UNIVERSITY OF KWAZULU-NATAL

A CULTURE OF VIOLENCE AND HIV/AIDS: A STUDY OF ADOLESCENT
MALES IN KWAMASHU TOWNSHIP

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DECLARATION

I MAROYI WILLY MULUMEODERHWA declare that

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(ii) This thesis has not been submitted for any degree or examination at any other university.

(iii) This thesis does not contain other persons’ data, pictures, graphs or other information, unless specifically acknowledged as being sourced from other persons.

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(v) This thesis does not contain text, graphics or tables copied and pasted from the Internet, unless specifically acknowledged, and the source being detailed in the thesis and in the References sections.

Signature:
ACKNOWLEDGEMENTS

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ABSTRACT

Male sexual violence is prevalent in South Africa. This study examines the attitudes and behaviour of young Zulu men towards their peer females and offers an understanding of the complex factors influencing male attitudes and behaviour towards females. The study found that men feel that they are in charge, and they cannot control their sexual urges. Therefore, when they are aroused, they believe that their girlfriend/partner/wife must meet their sexual needs. If women are reluctant to have sex, it is ok to force them to do so.
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CHAPTER ONE: INTRODUCTION

1.1 INTRODUCTION

Sub-Saharan Africa remains the region worldwide hardest hit by HIV/AIDS epidemic. An estimated 1.9 million people were newly infected with HIV in sub-Saharan Africa in 2007, bringing it to the number of 22 million of people living with HIV infection. Two thirds (67%) of the global total of 32.9 million people lives with HIV in this region, and three quarters (75%) of all AIDS deaths in 2007 occurred in Sub-Sahara (UNAIDS, 2008).

South Africa is currently one of the most severely affected countries. There were approximately 5.7 million people living with HIV in South Africa at the end of 2007, and almost 1,000 AIDS deaths occurring every day (UNAIDS, 2008). The prevalence of HIV among young adults is now around 25 percent. Kaufman et al (2002) in their longitudinal study conducted among young adults in KwaZulu-Natal indicate that people who are particularly vulnerable are those who are about to assume adult roles and responsibilities. They also mention that the statistics suggest a high level of unprotected sex and unsafe sexual behaviour in the midst of high levels of HIV knowledge.

Male attitudes and behaviour are having a severely negative impact on the wellbeing of women and children, and expose them to sexually transmitted disease and violence. While men are central to these problems, they are often excluded from the proposed solutions (Friedman et al, 2006, p.152). There is increasing awareness and concern about sexual violence against women. The South African constitution and laws give rights and protect women against all kinds of abuse, and there is also a large number of non-governmental organizations that play an important role in bringing awareness and prevention of woman abuse. However, as Gentry (2004, p.7) notes, while women have a new legal status, this has not changed the social nature of gender discrimination or sexual violence to any extent. The implementation of laws that address gender equality has been characterised by systematic discriminatory attitudes and practices amongst law enforcement agencies and health service providers; by lack
of distribution of resources; by ignorance, training and skills provision. These factors have contributed to under-reporting of incidents of violence against women, low conviction rates of offenders, and increasing of HIV infection rates (CADRE, 2003).

The spread of HIV/AIDS is associated at both individual and social levels with numerous interlinked contributory factors. Brummer (2002) and Collins and Rau (2002) argue that it is not only psychological factors that determine the spread of HIV, but also sociological, economical, political and historical factors. Instead of focussing on a narrow one aspect of HIV/AIDS epidemiology, researchers have to look at the interaction of different factors that induce the spread of HIV. Lurie’s (2000, p. 343) study of migration and HIV/AIDS conducted among migrant men from Hlabisa and Nongoma districts in northern KwaZulu-Natal, corroborates that the spread of HIV/AIDS infection is not only the result of individual actions but is also influenced by the political, social and economic organisation of a society. Wood et al (2008, p. 43) also argue that South Africa’s complex social and political history has produced conditions for interpersonal violence.

