and these factors did not seem to hinder the research process. My identity as a female researcher appeared to facilitate sharing on an intimate level. I did not anticipate a language barrier, nor did I experience it as a problem, as all participants were fluent in English as they were at a University, where English is currently the medium of instruction.

4.8.1 Emotional Journey of the Researcher

As social science researchers we are often expected to be detached from our research but as a woman researching gender-based violence I found it nearly impossible to detach my experiences from my research (Stanko, 1997). I anticipated that I would be affected by the interviews as I expected to hear stories of fear and violence, but I did not expect the extent of these emotional implications. I questioned whether or not it would be professional to reflect on my emotional journey throughout this research process, but as Elizabeth Stanko (1997, p.85) states "There is already too much silence". By choosing not to reflect on my own experiences and emotions I would be contributing to this silence. As a woman I live with the fear and threat of gender-based violence and after completing my interviews I found that I started to feel increasingly anxious about my personal safety. Women spoke of stories of gender-based violence with the insight that can only be exhibited by someone who has been through such experiences however none of these women ever implicated themselves personally in these stories (Stanko, 1997). Only one participant directly disclosed their personal experience of sexual assault. This research has made me realise that when someone is a victim of gender-based violence the perpetrator takes so many things away from them. What he does to them, whether
he rapes, sexually assaults, beats or verbally abuses them, is something they will have to live with their entire lives. It is an event which they will factor into every decision they make and it changes them in ways they often do not expect. The only thing that he does not take away is their right to disclose. Who women choose to disclose to, when they choose to disclose and in what context they choose to disclose are their choices. As the interviewer as I was acutely aware of this and made sure that I did not force disclosure from my participants but respected their stories and how they chose to tell them.

During my transcription process I found myself also becoming angry. I was angry that being a woman meant I was vulnerable to violence. I was angry at the perpetrators my participants spoke of. And because you’re a researcher you almost feel like your anger is inappropriate, misplaced and you don’t know what to do with it. Where do you put it? There was this resistance to acknowledge these feelings and then I had to stop myself and ask ‘Why?’ Why was I so resistant to admit I was affected by my research? I realised that if I did acknowledge it then I would also have to acknowledge my own fear around gender-based violence. I couldn’t other my participants because I knew that their experiences and feelings were mine. I was fortunate to have colleagues who acted as sounding boards for me throughout my research. I also think it is important to record these thoughts and feelings in a journal so that you are aware of the emotional impact that the research process has had on you (Stanko, 1997). Moran Ellis (1996, as cited in, Stanko, 1997, p.80) encapsulates the emotional implications that I experienced in my research when she comments on her own research on child sexual abuse:

‘In short, researching sexual abuse changed my life to some degree because it changed me, and that was not something I had anticipated happening.’
4.9 Ethical Considerations

The Ethics Review Committee of the University of KwaZulu-Natal (Durban, South Africa) granted ethical clearance for this research. The researcher also received written consent from the Deputy Director of Student Housing, Sifiso Dludla granting permission to conduct research in the Howard College residences. The researcher also spoke to residence assistances in various residences on Howard College Campus, informing them of the nature of the research being conducted.

Participants were informed prior to the interview that some sensitive issues might be discussed and the interview guide was given to participants beforehand to ensure that they were aware of the nature of the research. Participation was voluntary and participants could opt out of the interview at any time. Complete confidentiality was assured in the interviews, especially since the topic was of a sensitive nature. Before the interview began, participants were informed of the aims of the study, the topics to be discussed and assured of confidentiality (Bowling, 1997). Participants read the consent form and indicated whether or not they wanted to participate in the study. Informed consent remained central to the research ethics of this study. The participants were informed that if they became uncomfortable with the line of questioning they were free to end the session or terminate that line of questioning. However this did not occur.

Necessary support services available on UKZN campus were identified to participants before the interview. In the event that a participant was distressed by the interview the researcher was prepared to arrange psychological counselling for the participant at the School of
The researcher was also prepared to arrange a follow-up session if the participant required one. However, the researcher did not encounter this particular situation in the course of her research. Participants were also debriefed by the researcher after the interview. A copy of the consent form was given to the participant and the contact details of both the researcher and the supervisor were provided. Confidentiality is ensured by protecting the privacy of participants through the use of pseudonyms and by concealing any identifying characteristics in the final report. Transcripts with no identifying information have been stored, and only the researcher and research supervisor has access to them.

4.10 Addressing Trustworthiness in the Research

To ensure the quality of this research various measures have been implemented to ensure that the research is credible (valid), dependable (reliable) and transferable (generalizable) (Lincoln & Guba, 1995, as cited in Cresswell, 1998).

4.10.1 Credibility

Credibility (validity) refers to how accurately the researcher has represented the experiences of the participants (Cresswell, 1998). Social constructionist research is informed by the researcher practicing reflexivity in which the researcher reflects on how their own experiences and background have affected the way they understand the world and act in the world (Patton, 2002). The researcher hence reflected on her own experiences, biases and prejudices and how these may have influenced the research. She also accounted for how the research itself affected her and constructed her experience of it. Clarifying the researcher's...
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perspectives and biases was done through ongoing critical reflection and journaling. The researcher endeavoured to be conscious of her own perspectives and appreciate the perspectives of her participants, especially within the interview context. Peer reviewing and debriefing were also used in this research. The peer reviewer provides an external check of the research process (Creswell, 1998, p. 202). The steps of the data analysis process were checked by a colleague external to the research. The researcher was also regularly debriefed by her supervisor and fellow colleague. The role of the peer reviewer was to keep the researcher honest by asking hard questions about the methods, meanings and interpretations. This also provided the researcher with an opportunity for catharsis as her feelings were listened to sympathetically (Creswell, 1998).

4.10.2 Dependability

Dependability (reliability) refers to how well documented the research process was, in particular the data collection process (Cresswell, 1998). This refers to the stability and consistency of the research. The researcher provided rich and detailed description of how the data was collected and analysed, providing a paper trail for readers to follow. The data analysis process was checked by a colleague, who reviewed this process to ensure that the discourses identified were appropriate and relevant to the research questions. This ensured inter-rater reliability.

4.10.3 Transferability

Transferability (generalizability) refers to how the research findings relate to other contexts (Cresswell, 1998). The researcher provided a thick description of the sampling techniques, data
4.11 The Limitations of the Study

No research study is without limitations therefore it is important to acknowledge the possible shortcomings of this research. Efforts have been made to account for these shortcomings. The researcher is used as the primary instrument in qualitative research and hence within this study the researcher was responsible for conducting interviews, transcribing and analysing the interview texts (Patton, 2002). As a result, researcher subjectivity and bias are limitations as they may have influenced the research process. A key limitation may be the issue of potential bias regarding the researcher’s own role as a female student at UKZN. The researcher engaged in a process of ongoing critical reflexivity to monitor this potential bias. The researcher removed all participants’ real names from the transcripts to minimise potential bias during the data analysis process. The researcher also had a colleague external to the research check the steps of the data analysis process. Another limitation may be that since participants knew the researcher was also a student at UKZN, their responses may have been influenced or affected. Participants may not have been as open or candid in the interviews because they may have feared that they would run into the researcher again on campus. During the interviews the researcher endeavoured to create a warm, open and honest environment conducive to sharing, to combat this potential limitation.

4.12 Conclusion
This chapter outlined the methodological framework of this research, in which sample considerations, data collection and data analysis procedures were explored. Motivation was provided for a qualitative, social constructionist approach as it was deemed most suitable to study the discursive constructions of gender-based violence and safe sex practices amongst female residence students at UKZN. The quality of the research was ensured through the use of various techniques such as peer reviewing, debriefing, reflexivity and rich thick description. Relevant ethical considerations applicable to this research were also addressed. Potential limitations and biases were discussed and accounted for. This research will contribute to the growing knowledge surrounding gender-based violence at South African Tertiary Institutions and will hopefully culminate in intervention and policy addressing the problems of gender-based violence and HIV infection at UKZN.
RESULTS

5.1 Introduction

This research presents a discourse analysis of female UKZN residence students’ talk about gender-based violence and safe sex practices, within the context of HIV/AIDS. This research will hopefully give rise to interventions and policy, aimed at improving the lives of female students in relation to these issues. The objective of the research was to understand the way in which discourses positioned participants in relation to gender-based violence and safe sex practices (Willig, 1999). Twelve female residence students were interviewed surrounding these issues. Through analysing the interview texts various discourses were identified and analysed. The following seven discourses were identified and explored: discourses of fear; discourses of women’s responsibility; discourse of male dominated relationships; sex-as-exchange discourse; stranger danger discourse; abuse of power discourse and the discourse of speaking and silence. These discourses cannot be understood in isolation as they are intertwined in a complex relationship with each other. The discourses are organised in such a way as to illustrate the sequence of how gender-based violence and the risk of HIV infection intersect in a woman’s life. They are seated within the context of the lives of these female residence students at UKZN, Howard College Campus.

5.2 Description of the Setting of the Study
It is important to discuss the setting of the research to situate this study within a context. The University of KwaZulu-Natal was formed on the 1 January 2004 as a result of the merger between the University of Natal and University of Durban-Westville (UKZN History, 2009). The University of KwaZulu-Natal comprises of Pietermaritzburg campus, Westville campus and Howard College Campus. This research focuses on the University residences on Howard College Campus, namely Charles Smith Hall and Albert Luthuli Hall. Charles Smith Hall is comprised of 12 individual residences and Albert Luthuli Hall is comprised of the Cluster Residence and the six-storey Tower Residence. These University residences comprise of mixed and same sex residences. However mixed sex residences are dominant and all participants were from mixed sex residences. The positioning of participants in mixed sex residences must be accounted for as it situates these research findings within a particular context of male-female interaction.

5.3 Discourses of Fear

5.3.1 The Waiting Game

Participants framed their experience of gender-based violence within a discourse of fear. This discourse of fear constructs these women as constantly anticipating and waiting for gender-based violence to occur. Participants speak about waiting and wondering when they will be victimised. This is shown in one participant, Lebo’s excerpt in which she talks about this waiting game in which women are exposed to the constant fear and threat of violence.

>You never know what may happen. Sometimes you hear of cases of rape... so and so has been raped or so and so has been robbed of something or anything of the sought. Then you, you start to wonder what may happen to you in the day to come or the few months to come.
It appears that this waiting game in which women anticipate and fear gender-based violence is marked by the uncertainty of not knowing what may happen to them or when it will happen. This waiting game creates great anxiety in women. Zandile highlights this fear and anxiety below:

What if something happens? What if someone comes into my room at night and rapes me? No one will hear. That’s what makes me feel scared.

The statement “No one will hear” indicates that participants believe that no one will protect them from gender-based violence, intensifying the fear surrounding gender-based violence as participants start to believe that it is inevitable.

It appears that the term ‘insidious trauma’ is applicable within this discourse as these women have clearly become affected by the constant fear and threat of gender-based violence. Most participants are unaware that they cast men as the source of this danger. They speak about men as the perpetrators of gender-based violence as taken-for-granted assumption. One participant, Bongiwe is speaking about living in a mixed residence and what it is like living with men. These ‘guys’ she refers to in the excerpt are men she acquainted with and even friends with.

You see all these guys. And you’re walking out of the shower with your towel and you know there are all these guys over there. So that is a problem.

Bongiwe refers to men who aren’t strangers as the source of danger. Participants speak about strangers as the source of danger but then later on in the interviews contradict this
Discursive Constructions

I mean, guys always have... most of the time they're here for motive. Especially somebody who's not your friend they just show up in your room. For what? They always have something.

Within this discourse of fear regarding gender-based violence women are constantly involved in a waiting game in which they are involved in an ongoing process of fear and anticipation. Women construct men as sources of danger and characterise them as untrustworthy. Gender-based violence is constructed as an inevitable force which can’t be stopped. The ongoing dialogue of fear in the lives of women is also a subtle process which underlies the language of these participants. Most participants claimed that they were unaffected by gender-based violence, demonstrating how this dialogue of fear is normalised in society. Within this discourse gender-based violence is normalised as it is seen as inevitable. This entrenches patriarchal power relations in society as violence against women just becomes another concern in the daily lives of women. This naturalises women's subordination to men. The agency of women is negated as they have no power in this waiting game.

5.3.2 HIV Kills

Participants also framed their experience of safe sex practices within a discourse of fear in which HIV/AIDS is associated with death. Participants associated HIV/AIDS with death and claimed that it kills HIV infected people. This is depicted below in participants' statements:
I know if I was to be diagnosed with HIV after a month I'd know I'd be dead. You know because I couldn't handle it. So ja...um ja...I'm scared of HIV because I've seen some people in my family having it. So I'm afraid of AIDS.

(Thandeka)

If you don’t get tested, you don’t practice safe sex you know you get HIV. Ja. As time goes on...AIDS then you die so ja (laughter). We’re all scared of HIV. So ja. (Zandile)

The bottom line is that everyone knows AIDS kills. So how do you explain having sex without a condom? (Lebo)

It is interesting to note that within this discourse when participants discuss HIV infection they construct it as an immediate death sentence, despite proof that effective long term treatment can increase the lifespan of an individual. This could indicate distrust in the medical care system or a lack of access to adequate medical care. The fear that surrounds this discourse is immense, which contributes to the silence surrounding this area. However the high levels of fear that surrounds HIV/AIDS could lead to denial, in which individuals distance themselves from the epidemic. This is shown below in Mathi’s statement:

I think because HIV is just too farfetched for us. It’s like a long term kind of evolving thing.

Participants appear to disassociate themselves from HIV/AIDS by referring to it in extreme terms such as death, kills and describing it as farfetched. This demonstrates how women may distance themselves from the epidemic, which may lead to neglecting safe sex practices because one is trying to distance themselves from HIV infection. This also could also contribute to the silence surrounding HIV/AIDS.
5.4 Discourses of Women’s Responsibility

5.4.1 Victim-Blaming Discourse

The anxiety and fear surrounding gender-based violence produces defensive reactions in participants such as victim blaming. Participants speak about how they are responsible for avoiding gender-based violence. They also develop various strategies that women should follow to avoid such dangers. This discourse constructs the woman as being responsible for gender-based violence as her behaviour provokes attacks. Participants never directly say that women are responsible for this violence, however each participant had a different strategy for avoiding gender-based violence and developed rules which women should follow. If women broke these rules then they faced the consequences of violence. One participant, Faith demonstrates victim-blaming in the excerpt below as she blames the victim for letting her attacker into her space. This excerpt operates on the belief that a woman can successfully avoid gender-based violence and women who can’t avoid such situations are to blame.

*Why were you there in the first place? I’m not saying that it’s right that they’re actually doing that but it makes it even more difficult that you actually went there to this guy and he did that.*

The participant states that the woman in question went to this guy willingly, implying the myth of the willing victim.

All participants have strategies to avoid violence. Lebo, as cited below, believes that if you refrain from alcohol you can prevent gender-based violence. This again casts blame on the victim for participating in behaviour that breaks the rules.
Well, what you may do is refrain from alcohol. Because sometimes you find that, for example last year in the residence where I was staying there was a girl who was raped after they had been consuming alcohol with this bunch of guys. So maybe refrain from drinking alcohol with guys.

Refrain from drinking with guys appears to be one of the rules women must adhere to prevent violence and if this rule is broken then there are consequences.

Nomzamo, highlights another rule, which is not going out at night.

Oh I do not walk at night.

Thandeka highlights another rule which is that you have to be careful when you’re wearing a short skirt.

Let’s say you’re wearing a short skirt. They’re like, they’re going to say stuff. You know? And it’s like ok I’m allowed to wear a short skirt. There’s no rule that you’re not allowed to wear a short skirt so you always have to be cautious when you know...

Nomzamo highlights another rule, which is not flirting with men.

I avoid flirting with guys.

This rule of not flirting with men cropped up numerous times in the interviews however one excerpt in particular was very interesting. One of the participant’s, Ayanda starting talking about things she does to feel safe and one of the things she mentions is not smiling a lot. This indicates another rule which is not acting in a friendly manner towards men. Not smiling a lot...
the public sphere, not in the private sphere, which implies the belief that the stranger is the perpetrator of gender-based violence.

_I: What things do you do?_
_Ayanda: I’m very mean._
_I: How you mean?_
_Ayanda: I don’t smile a lot. I like to think I’m intimidating._

Throughout the interviews participants constructed rules which women must follow to stay safe from gender-based violence. Women who are exposed to gender-based violence are seen as breaking these rules and are blamed for provoking the attack. This victim-blaming discourse reinforces patriarchal power relations in society because it shifts the blame from the perpetrators to the victims, exonerating the perpetrators of any wrong-doing. This naturalises gender-inequalities in society because women are perceives as at fault for gender-based violence. This discourse allows women to deny their own risk of becoming a victim of gender-based violence as they are able to construct and follow rules, which ensure that they will never become victims. This is a self-preservation technique on the part of these women as they are able to avoid the reality that there are no actual rules that determine whether or not someone may become a victim. There is a tension between this technique of rule-following and the intense fear surrounding the belief that gender-based violence is inevitable. This depicts how women try to reclaim their agency when positioned in this discourse of fear by repositioning themselves within a victim-blaming discourse. This represents the fragmented experience of women as they try to understand and cope with gender-based violence.

5.4.2 Discourse of Women’s Responsibility for HIV infection
Women are constructed as responsible for introducing condom use in a relationship and ensuring that both partners are protected from HIV/AIDS. Participants speak about insisting on condom use in relationship, however there’s no mention that their partners ever initiate these negotiations. Within this discourse the woman is seen as responsible for condom use as she is expected to initiate these negotiations and assert herself, ensuring unprotected sex does not occur. One of the participants, Faith talks about how a woman should not accept the non-use of condoms in a relationship.

*Asserting yourself as a female does not mean you’re going to have to accept this relationship where no condoms are used.*

Thandeka speaks about how women always ask each other if they are using protection. This depicts how women are responsible for policing condom use and ensuring that other women are also protecting themselves from HIV/AIDS.

*Ja, so people in res seem...oh and they always, you know those old jokes pertaining to AIDS. If you do that, even if they see you have a boyfriend you’re like “Make sure usisi you have something”. People are always...we are aware of it and I just think that ja everyone, because even if your girlfriend comes and tells you something and she has sex the first thing everyone is like “Was there a condom?”.*

One of the participants, Shalane refers to women she considers promiscuous and talks about how she worries whether they’re using condoms. There is no mention of their male partners taking responsibility for introducing condom use, implying that this is a woman’s responsibility.
Some people have multiple boyfriends that sleep over. Some people have multiple boyfriends that sleep over and then next day somebody else sleeps over.

What does that mean? Does it mean it’s just mutual friendship? To me it’s not. So I’m concerned I don’t know maybe they’re protecting themselves in a way but to me you know protection is not hundred percent.

Participants express concern when they suspect a woman is not using condoms. They speak about how they are concerned for her sexual health and worry about her. This illustrates how women are not only responsible for policing their own condom use but the condom use of other women. Another participant, Bongiwe illustrates this point below:

A lot of the girls are very promiscuous. I don’t think they actually think about the fact that there are these kinds of diseases.

Within this discourse men are constructed as ignorant of the risks of unprotected sex and women are cast as responsible for policing condom use and ensuring that they are not at risk for HIV infection. The negotiation of safe sex is depicted as a struggle between the man and the woman, in which the man is uncooperative and unconcerned about his own and his partner’s sexual health. Women are also seen as responsible for ensuring that other women practice safe sex. Within this discourse it is taken for granted that women are responsible for safe sex within relationships. The negotiation of safe sex is not seen as a shared responsibility between sexual partners, but rather the responsibility of safe sex appears to lie solely with the female partner. This is counterproductive because the negotiation for safe sex involves two parties. The sole responsibility on women to practice safe sex only hinders these negotiations and contributes to the spread of HIV/AIDS.