Unequal power in sexual relations is implicated in the sexual transmission of HIV in many respects (CADRE, 2003). The inability for women to negotiate the timing of sex and the conditions through which it occurs is due to the social factors such as the high rates of sexual violence, the poor economic position of women, and their inability to insist on condom use. These factors render women powerless to protect themselves against HIV infection (Ackermann and De Klerk, 2002). The economic and social conditions in which most South African women live grant them little bargaining power. Women are aware of the power imbalances and double standards operating within constructions of love and sex, but they find that resistance is difficult because of male violence and cultural norms and expectations (Ackermann and De Klerk, 2002, p.169). Cichocki (2007, p. 3) maintains that South Africa is a patriarchal society where men have the social, political and economic power that make women unable in making decision that impact their lives, including the use of safer sex methods.

Young people are vulnerable due to social and economic tendencies that may encourage HIV spread, including the globalisation of youth culture and deterioration
of economic conditions. Changing cultural values, poor economic prospects, and high prevalence of HIV/AIDS may bring social disillusionment and encourage those young people who are already socially or economically marginalized to engage in unsafe sexual practices (Collins and Rau, 2000). Brummer (2002), using semi-structured in-depth interviews with Basotho mineworkers in South Africa, emphasises that young people’s vulnerability is related to the social, cultural, economic and political environment of individuals, families, communities and societies and occurs in situations where people are limited in their ability to make free and informed decisions. The scarcity of livelihood options may oblige the poor to engage in behaviour that put them at risk (Baylies, 2000). Collins and Rau (2000), in a comparative study on HIV/AIDS as a problem of development, explain that poor people, in an attempt to improve their earnings, are likely to use strategies that put them at risk of contracting HIV/AIDS. One is migration in search of work and another is poverty-driven commercial sex work. The desperation that encourages migration and engagement in commercial sex work may also breed a sense of fatalism with respect to HIV/AIDS. In these contexts, taking care to avoid HIV/AIDS may seem a less urgent concern for poor people than simple survival.

Fear of violence can decrease a woman’s motivation to take protective action at the time of sex. Partner violence and the fear of violence prevented girls from saying “no” to sex and negotiated condom use (Wood et al, 1998). The threat of violence can result in behaviour - including unsafe sex - that is known risk factor for getting HIV infection (UNESCO, 2005). Fear of violence can also make women hesitant to insist on condoms use, as women are looked upon as “less people”, and men believe that women are promiscuous and unfaithful when they ask their partners to use condoms. Asking for condom can lead to rape or physical violence as a form of punishment (Cichocki, 2007, p. 3).

In her narrative study on sexual decision-making and negotiation among rural and urban Zulu young people aged 11 to 24, Varga (2003, p. 160) indicates that young men’s relationships appear to be driven by pressure from peers and partners to engage in early unprotected sex as part of trust and commitment. In particular, the behaviour of men has to be investigated in order to uncover the social dynamics that increase their vulnerability to this disease.
To understand adolescent male behaviour involves an understanding of their social identities and of the social conditions within which such identities are constructed. For instance, the action of condom use or non-use cannot be understood without taking into account the context in which men see their virility as compromised by using condoms. Simply telling people to use condoms may have little effect, because it ignores the broader social context of masculine identity that makes the negotiation of condom use a difficult process.

From the social constructionist perspective of gender identity, masculinity is considered as part of an ideology that recommends the values, traits and behaviours that men should have (Kimmel, 2000). These traditional constructions of gender serve patriarchal purposes by encouraging the socialisation of males to develop those characteristics that are functional for attaining and maintaining power (Pulerwitz and Barker, 2008; Kimmel, 2000). According to this conceptual framework, any cultural location provides a type or several kinds, of accepted behaviours for men and women. These gender norms, which are imparted to young men by their families, peer groups and social institutions, are interpreted and adopted by men. Individuals also renew these norms by essence of putting their own attitudes on the gender norms around them, and as members of society, these individuals influence the broader norms (Pulerwitz and Barker, 2008). MacPhail and Campbell (2001, p. 1616) confirm that young people conduct their sexual lives through attitudes and behaviours that have been constructed through their membership of particular societies and communities.