5.5 Discourse of Male Dominated Relationships
The discourse of male-dominated relationships was extremely prevalent in participants’ talk. This discourse constructs abuse within dating relationships as a common feature which is naturalised as women construct male dominance, manipulation and abuse as part and parcel of a relationship. Women do not consider the abuse and manipulation that occurs in dating relationships as violence but rather trivialise these features. This trivialisation is depicted within the stranger danger discourse in which women construct the stranger as the perpetrator and ignore the presence of violence in relationships. However, participants consistently contradicted themselves by speaking about relationship violence, but failed to identify this violence as ‘real violence’.

This trivialisation of physical abuse in dating relationships is demonstrated below in one of the participants, Thandeka’s response. She describes how physical abuse is common in dating relationships, however prior to this excerpt when asked if there was violence in their relationship, she responded that she didn’t think so and then proceeded to describe this ‘relationship stuff’. This participant makes a clear distinction from what she considers ‘real violence’ and ‘relationship stuff’.

Thandeka: No. Well, you know you just...when things are not going well in the relationship you will always see the girl crying and then after that you have that the guy threatened to hit her or the guy hit her. What not. Those things.
I: Relationship stuff?
Thandeka: Ja then a few days they’re back together. Ja but then ja.
I: And that’s common?

This distinction indicates a misrepresentation of risk as more women are likely to be abused by someone they know than by a stranger. However, note the flippant manner in which
the participant recounts this ‘relationship stuff’. She uses phrases such as ‘What not.’ and ‘Those things’ which make her tone casual. Several participants appear to use this technique which seems to help them distance themselves from the gender-based violence that is going on around them.

Lebo, one of the participants tells a story about physical abuse in a dating relationship, in which a guy was beating a girl up in residence. She laughs directly after she says the words ‘No beat her’. This illustrates how participants unintentionally lighten the tone of the conversation by laughing, making flippant remarks and speaking in a casual tone.

No beat her (laughing) up and neighbours could hear her scream so the neighbours ladies called guys who stay in res. They came and they beat this boyfriend up. Beat him up till the ambulance was called to go to the hospital.

The other men who lived in the residence, who were called to ‘defend’ the girl, beat the guy up to such an extent that an ambulance was called. This again is trivialised and is represented by the participant as a solution to physical abuse in a dating relationship. Men are represented as part of the problem of gender-based violence whilst at the same time an essential part of the solution. Men have a dominant role in both the problem and the solution, depicting an underlying discourse of male dominance. Later in the interview she suggests that mixed sex residences are the best solution because the men living in the residence can protect the women living there.

This discourse also constructs men as having the right to discipline their girlfriends if they act in ways which their boyfriends consider inappropriate. One of the participants, Ayanda tells a
It was past midnight and this guy comes into this chick opposite next door to us and he’s banging on the door. And apparently she cheated on him and he wanted to beat her up. And he pulled her by the hair and he was calling her names. And there wasn’t a single security guard to be seen. Right? And he’s pulling her hair and he’s screaming at her.

Another participant, Faith tells the story of how a boyfriend physically abused his girlfriend and his girlfriend’s friend because he did not approve of their friendship. This abuse was perpetrated to ensure the girlfriend and the friend were punished and to ensure that the friendship was terminated.

My friend actually was pushed against the wall because this guy felt that his girlfriend shouldn’t be hanging out with her any more so he obviously assaulted her first and then came to assault my friend thereafter. So that they both get the point that they’re not supposed to mix.

Later on in the interview Faith states that this couple are still together and the friend had to transfer to a different residence so she would not be in the same space as them. These excerpts depict how within this discourse women are punished for violating the requests and desires of their boyfriends. Men determine the rules of the relationship and lead the relationship. Any behaviour that usurps the male dominance of the relationship is met with force and crushed.

One of the participants, Ayanda discusses how emotional abuse within dating relationships is commonplace and subtle.
I think it’s the emotional abuse stuff of the girls that I do know. It’s very subtle ‘coz nobody wants to interfere in couple stuff. You know? Whatever they do it’s their business you know?

This highlights the manipulation that occurs within this discourse as women are not only manipulated but this manipulation is trivialised as it is considered part of a relationship. By claiming manipulation and abuse is part of a relationship it designates this behaviour to the private domain. This facilitates the silence that surrounds gender-based violence and disallows women from identifying this behaviour as violence. This discourse naturalises patriarchy as it naturalises male dominance within relationships, making gender-based violence just another part of the relationship. This discourse facilitates silence surrounding gender-based violence because it delineates abuse to the private domain, making it not fit for public consumption.

The discourse of male dominated relationships negates the agency of women as it disallows women from negotiating safe sex. This discourse constructs men as determining the terms of their sexual encounters. One of the participants, Lebo describes how within a relationship you should allow a man to lead in sexual matters. She describes how women must be passive, whilst allowing men to be the aggressor in sexual encounters.

*For example when you’re with a partner you allow him to lead. You know? To be the expert, so to speak even although you feel that you know what, “I know” but you’ll play it low, you know?*

This passive role adopted by women prevents women from initiating condom use in relationships.
Another participant, Busisiwe discusses how many women fear introducing condom use because introducing condoms is an admission of sexual knowledge. Within the discourse of male dominated relationships women are not allowed to admit to any sexual knowledge as this places them in the dominant role in the sexual encounter. Women fear introducing condom use because it may be interpreted by their partners as a sign of promiscuity or sexual deviance.

*If you find someone using a condom, taking a condom you are actually thought of being a prostitute right? So maybe those are some of the situations which hinders me from maybe not negotiating for safer sex because of the situation ’coz if you are in fear at the end of the day the man would say “You are a prostitute.”*

Women within this discourse are expected to allow men to lead in sexual encounters and demonstrate passivity. Women cannot negotiate safe sex within this discourse as it contradicts the male dominance within sexual encounters and is an admission of sexual knowledge which contradicts their role of passivity. This discourse positions women at high risk of HIV infection. The discourse of women’s responsibility for HIV infection expects women to take responsibility for condom use and safe sex however both the sex-as-exchange discourse and the discourse of male dominated relationships prevents this from occurring. The discourse of male dominated relationships normalises gender-based violence and facilities gender-based violence as it creates conditions in which patriarchy is embedded into the fabric of dating relationships. The discourse of male dominated relationships contributes to the silence surrounding HIV/AIDS and gender-based violence, because within these relationships women have no voice.

5.6 Sex-as-Exchange Discourse
This discourse refers to transactional relationships in which women exchange sex for material gains such as clothes, payment of University fees, money or cell phones. Within this discourse women practice agency in transactional relationships by exchanging sex for material gains, however the nature of these relationships also negates this agency as women are often unable to determine the terms of their sexual encounters. Participants discuss how this trend of transactional relationships is common among female residence students. One of the participants, Bongiwe constructs transactional relationships as a survival tactic for female students who have limited economic means.

*I heard this other girl say that she um only dates guys with cars and money so that could also be another reason. The fact that you’re so far away from home and you’re probably half way through the month so you need money so you tend to get guys who have a lot of money and you know they’ll give you stuff. And ja that seems to be quite frequent.*

Female students are away from home and need some form of income so they engage in these relationships to gain some power over their economic situation. However, Busisiwe discusses how the transactional nature of these relationships constrains a woman’s ability to negotiate condom use.

*It’s like there are some men that will be in a relationship with women, especially if there is an age difference the man is older or actually he is the one who’s paying for fees or for some other expenses. They say the use of condoms for them may not be very appealing. They want to have sex without a condom and by the virtue of him being a provider of food or school fees the woman will feel inferior and will just give into the practice of sex without condoms. Right? So it is about her and the man. If a man has got money he’s got the power and if ever he’s the one who’s actually paying*
This excerpt highlights that when a relationship is based on this transactional exchange of sex and material gains, the woman lacks the power to negotiate safe sex. This places her at risk of HIV infection. If the man is paying for a woman’s University fees in exchange for unprotected sex then she is unlikely to terminate this arrangement because she needs her tuition payment. Men determine the terms of the sexual relationship as this is afforded to them in the exchange. This discourse operates within the discourse of male dominated relationships as similarly within this discourse men are ultimately in control, limiting their partners’ ability to protect themselves from HIV infection.

5.7 Stranger Danger Discourse

This discourse constructs the perpetrators of gender-based violence as strangers. Participants speak constantly about protecting themselves against strangers. One of the participants, Bongiwe discusses how the primary means of being safe is protection from strangers.

> Security from people who we don’t know, who come pretending to be students and friends of friends.

This is an interesting representation as it normalises the abuse that occurs in dating relationships as male partners cannot be considered strangers. Nomzamo describes what she considers a typical rape scenario and how she identified such a scenario and took the appropriate steps to avoid such a situation.
You know and it wasn’t really dark it was just around 5 o'clock so I had to walk like
down and I saw like these group of guys. I saw that and ok fine I looked around.
Nobody was around and I looked around and it’s like oh fuck (laughter) there’s bush
there! No ways! (laughter) And I was like ok wait this is like a typical you know
scenario like a rape scenario. It’s like things can happen. I just looked back and I just
walked back.

She constructs a rape scenario as walking alone during the early evening and seeing a
group of strange men and a bush nearby. This demonstrates how most participants
congecptualised a perpetrator of gender-based violence as a stranger. It is interesting to note that
although most participants discussed the abuse and manipulation that occurs in dating
relationship they still constructed the stranger as the source of danger. This is an important
contradiction as it indicates the unwillingness of women to accept that the perpetrator of gender-
based violence could be their boyfriend, date, friend or acquaintance. Only one participant made
the connection between these contradictions. Sthabile discusses how since moving into
University residence she came to realise that just because you think you know someone it
doesn’t mean they won’t hurt you.

Well, you know, you never like to think that the people you live with can rape you or
could do something sexually like harass you. You never want to think that but there
are times where you have to face the reality, the possibility that it’s something that
could really happen.

However this revelation is attributed to her own experiences in which a friend of hers
sexual assaulted her in her residence room. She speaks about that day below and expresses the
fear that no one will believe her because she knew him.
But from that day I realised that oh my word you think you know someone than something like that happens. So what if he raped me? You know? Nobody would have really believed me.

Sthabile’s story deconstructs this stranger-rape myth and highlights the unwillingness of others to believe a woman when she is abused by someone she knows. It is unfortunate that the only participant who recognised that stranger danger is a misrepresentation of risk is the participant who been sexually assaulted by someone she knew and was even friends with. Within this discourse gender-based violence that does not fit the ‘stranger script’ is not defined as violence and as a result trivialised. This discourse serves to construct the discourse of male dominated relationships because dating violence cannot be defined as such as it doesn’t fit the ‘stranger script’ The stranger danger discourse facilities a system of patriarchy within society as it serves to misrepresent the risks of gender-based violence by concealing the real perpetrators: boyfriends, male friends and acquaintances. This misrepresentation of risk contributes to the spread of gender-based violence in society because gender-based violence becomes normalised.

5.8 Abuse of Power Discourse

This discourse refers to a particular situation in which the individuals, who are entrusted to protect you, use their power to abuse you. Within this research this refers to the University security services (RMS) that are entrusted to protect the student body at UKZN. However there have been increasing reports that RMS have not been protecting the student body but have been verbally and sexual harassing female students. This discourse constructs the protector as the abuser and explores the nature of this abuse of power. This betrayal of trust between the security services and student body is exhibited in the anger and confusion amongst participants. All
Ayanda speaks about how an RMS guard verbally abused her when she was trying to exit her residence to buy food.

I’m like “Could you please swipe me out I forgot my security card. I’ll write down my details and everything. I forgot my card in my room.”. And he’s like (mimicking) “Well I don’t want to hear your fucking stories. Either you give me the card or you don’t get the fuck out.”. So I thought that was inappropriate especially because the security guard kind of knew me. He knew that I lived in res. He even knew my room number so that was very impolite.

Various participants report that RMS guards are sexually harassing female students. It is prohibited for RMS guards to date female students. Thandeka discusses how RMS guards ask female students out and proceed to sexually harass them when they say no.

And even the security guards you find that they ask us out. Same friend what happened is this other guy this security guard would go to her room and just sit there and want to talk to her. She’s also feeling actually feeling unsafe in her room with the security guard and the security guard is supposed to you know?

Ayanda divulges her own experiences with an RMS guard who came to her room late at night to talk to her.

Most of us have had security guards ask us out. I’ve had a security guard at twelve, at midnight right at twelve o’clock at night midnight and he’s like “Um can you please walk me to the gate. I want to talk to you.”. He has it in for me. He comes to my room to wake me up at twelve.
Another participant, Sthabile discusses how an RMS guard in her residence was sexually harassing another female student making her feel uncomfortable.

_He was asking her out and trying to get to her room and trying to talk to her. Trying to see how far he could get with her._

_He was harassing her. She was uncomfortable about the whole thing._

Busisiwe discusses how many female students do not know how to act when an RMS guard sexually harasses them. The women are aware of the authority that the guards possess so they don’t want to offend them, however they don’t want to enter into a sexual relationship with them either.

_And some of the ladies are just from the matrics and they feel any staff members senior to them is a second adult. And we talk of security...if I say no to this guy but then the other day say I shout from the room I’m in danger whether if he takes that personally right, he wouldn’t really come._

All participants had stories relating to verbal abuse and sexual harassment on the part of RMS guards. These reports contribute to students’ perceptions that they are not safe at UKZN. Participants reported their distrust in RMS and how they feel their safety is not even considered a concern, let alone a priority. Participants voice their concerns below.

_I: So you don’t feel safe in res?_  
_Zandile: No I don’t. Not at all. Even with the RMS that is there because sometimes they sleep (laughing) so you can cry no one will hear you._
Thandeka’s excerpt indicates that there is male solidarity between RMS and other male students living in the residences. She further argues that if these male students perpetrate violence against her then she cannot expect any action on the part of RMS because RMS guards socialise with these men. This is illustrative of how the environment at UKZN in which male residence students and RMS guards form the same social group, is supportive of gender-based violence.

This is demonstrated in Faith’s story regarding her friend who transferred residences after she was assaulted by her friend’s boyfriend in her room. Below Faith describes how her friend felt like she couldn’t lay a charge against her perpetrator because her perpetrator was friends with the RMS guard at their residence. The excerpt below is what Faith’s friend told her.

“The next day I see the guy making jokes with the security guard so obviously my complaint is not going to be taken seriously. I just need to change spaces in order to feel safe.”

This depicts how facilitative environments operate, as male solidarity ensures that the perpetrators of gender-based violence are not punished, which in turn ensures the underreporting of gender-based violence. This creates an environment which supports gender-based violence.

Participants’ belief in the inefficacy of RMS facilitates the silence surrounding gender-based violence as many participants do not see the point in reporting incidents as they believe
of the participants, Zandile highlighted this when she spoke about how she knows if she was attacked, RMS would do nothing to protect her. This belief in security’s inability to prevent gender-based violence in University residences further contributes to the growing fear surrounding gender-based violence. This sheds light on why participants partake in the ‘waiting game’ in which they view gender-based violence as inevitable, because participants do not believe that University security can intervene for them. Female students know that those who are appointed to protect them (RMS) have disregarded this responsibility and have become abusers within the lives of the female student body.

One participant, Nomzamo articulates her feelings for RMS guards very aptly. This statement refers to her lack of faith in RMS guards’ ability to protect her. Her dissatisfaction with RMS guards is illustrated below when she argues that they might as well be students.

They might as well carry bags like us and attend lectures.

5. 9 Discourse of Speaking and Silence

There is a considerable amount of silence that surrounds gender-based violence and the HIV/AIDS epidemic. Often speaking about these issues is constrained by various discourses such as the discourse of male dominated relationships, sex-as-exchange discourse, stranger danger discourse and the abuse of power discourse. These discourses facilitate the silence that surrounds these issues as it naturalises this silence, making it appear normal that these issues are not discussed because they are considered private matters.
Participants speak about the silence surrounding gender-based violence, without ever really referring to the silence. Several participants speak about how gender-based violence is underreported. One participant, Ayanda speaks about how no one will ever know there is gender-based violence in residence because such things are considered private matters which are not spoken about in the public arena.

Ayanda: Violence can happen in res and nobody will ever know.
I: Why will they never know?
Ayanda: Because we kind of just have this unwritten rule that people should mind their own business.

She speaks about this unwritten rule that people should mind their own business, which refers to the silence surrounding gender-based violence. Within this discourse of silence and speaking, silence surrounding gender-based violence is never talked about directly but inferred in participants' talk. Another participant, Mathi highlights the silence surrounding gender-based violence.

I’ve never seen anyone who said “It has happened to me” not that they would. People don’t say things.

Several participants speak about how this silence surrounding gender-based violence is facilitated through the distrust of University services. This distrust refers to the University security services abusing their power and abusing female students. Participants feel betrayed by this abuse of power and consequently distrust University services. Several participants speak about how they do not believe the University addresses their complaints and therefore see no
I think there’s a lot of violence ‘coz we don’t report things. ‘Coz we know that nothing’s gona happen even if you report things nothings gona happen. So we just sit and do nothing about it ‘coz there’s nothing really you can do about it. But ja there is a lot of violence in res.

This illustrates how female residence students feel helpless as they feel they can’t report these incidents because they’ll be ignored, but they are aware that remaining silent about these incidents only facilitates further violence. The silence surrounding gender-based violence is also a response to the male solidarity between RMS guards and male residence students, which creates a facilitative environment in which gender-based violence is condoned.

Nomzamo speaks about how she feels the University conceals incidents of violence that occur in residence.

They just don’t want to talk about the reality. They just want to hide things. That’s the problem. They just hide things that they should be telling students. They just don’t tell us.

She refers to how the University does not disclose reports regarding incidents of violence that occur in University residences and this silence makes female students feel both angry and ignored.

Participants speak about the importance of speaking out against gender-based violence and reporting incidents that occur in residence. However this speaking out is constrained by their
discursive constructions

Distrust of University services which is symptomatic of the facilitative environment created by RMS guards, in which RMS guards protect male residence students and fellow RMS guards from reports of gender-based violence. This male solidarity supports the continuation of gender-based violence in UKZN residences. This leaves female students feeling powerless. One of the participants, Phumla acknowledges how female students know that they do not have a voice when they are abused because they know the University community will not recognise their experience.

Because we recognise that if something happens to you, you can’t actually... you don’t have a voice when something happens to you.

Another participant, Ayanda highlights this frustration of not having a voice when she discusses how RMS guards don’t take the complaints of students seriously.

I think they should um like if you report something I think they should take it seriously. They do not. Believe me. Only if you die or something then they pretend to be like (mimicking) “Oh we’re so sorry.” But if you complain they do not take you seriously.

Female students feel that they don’t have a voice because their experiences of gender-based violence aren’t validated by University security. Participants believe that security services do not believe them when they report such incidents. This invalidation of their experiences creates anger and hopelessness in the female student body, contributing to the growing fear surrounding gender-based violence.

5.9.2 HIV infection
Participants also highlighted the silence surrounding the HIV/AIDS epidemic. It is interesting that both gender-based violence and HIV/AIDS have considerable silence surrounding them. The male dominated discourse and the sex-as-exchange discourse cast women in a passive role regarding sexual encounters. This role disallows the negotiation of safe sex, reinforcing the silence surrounding HIV/AIDS. The fear surrounding HIV/AIDS also contributes to the silencing surrounding this issue. One of the participants, Thandeka, speaks about how HIV/AIDS is associated with shame and is not spoken about.

Even in the funerals they will never say that the person had HIV. It’s just something you know. So ja so that’s one of those things you just don’t want to bring the shame.

The extreme levels of fear which are often associated with HIV/AIDS, contribute to the silence surrounding this issue.

One of the participants, Phumla, speaks about why female residence students do not talk about HIV infection.

Phumla: Because people are generally not interested. The interest is not there.  
I: Why do you think people are not interested?  
Phumla: Because it’s not interesting (laughing).  
I: Why is it not interesting?  
Phumla: Because it’s a serious issue. It’s a serious issue. A little sensitive on other points but it’s serious and people generally don’t like to deal with serious issues unless they have to. It’s a god-given thing.

Phumla illustrates the unwillingness to discuss HIV/AIDS, as she herself avoided the topic. The excerpt above is the most detailed response she gives regarding the HIV/AIDS epidemic. She only says the term HIV three times throughout her interview, referring to HIV infection as
It. This absence of referral reinforces the silence surrounding the HIV/AIDS epidemic. This silence contributes to the spread of HIV/AIDS as the negotiations for safe sex are similarly silenced.

5.10 Conclusion

This chapter presents the seven discourses identified in the interview texts: discourses of fear; discourses of women’s responsibility; discourse of male dominated relationships; sex-as-exchange discourse; stranger danger discourse; abuse of power discourse and the discourse of speaking and silence. These discourses seek to normalise and trivialise gender-based violence in society and as a result facilitate the silence surrounding this issue. The fear and anxiety surrounding gender-based violence is a response to this normalisation and silence. The abuse of power discourse contributes to the silence surrounding gender-based violence and facilitates the fear surrounding this issue as security services not only neglect their responsibility of protecting students but harm them as well. Women are expected to be responsible for negotiating safe sex however they are unable to do so because of the dissemination of discourses which reinforce gender-inequality within relationships. The exploration of these discourses allowed us to understand how these discourses position participants in relation to gender-based violence and safe sex practices. In the next chapter these findings will be discussed more fully in relation to relevant research and theory.
DISCUSSION

6.1 Introduction

This study seeks to explore and understand the way in which discourses position female UKZN residence students in relation to gender-based violence and safe sex practices. Twelve female residence students were interviewed on these issues. The previous chapter identified and analysed discourses present in participants' talk. Chapter five identified the following seven discourses: discourses of fear; discourses of women's responsibility; discourse of male dominated relationships; sex-as-exchange discourse; stranger danger discourse; abuse of power and the discourse of speaking and silence. These discourses are organised according to the sequence of how gender-based violence and risk of HIV infection intersect in the lives of women. These discourses position women at risk of HIV infection and highlight the prevalence of gender-based violence within their lives. These discursive constructions will be discussed in relation to relevant theory and research.

6.2 Discourses of Fear

Participants framed their experience of gender-based violence within a discourse of fear. Participants position themselves in a 'waiting game' in which they are engaged in a constant dialogue of fear and anticipation. Although only one participant reported a personal experience of gender-based violence all twelve participants appeared to be affected by the constant fear and threat of trauma. Root (1995, as cited in Brown, 1995) identifies this as insidious trauma because
The fear, anxiety and anticipation present in the lives of these female students reproduces trauma in these women. However, many participants were unaware that they showed any signs of fear and anxiety, as many stated that they felt gender-based violence did not affect them. Participants spoke about waiting for something to happen. Responses like "You never know what may happen (Lebo)" and "What if something happens? (Zandile)" illustrate this waiting game that participants are involved in. Responses like these were common throughout the interview texts, representing how women exposed to this trauma may develop the following symptoms: activation of survival behaviours, heightened sensitivity, paranoid-like behaviour and hostility (Root, 1992). This trauma creates activation of survival behaviour in which women construct strategies and rules to avoid gender-based violence (Stanko, 1997). This is discussed within the discourse of women's responsibility in which many women feel that the victim has the power to prevent gender-based violence, by behaving appropriately. This however perpetrates the victim-blaming discourse, which research shows is common in the discourse of many South Africans (Human Rights Watch, 2001, Population Council, 2004, as cited in Van Rensburg, 2007).

However, although this discourse spurred women to create preventative strategies, it also constructed these women as powerless because within the discourse of fear they constructed gender-based violence as inevitable. This contradiction between discourses of fear and the victim-blaming discourse, detailed in the discourses of women's responsibility, illustrates the struggle of women to understand the nature of gender-based violence. They feel powerless to stop it but they also feel they must defend themselves in some way. These defences often take
Participants constructed HIV infection as an immediate death sentence and when spoken about, words such as 'kill', 'death', 'shame', and 'scared' were used. This depicts the fear that surrounds HIV/AIDS. HIV infection is perceived as an immediate death sentence despite proof of effective long term treatment. Although there is no cure for HIV/AIDS, medical treatment can be offered to increase one's lifespan, whilst still ensuring one's quality of life. This perception could indicate the distrust of medical care in South Africa however it could also indicate a lack of access to adequate medical services. Walker et al. (2004) reports that only nineteen percent of the population in South Africa have medical aid and subsequent access to private health care. The other eighty-one percent of the population have to access public health care facilities which are understaffed, under resourced and ill equipped to deal with this epidemic (Walker et al., 2004).

The fear and shame surrounding this epidemic contributes to the silence surrounding HIV/AIDS. This fear and shame may also hinder HIV infected individuals from accessing treatment. The association of HIV/AIDS and fear is counterproductive as it reproduces denial and disassociation in people, hindering safe sex practices and contributing to the spread of HIV/AIDS in South Africa. Research shows that the tendency to deny the presence of HIV/AIDS serves to facilitate the spread of the disease (Simabyi et al., 2005; Eaton et al., 2003; Van Rensburg, 2007).
6.3 Discourse of Women’s responsibility

These discourses illustrate how women are considered responsible for both HIV infection and for gender-based violence.

Participants constructed their responses within a victim-blaming discourse. When participants mentioned incidences of gender-based violence, most participants responded with victim-blaming statements such as “Why were you there in the first place?” (Faith). Women may position themselves within the victim-blaming discourse because blaming the victims allows them to feel safe from gender-based violence (Russell, 1984; Vogelman, 1990; Koss & Cleveland, 1997; Pitts & Schwartz, 1997; Frazier & Seales, 1997). It provides security for them because this discourse allows them to believe that if they just behave appropriately they can avoid gender-based violence. It is in this way that women build precautionary strategies to protect themselves from gender-based violence (Stanko & Radford, 1997; Miller, 1997).

Living within this discourse of fear, created by the anxiety and anticipation surrounding gender-based violence, women build strategies and rules to defend themselves. Participants constructed rules that ensured the safety of female students such as not going out at night, not wearing short skirts, not flirting, not appearing to be friendly with men, not consuming alcohol with men and not entering men’s rooms. During the discussion of gender-based violence related incidences participants always provided reasons illustrating why women were victimised. Most participants claimed that these women had broken the above rules and as a result were thought to have acted irresponsibility. This implies that these women provoked these attacks through their irresponsibility. Koss and Cleveland (1997) demonstrate the same findings and argue that some
women may believe victims precipitate gender-based violence. This finding is also similar to other research conducted amongst female UCT students, which also found that participants tended to distance themselves from the possibility of becoming a victim of gender-based violence (Dosekun, 2007). Participants distanced themselves from gender-based violence by positioning themselves in a victim-blaming discourse. Victim-blaming is a tool which women may use to distance themselves from the possibility of victimisation (Russell, 1984; Vogelman, 1990; Koss & Cleveland, 1997; Pitts & Schwartz, 1997).

However within the discourse of fear, participants understand gender-based violence as inevitable and unavoidable. Although participants create these rules and strategies which they must follow to avoid gender-based violence, they also recognise this contradiction by constructing gender-based violence as inevitable. This obvious contradiction can be seen as an attempt by these women to reclaim agency in these dangerous circumstances. However victim-blaming only further entrenches gender-inequality in society because it removes the responsibility away from the perpetrator and places it on the victim, blaming women for the violence perpetrated against them (Russell, 1984). Victim-blaming legitimises a society in which women are forced to restrict their lives out of the fear of gender-based violence (Pitts & Schwartz, 1997, p. 70). Victim-blaming also takes away a woman’s right to be angry about gender-based violence because it claims she is at fault, which leads to self blame among victims of gender-based violence (Pitts & Schwartz, 1997). As a result women are less likely to report incidences of gender-based violence because of the high likelihood that they will not be supported (Koss & Cleveland, 1997).
Participants also constructed women as being responsible for the negotiation of safe sex within a relationship. This discourse positions women as responsible for their sexual health and constructs men as ignorant regarding the risks of unprotected sex. Wilton (1997) argues that disease itself is feminised and as a result protecting oneself against HIV/AIDS is feminised. Wilton (1997) further argues that men avoid condom use because it is feminising and threatens their heterosexual male identity. It is considered feminising because condom use demonstrates a degree of control in a man’s sexual behaviour and is a caretaking activity which is a stereotypically feminine activity (Wilton, 1997).

This discourse also casts women as responsible for policing condom-use among other women. Participants spoke about reminding female friends to use condoms and constantly checked with their friends to ensure that they were doing so. Concern was expressed for women who participants suspected may not be using condoms. This heavy policing surrounding condom use was depicted as the responsibility of these women and it became clear throughout these interviews that this belief was entrenched in their talk surrounding relationships and safe sex. However, although this discourse positions women as responsible for safe sex, women are often unable to fulfil this responsibility as it contradicts with hegemonic discourses (male dominated relationships and sex-as-exchange discourses) which emphasises male dominance and power within relationships. Research demonstrates that women in relationships characterised by power imbalances are less likely to negotiate safe sex (Walker et al., 2004; Martin & Curtis, 2004; Dunkle et al., 2004; Leach, 2002; Vetten, 2000).

6.4 Discourse of Male Dominated Relationships
relationships constructs relationships as characterised by male power and dominance in which the man dictates the terms of the sexual relationship. This discourse normalises gender-based violence because it’s redefined as ‘relationship stuff’ which is then trivialised by participants. When speaking about this ‘relationship stuff’ several participants laughed, made flippant remarks and spoke in a casual tone. This trivialisation could be seen as an attempt to distance themselves from gender-based violence and as a result they do not define this ‘relationship stuff’ as violence. This emphasises how many women do not consider gender-based violence that occurs within the private domain as ‘real violence’.

Research indicates similar findings in which University students view sexual aggression as a common part of heterosexual relationships and as a result are often unable to label particular behaviour as abuse (Daniels, 2002; Koss & Cleveland, 1997; Phungula, 2007). Violence that does not fit the specific ‘stranger script’ is often not defined as such (Frazier & Seales, 1997; Koss & Cleveland, 1997; Human Rights Watch, 2001). The stranger danger discourse enables this discourse to normalise relationship violence. Most participants positioned themselves in the stranger danger discourse during the interviews but at points contradicted this discourse by making references to relationship violence. This further depicts that although research shows that gender-based violence occurs between people who know each other, women still believe that the stranger is the perpetrator (Russell, 1984; Vogelman, 1990; Vetten, 1997; Human Rights Watch, 2001). Although all participants represented men as the problem of gender-based violence, a few participants also recognised men as part of the solution. This depicts yet another contradiction, whilst emphasising male dominance within society.
A few participants cited the prevalence of emotional abuse however other participants just described it as a common part of the relationship. One participate illustrated the combination of emotional and physical abuse when she recounted how a man physically abused his girlfriend and his girlfriend’s friend because he did not approve of their friendship. This refers to emotionally abusive relationships where men monitor and control the activities of women, by setting down ground rules that women are expected to follow. Breaking such rules will provoke abuse on the part of the male partner (De Keseredy & Schwartz, 1998). Another participant recounts a story of how a girl was physically abused by her boyfriend because he believed she was unfaithful. Research shows that women in South Africa who are suspected of cheating are often beaten and raped by their partners (Human Rights Watch, 2001; Wood & Jewkes, 1997; Dunkle, et al., 2004; Leach, 2002; Walker et al., 2004).

Emotional and physical abuse becomes part of the design of a male dominated relationship because the woman is expected to be subordinate to the man and adhere to the rules he sets. If she breaks these rules then she must face the consequences of abuse. Gender-based violence is socioculturally supported when it is condoned as the punishment of women (Rozee, 1993, as cited in Koss & Cleveland, 1997, p.7) This is a cycle of abuse in which the woman is made to believe that she deserves this treatment because of her ‘inappropriate’ behaviour, which helps her rationalise this violence (De Keseredy & Schwartz, 1998). Similar to the victim-blaming discourse the blame is shifted to the victim and the violence is normalised. This depicts how abuse within the private sphere reproduces the ideology of patriarchy within wider society.
Women fear introducing condom use within this discourse because such an act is perceived as an admission of infidelity, which infers that they are sexually promiscuous (Hendriksen et al., 2007, p. 1246; Walker et al., 2004). Hence any introduction of condom use is avoided because it also infers an admission of sexual knowledge which contradicts the male dominance in sexual relationships. A woman cannot negotiate safe sex within this discourse because the power imbalances inherent in this relationship disallow such agency (Walker et al., 2004; Martin & Curtis, 2004; Dunkle et al., 2004; Leach, 2002; Vetten, 2000). This discourse is seated in patriarchal power relationships, depicting how often "the personal is political" (Hooks, 1986, p. 24). The gender-inequalities embedded in male dominated relationships hinder women from negotiating safe sex because they do not have the power within these relationships to initiate condom use. Discourse plays out in the most intimate context: the dating relationship, in which a woman's position is constructed as "naturally and rightfully inferior to men" (Wilton, 1997, p. 29). This has devastating implications for how women protect their sexual health and experience gender-based violence.

6.5 Sex-as-exchange Discourse

Several participants cited the prevalence of transactional relationships among female students. This exchange of sex for material gains is a common trend in South Africa, which often places women at risk of HIV infection because they do not possess the power to implement condom use in such relationships (Wood & Jewkes, 1997; Dunkle et al., 2004; Leach, 2002; Walker et al., 2004 Hendriksen et al., 2007). Women are unlikely to insist on condom use when material gains such as the payment of University fees, are at stake (Dunkle et al., 2004; Leach, 2002; Walker et al., 2004; Hendriksen et al., 2007; Phungula, 2007). Women are constructed as
objects to be so

and men are constructed as the buyers, determining the terms of the

transactions. This discourse operates within the same realm as the discourse of male dominated

relationships as it also emphasises male dominance and disempowers women from negotiating

condom use. This discourse of sex-as-exchange may be seen as an attempt for women to gain

power over patriarchal power relations by benefiting from such hegemonic discourses. However

these benefits are only in the form of material gains as women within these relationships are

often prevented from protecting their sexual health and placed at increased risk of HIV infection.

6.6 Stranger Danger Discourse

Most participants spoke often about the stranger casting this dark figure as the

perpetrator of gender-based violence. This discourse constructs the stranger as the source of
danger, who is seen as perpetrating violence against women. This discourse positions women

within a discourse of fear as they await this stranger danger with baited breathe. Like the victim-

blaming discourse, this discourse also allows women to distance themselves from gender-based

violence as they other gender-based violence by casting the stranger as the perpetrator

(Dosekun, 2007). However this is a misrepresentation of risk because gender-based violence is

more likely to occur between people who know each other (Vogelman, 1990; Vetten, 1997;
Schwartz, 1997; Russell, 1984). Furthermore sexual violence commonly occurs between

individuals who share some degree of consensual intimacy (Russell, 1984). However research

shows that both men and women in South Africa do not define gender-based violence between

individuals who know each other, as violence (Human Rights Watch, 2001). This distinction is

absent because any violence that does not fit the stranger danger discourse is not defined as

violence by society and is trivialised (Frazier & Seales, 1997).
The discourse of male dominated relationships makes use of the stranger danger discourse to rationalised and normalise gender-based violence. Within the discourse of male dominated relationships the stranger danger discourse is used as a tool to designate gender-based violence to the private domain to ensure the silence of its victims. Violence that is not perpetrated by a stranger is not defined as such and not spoken about (Frazier & Seales, 1997; Hooks, 1986).

Within the male dominated relationship discourse women do not discuss these incidences as they fit into the category of ‘relationship stuff’. Research shows that the better acquainted a woman is with her perpetrator the less likely she is to talk about her experience (Koss & Cleveland, 1997, p. 6). Women, who do report gender-based violence that has occurred within the context of a relationship, are often accused of whining as their complaints are trivialised because they do not fit the stranger script (Koss & Cleveland, 1997). Patriarchal power relationships underlie these discourses as they support the misrepresentation of risk and the silence of women. This ensures that women do not report incidences, which creates a facilitative environment for gender-based violence.

Most participants positioned themselves within the stranger danger discourse, however many participants contradicted themselves by representing the perpetrator as the stranger and then proceeding to describe gender-based violence that occurred between individuals who knew each other and were often dating. This contradiction could be interpreted as the unwillingness of some women to accept that men they know are more likely to hurt them then strangers. Acknowledging this contradiction would strip women of their stranger danger discourse which they use to distance themselves from gender-based violence.
6.7 Abuse of Power Discourse

This discourse refers to a particular situation in which the individuals, who are entrusted to protect you, use their power to abuse you. This refers to the University security services (RMS) that are entrusted to protect the student body. However participants report that RMS guards are neglecting this responsibility and are sexually harassing and verbally abusing female students. This discourse is based on a construction of betrayal in which female students both distrust and fear RMS. All participants had a negative perception of RMS, which facilitates the underreporting of incidences of gender-based violence because all participants believed RMS were incapable of protecting them and providing assistance. This facilitates the discourse of silence surrounding gender-based violence, contributing to the spread of gender-based violence at UKZN. However research conducted amongst female students at Rhodes also indicates that female students do not report incidences of gender-based violence because they distrust University services (De Klerk et al., 2007). However De Klerk et al. (2007) research did not find reports of sexual harassment and verbal abuse amongst Rhodes University services, unlike these research findings which depict gross abuse on the part of RMS.

This abuse of power constructs female students as helpless because they cannot trust the services put in place to protect them. Research indicates that often women do not report incidences of gender-based violence because of several factors such as lack of faith in institutions and the fear of victim-blaming (Russell, 1984; Vogelman, 1990; Dosekun, 2007). The insensitive and hostile treatment of female students at UKZN only further exasperates the situation, deterring students from reporting incidents and implementing change to improve the
Another relevant component of this discourse is the male solidarity between male residence students and RMS guards. A few participants reported that RMS guards socialise and drink with male students in residence. Participants highlighted how reporting incidences of gender-based violence would be futile because the RMS guards are often friends with the perpetrators and would protect them. Koss and Cleveland (1997) argue that the perpetrator’s peer groups provide supportive environments which facilitate gender-based violence. The solidarity between male residence students and RMS guards create a facilitative environment which supports gender-based violence because perpetrators are protected by RMS guards and as a result female students are discouraged from reporting incidences of gender-based violence. It also important to note that RMS guards, who perpetrate violence are also protected by virtue of their status and by other guards. It is in this way that gender-based violence is facilitated within the environment of UKZN residences, as perpetrators are rarely if ever punished (Koss & Cleveland, 1997). This absence of punishment ensures that women are silent regarding gender-based violence because speaking out against this issue is not condoned within this environment. The unsupportive treatment of women reporting gender-based violence and the absence of punishment of perpetrators, only further ensures the continuation of gender-based violence (Koss & Cleveland, 1997).

6.8 Discourse of Speaking and Silence
This discourse constructs women as silent regarding gender-based violence and HIV/AIDS, whilst simultaneously expressing the desire to speak out against these issues. This discourse is supported through various channels: discourses of fear; discourse of male dominated relationships; sex-as-exchange discourse; stranger danger discourse and the abuse of power discourse. The silence surrounding gender-based violence is facilitated through the underreporting of incidents. Violence that occurs within a dating relationship is not referred to as violence because it does not fit the stranger danger discourse and is hence not spoken about in the public domain (Frazier & Seales, 1997; Hooks, 1986; Koss & Cleveland, 1997).

Within the male dominated discourse women do not initiate condom use because this contradicts male power and dominance within the relationship. Women are hence silenced as they do not possess a dominant role in sexual encounters and any introduction of condom use is perceived as an admission of infidelity (Hendriksen et al., 2007, p. 1246; Walker et al., 2004). Similarly within the sex-as-exchange discourse, women do not have the power to negotiate condom use as their relationship is characterised by male dominance.

The abuse of power discourse prevents female students from reporting incidences of gender-based violence because of their distrust of University services, hence silencing these women. The solidarity between RMS guards and male residence students ensures that perpetrators of gender-based violence are rarely punished, resulting in the unsupportive treatment of women who report incidences of gender-based violence. This creates a facilitative environment in which gender-based violence flourishes (Koss & Cleveland, 1997). This
Facilitative environment ensures the silence of women because women living within this environment believe that reporting incidences is futile.

Participants expressed the desire to speak out against gender-based violence and HIV/AIDS however their voice is constrained by their distrust of University services, fear; the presence of a facilitative environment and the nature of male dominated relationships. The silence surrounding HIV/AIDS is exasperated by the fear-producing messages associated with the epidemic, hindering safe sex practices and contributing to the spread of HIV/AIDS. This silence surrounding gender-based violence and HIV/AIDS supports patriarchal power relations within society as it takes away the power of women to speak out and change their situation.

6. 9 Conclusion

The discourses presented by the women in the study predominantly positioned women as disempowered and helpless with regard to gender-based violence and safe sex practices. It is interesting that within all the discourses “men are the constructors, women the constructed” (Triechler, as cited in Wilton, 1997, p. 55). This demonstrates the patriarchal power relations which are reproduced through these discourses. Women are constructed as being responsible for both gender-based violence and safe sex. However these discourses construct relationships as characterised by gender-inequality and power imbalances, in which women do not possess the power to negotiate safe sex. Within these male dominated relationships gender-based violence is normalised because violence that does not fit the stranger danger discourse is often not defined as such.
The nature of these relationships silence women regarding the issues of gender-based violence and HIV/AIDS. Several of the discourses found reinforce the silence surrounding gender-based violence and HIV infection. The victim-blaming discourse reinforces this silence as many women do not report incidents because they fear others will blame them. The victim-blaming and stranger danger discourse also allows women to distance themselves from gender-based violence. The distrust of University services amongst female students and the presence of a facilitative environment, which protects the perpetrators of gender-based violence, further contributes to the silence surrounding gender-based violence. These discourses all work together to sustain the prevalence of gender-based violence in society. Analysing these discourses shed light on the difficulties women face with regard to gender-based violence and negotiating safe sex. It is only through the analysis of these discourses that we are able to identify alternatives and make recommendations for improved change.
CHAPTER SEVEN

CONCLUSIONS AND RECOMMENDATIONS

7.1 Introduction

This purpose of this research was to explore how female UKZN residence students understand and experience the issues of gender-based violence and safe sex practices. A social constructionist approach was used to explore how female UKZN residence students’ talk reveals the ways in which they construct their understanding of these issues. The objective of the study was to understand the way in which discourses positioned participants in relation to gender-based violence and safe sex practices. This research aimed to understand the intersection between gender-based violence and HIV infection. Twelve female residence students from Howard College Campus at UKZN were interviewed and these interview texts were analysed using discourse analysis. The findings of the research position themselves within seven discourses: (a) discourses of fear; (b) discourses of women’s responsibility; (c) discourse of male dominate relationships; (d) sex-as-exchange discourse; (e) stranger danger discourse; (f) abuse of power discourse and (g) the discourse of speaking and silence. The researcher presents a final reflection of her experiences of the research. A brief overview of the major findings and conclusions drawn from the research are then presented. This is followed by the researcher’s recommendations and final conclusion of the study.

7.2 Final Reflections
At the close of this study it is important to emphasise that this research was for women, not about women (Huisman, 1997). It aimed to shed light on how women experience and understand gender-based violence and safe sex practices. Hopefully the recommendations discussed in this chapter will be used to improve the lives of female residence students at UKZN. As the researcher, I am aware of the issues that face women because as a woman these are my issues. I have personally valued the experience that this research has afforded me as I have gained insight into the challenges facing women.

One of the participants in this study, Amanda speaks about these challenges that we face as women: “We face rape. We face all things.” She is only nineteen and she is already aware of the implications of what being a woman means. These experiences of fear and anticipation of gender-based violence appear to be interconnected with womanhood (Stanko, 1997). Arguments centre on the question: when does a girl become a woman? What rite of passage marks this transition? I began this research calling my participants girls and after my interview process I started calling them women. It felt wrong to call them girls after they shared their experiences with me. These women spoke of the realisation that their femaleness, their bodies were the site upon which this danger played out. I think that when a woman begins to realise that her body is a site of conflict and struggle, something she has to protect and fear something changes in her. I think that is the point when girls transition into womanhood and take on the challenges that accompany this journey. Men are socialised to be sexually aggressive and women take on the responsibility of avoiding and fending off unwanted advances (Huff, 1997). This ‘responsibility’ is unfortunately part of being a woman.
As a woman my own identity and emotions are wrapped up in this research, because essentially this research is about me. I cannot avoid the gaze that it has cast on my own life and the extent to which it has changed me. My experience writing this dissertation has expanded my understanding of what it means to be a woman and the burden we all carry. I am grateful to my participants for allowing me to enter into such an understanding.

7.3 Overview of Research Findings

7.3.1 Discourses of Fear

Research findings revealed that female residence students live within a malaise of fear, which is factored into their daily lives. It determines their daily activities and behaviour. This fear is generated by the threat of gender-based violence and general feelings of unease about their safety as women. These women also express considerable fear when discussing the issue of HIV/AIDS. These extreme levels of fear can create disassociation and denial in individuals, hindering safe sex practices. The fear surrounding HIV/AIDS will contribute to the silence surrounding this epidemic, hindering the negotiation of safe sex.

7.3.2 Discourses of Women’s Responsibility

Findings also revealed that female residence students feel responsible for both gender-based violence and negotiating safe sex. They are positioned as responsible for implementing condom use and policing the condom use of other women. These women also participate in a discourse of victim-blaming in which they assert that the victim precipitates gender-based violence. Women who act “inappropriately” become targets for abuse because their behaviour
as wearing short skirts, going out at night or consuming alcohol with men is considered to place women at risk of gender-based violence. Female students construct strategies to avoid gender-based violence, shifting the responsibility of violence from the perpetrator to the victim. Engaging in the victim-blaming discourse will only further contribute to the underreporting of gender-based violence and enable the dissemination of hegemonic discourses surrounding violence against women.

7.2.3 Discourses of Male Dominated Relationships

Findings have shown that female residence students are either in male dominated relationships or are likely to enter into such relationships. These relationships are characterised by male power and dominance in which the man determines the terms of the sexual encounter. Abuse is also normalised within these relationships and considered in some instances as a means of disciplining one’s partner. This imbalance of power makes it difficult for women to negotiate safe sex and as a result women within these types of relationships are at higher risk of HIV infection. Entering such a relationship will place female students at increased risk of HIV infection and abuse.

7.2.4 Discourse of Sex-as-Exchange

Findings reveal that many female residence students are engaged in transactional relationships in which sex is exchanged for material gains such as University fees, clothes or food. Women who enter into these relationships are exposed to the same risks as women involved in male dominated relationships as they also experience difficulties implementing
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condom use because of the power imbalances inherent in their relationships. Entering into transactional relationships places female students at higher risk for HIV infection and abuse.

7.2.5 Discourse of Stranger Danger

Findings reveal that many female residence students consider strangers to be the perpetrators of gender-based violence. This is a gross misrepresentation of risk because the literature has already established that a woman is more likely to be abused by someone she knows then by a stranger. This places female residence students at greater risk because they are not aware of the possible sources of danger within their own lives.

7.2.6 Abuse of Power Discourse

Findings have revealed that University security services (RMS) are responsible for sexually harassing and verbally abusing female students. Female residence students also feel that RMS aren’t fulfilling their responsibility of protecting the student body and believe they are beyond reproach. The continuing inefficiency of RMS will contribute to the further spread of gender-based violence and the general lack of safety on campus. Female residence students are placed in a vulnerable position as they are exposed to the abuse of RMS guards and are unable to protect themselves because the services put in place to protect them are the ones responsible for the abuse. The solidarity between RMS guards and male residence students create an environment in which the perpetrators of gender-based violence are rarely punished and women that do report incidents are not supported. This environment further facilitates the spread of gender-based violence at UKZN.
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7.2.7 Discourse of Speaking and Silence

Findings depicted considerable silence surrounding gender-based violence and HIV/AIDS. Women do not discuss gender-based violence amongst their female peers because it is considered a private matter. However women discuss condom use amongst each other. This is an interesting paradox. Findings revealed that female residence students feel they don’t have a voice at UKZN because they argue that their complaints aren’t taken seriously. This contributes to the silence surrounding gender-based violence as many female students don’t see the point in reporting incidents or even talking about them. This distrust of University services, which perpetrates this silence, will continue to contribute to the spread of gender-based violence at UKZN.

7.4 Recommendations

Recommendations based on the findings, analysis and conclusions of this study, will be discussed below. The recommendations comprise of: (a) recommendations for University policy and practice; (b) recommendations for sex education; (c) recommendations for intimate partners and (d) recommendations for further research.

7.4.1 Recommendations for University Policy and Practice

These recommendations aim to inform practice and policy at the University of KwaZulu-Natal regarding the safety of female students vis-à-vis gender-based violence and HIV infection. Hopefully these recommendations will be used to improve the lives of female residence students at UKZN and shine awareness on the issues of gender-based violence and HIV infection. The
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Implementation of these recommendations will hopefully elevate gender-based violence as a priority at UKZN.

Research findings indicate that University security services (RMS) are responsible for verbally and sexually harassing female students. It is recommended that RMS guards undergo sexual harassment training in which they are taught to identify what behaviour is constituted as sexual harassment and the inappropriateness of this behaviour. RMS guards should be informed that if they disobey rules outlined in the rules governing University security personnel, they will be reprimanded. There should also be an anonymous forum in which students can report complaints against RMS, without fearing reproach from guards. Students reported that RMS guards neglect their responsibility of protecting the student body and are complacent about such matters. Measures should be put in place to ensure that RMS guards are carrying out their duties efficiently and effectively. Warnings should be issued to guards who fail to fulfil their duties properly and guards who receive several warnings should be fired from their position. Training should be carried out in which RMS guards are briefed on their job description; the rules governing University security personnel and the consequences of failing to fulfil their work duties and failing to comply with the rules. RMS guards should also undergo gender-sensitivity training. This will ensure that RMS guards treat female students with sensitivity and respect, which will combat the problem of underreporting of gender-based violence. It is important to start to develop trust between the University security services and the student body. Hopefully these measures are the first steps to doing so.
The development of support groups on campus and in residences will provide a space in which women feel free to speak about their experiences of gender-based violence and be given emotional support. Such groups will help break the silence surrounding gender-based violence and will provide a forum in which women can explore the issues of gender-based violence and HIV infection. These groups will allow female students to speak out against gender-based violence and it is through breaking this silence that women will become aware that gender-based violence doesn’t occur between strangers but between people who know each other. The perpetrator is not a stranger but more likely your boyfriend, date, friend or acquaintance. This will combat the misrepresentation of risk present in the findings.

7.4.2 Recommendations for Sex Education

Research findings indicate that HIV/AIDS is associated with extreme levels of fear, which facilitates silence and hinders condom use. Sex education should shift from producing fear surrounding HIV/AIDS but to issues surrounding negotiating safe sex in relationships. Sex education should focus on strategies for negotiating safe sex and implementing condom use in sexual encounters. Focus should also be placed on maintaining respect, reciprocity and equality within relationships to ensure that women have the power to speak about issues such as condom use. Sex education should be aimed at both men and women so the responsibility of HIV infection is not solely placed on the woman but is a shared effort. This partnership of responsibility will facilitate safe sex practices and decrease a couple’s risk of HIV infection.

7.4.3 Recommendations for Intimate Partners
This research has highlighted the area of intimate relationships as a site of risk for women, in which they are exposed to increased risk of gender-based violence and HIV infection.

Extensive research has shown that women commonly share some degree of previous consensual intimacy with their perpetrator (Russell, 1984; Vogelman, 1990; Vetten, 1997; Human Rights Watch, 2001). Research also demonstrates that women in relationships characterised by male dominance and power imbalance are less likely to negotiate safe sex (Walker et al., 2004; Martin & Curtis, 2004; Dunkle et al., 2004; Leach, 2002; Vetten, 2000). However the problem of making recommendations for this area of risk is that these recommendations are often not directly operational. There needs to be a shift in the nature of relationships from relationships characterised by male dominance and gender-inequality to relationships characterised by gender-equality and shared decision-making. However male dominated relationships are symptomatic of the wider patriarchal society. To ensure that the nature of relationships shifts, the prevailing gender-inequalities in society need to change.

Gender role socialisation contributes to gender-inequality and patriarchal power relations in society. There needs to be a shift in the way men and women are socialised to interact with one another. Vogelman (1990) argues that a society absent from the sexual objectification of women and male domination would experience decreased levels of gender-based violence. Social strategies need to be developed in which women are no longer seen as sexual objects and male dominance, aggression and authority are no longer glorified (Vogelman, 1990). This shift in prevailing social relations in society will ensure that relationships are no longer dangerous sites of risk for women. When women are in relationships characterised by shared decision-making, mutual respect and gender-equality they are more likely to be able to negotiate safe sex and less
likely to be directly exposed to gender-based violence. Making recommendations for a shift in the way men and women interact and advocating the demise of patriarchal society is applicable, however at present these goals appear to be unattainable in South Africa’s current climate where gender-inequalities, violence against women and patriarchal power relationships flourish.

7.4.4 Recommendations for Further Research

The researcher recommends further studies be conducted on gender-based violence in tertiary institutions in South Africa. There is sparse research in this area, despite alarming statistics citing the prevalence of gender-based violence in South Africa. Future research should focus on evaluating University services and improving the policy and practice regarding gender-based violence on campus. More comprehensive research needs to be conducted on University security services at UKZN, in which female students’ claims of abuse on the part of RMS are fully investigated. There is also a need for more comprehensive research which explores the interrelationship between gender-based violence and HIV infection. There also needs to be more definitive research in South Africa on why people do not report gender-based violence.

7.5 Final Conclusion

Every woman faces the challenges of gender-based violence and the risk of HIV infection. These challenges are embedded in the fabric of their daily lives. The findings of this research reveal that women live in a world where they are constantly anticipating danger and unknowingly constructing strategies to avoid this danger. Women’s precautionary strategies to avoid violence are evidence of the wider patriarchal power relations in society. Risk is located in intimate relationships where boyfriends, dates, friends and acquaintances are the most likely
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Women often construct strangers as the perpetrators of gender-based violence, which is common and indicates a misrepresentation of risk. Intimate relationships are often characterised by male dominance, gender-inequality and power imbalances, placing women at risk for gender-based violence and HIV infection. Women in these relationships often do not possess the power to negotiate safe sex and as a result are unable to protect their sexual health. The gender-inequality and male dominance present in intimate relationships are also further evidence of the prevailing gender-inequalities and patriarchal power relations present in society.

The stranger danger discourse allows women to distance gender-based violence from occurring in their immediate social worlds, protecting them from the ever present fear of gender-based violence. However women are faced with a conundrum in which their beliefs about stranger danger are placing them at risk as it prevents them from identifying the danger in their own relationships. The security of the stranger danger discourse needs to be abandoned as women can no longer portray the perpetrator as the faceless stranger but must acknowledge that the perpetrator is often someone they know and care about. This acknowledgement will help break the silence surrounding violence against women as women’s stories will no longer be shrouded in darkness but brought out into the light.

Victim-blaming discourses need to be cast aside because as women how can we expect to end gender-based violence when we are still blaming each other? As a researcher and a woman, I have often wondered: how can we expect to comfort those who are exposed to gender-based violence whilst simultaneously disbelieving them and invalidating their experiences? If women
feel that they can’t even tell each other about these experiences then the silence surrounding this area becomes understandable. This research demonstrates the burden that women carry throughout their lives, in which they are exposed to constant fear and trauma. The lack of freedom afforded to women as a result is evident. As a researcher and a woman I recognise the effect that gender-based violence has on us as women. How it changes us a bit every day. What I want more than anything is to be free. I want to live in a time where womanhood is not defined by the point at which a woman realises that her body is something to be feared and protected. This research shone a light on how women can never be free in a society where gender-based violence is prevalent, but more importantly it has given these women a voice.


Dosekun, S. (2007). We Live in Fear, We Feel Very Unsafe: Imagining and Featuring Rape in South Africa. *Agenda: Empowering Women for Gender Equity, 74*, 89-99.


Appendices
CONSENT FORM

Date: __________________

Dear Participant,

Thank you for considering participating in this research study. I am currently a Psychology Research Masters student at the University of KwaZulu-Natal. For purpose of my degree, I am conducting a research study.

The title of this research is "Discursive constructions of gender-based violence and safe sex practices among female residence students at UKZN".

This research aims to develop a deeper understanding of how female residence students at UKZN negotiate sexual boundaries and safe sex practices in their relationships. This research also aims to develop a clearer understanding of gender-based violence on campus and will be used to develop suitable policy and intervention. This research intends to improve conditions on campus, hopefully creating a safer environment for all female students at UKZN.

TERMS OF AGREEMENT

- Your participation is completely voluntary.
Your responses will be confidential, and your identity will not be revealed. Pseudonyms will be used, and any individual information that may uniquely identify you will not be included.

- Should you agree to participate in this study, I would like to conduct an interview with you to explore the following areas: the negotiation of sexual boundaries and safe sex practices. The interview should last approximately an hour to an hour and a half, and a follow-up may be required.

- Should you agree, you are free to withdraw from the study at any time.

- Should the interview raise any emotionally difficult issues for you we will provide adequate counselling and support.

- A copy of the informed consent will be given to you.

- Copies of the final research will be made available to you at your request.

- This research will be used to improve the lives of female residence students at UKZN.

Your participation is greatly appreciated.

If you require additional information, please feel free to contact either of the following:

Sarah Gordon (Researcher) Anthony Collins (Supervisor)

Home: 031 563 9576 Work: 031 260 2539
Cell: 084 563 6539 Cell: 082 459 0881
E-mail: 205508991@ukzn.ac.za E-mail: collinsa@ukzn.ac.za
INTERVIEW SCHEDULE

What are the problems facing you and other women living in residence?

Relevant areas will be probed in the discussion of this question such as:

- Participant’s perception of the incidence of violence on campus and general feelings of safety and fear.
- The negotiation of sexual boundaries in relationships.
- Safe sex practices and issues surrounding condom use.
- Whether students are concerned about the risk of HIV infection.
- How women reduce their risk of gender-based violence in their own lives and whether these measures are effective.
- Measures the university could utilise to prevent and improve the situation regarding gender-based violence on campus.
- How the university could facilitate safe sex practices in residences.
MAPPING DISCOURSES

Illustrating the sequence of how gender-based violence and risk of HIV infection intersect in the lives of female residence students at UKZN.

Discourses of Fear
- The Waiting Game

Discourses of Women’s Responsibility
- Victim-blaming
- Woman’s responsibility for HIV infection

Discourse of Male dominated Relationships

Sex-as-Exchange Discourse

Stranger Danger Discourse

Abuse of Power

Discourse of Speaking and Silence
- Gender-based Violence
- HIV Infection
WRITTEN CONSENT FROM STUDENT HOUSING

*See next page for a copy of written consent from student housing.