This conceptual framework also highlights that certain models of manhood or masculinity are promoted in specific cultural settings, and the meaning of masculinity varies from culture to culture, and within a given culture, is modified over time as individuals and groups reconstruct them. These gender norms bring specific men to vary according to how much they adhere to them (Kimmel and Messner, 1992; MacPhail and Campbell, 2001). Furthermore, this conceptual framework also understands gender as constructed from power relations and reinforced through ongoing interactions between men and women. Power is the basic point that shapes the construction of male role, and gender role socialisation provides the mechanisms by which males are trained to maintain power. These characteristics are thought to
promote male aggression and a predisposition toward violence. The patriarchal structure of society, through the socialisation of its males, perpetuates sexual violence against women. As such, attitudes toward women may be derived from the ideology of gender that is predominant in that society (Pulerwitz and Barker, 2008).

The narratives produced in this study should be understood within the broader social context in which they were produced. It is beyond the scope of this thesis to deeply explore the historical context of South Africa while investigating on its culture of sexual violence but the construction of young people’s attitude and behaviour is certainly influenced by social, political and economic factors and these factors have also implications for the ways in which heterosexual relationships are constructed and narrated.

1.2 MOTIVATION FOR THE STUDY

Given the alarming rate of sexual violence in South Africa, it is possible that forced sex has become the norm in certain communities. Men and women, boys and girls may be victims of violence, but men perpetrate most violence. They are always the most frequent perpetrators of sexual violence towards women (Boonzaier, 2008), although not all men are in this category. Many studies in South Africa have investigated women as victims of violence, but few have dealt with the men who are the perpetrators of this violence. The unequal balance of social power between young men and women in Africa, combined with the patterns of risk behaviours among young men, means that young men play a key role in shaping the future of the epidemic. Specifically, we must consider how their risk behaviours are learned and reinforced, in order to dispose how young men can be engaged as protective forces (Barker and Ricardo, 2005, p.35). Accordingly, the present study focuses on the attitudes and behaviour of a group of adolescent males towards women. Its importance is obvious when it is realised that the sexual behaviour of men is fundamental driving force of the HIV/AIDS pandemic. Since men control much of what happens in the sexual relationships, significant progress in reducing HIV risks in South Africa may occur when men’s attitudes and behaviour are targeted (Kalichman et al, 2005).
1.3 OVERALL OBJECTIVE AND SPECIFIC AIMS

The overall objective of this thesis is to examine the existence and strength of beliefs and practices that influence male attitude towards females.

The specific aims are:

1. To review relevant literature on male attitudes towards women and male behaviour towards women in South Africa; and the link between male behaviour and the spread of HIV/AIDS
2. To determine the attitudes of a sample of urban Zulu youth towards women and sex
3. To investigate the sources of these attitudes
4. To investigate the relationship between these attitudes and behaviour
5. To propose ways of building more peaceful attitudes and behaviour from the perspective of the culture of peace

1.4 STRUCTURE OF THE THESIS

Chapter One will motivate the overall project by identifying the central problem to be investigated, that is, male attitude and behaviour in relation to the culture of violence and the current HIV/AIDS pandemic; its relevance to South Africa and more specifically to my data sample. Chapter Two will review the relevant literature by focusing on selected empirical studies relevant to male attitudes and behaviour towards females. Chapter Three will describe the research methodology used. It will discuss how the study will be conducted and will justify the choice of data collection methods used. Chapter Four outline the results of qualitative data analysis. Chapter Five will offer a discussion of the findings of the preceding chapter and a conclusion. The conclusion summarises the research discussed and provides recommendations for further research.
CHAPTER TWO: LITERATURE REVIEW

2.1 INTRODUCTION

Violence is the result of the complex interplay of individual, relationship, social, cultural and environmental factors. No single factor explains why some individuals behave violently toward others or why violence is more prevalent in some communities than in others (Krug et al, 2002, p. 346). Understanding how these factors are related to violence is one of the important steps to preventing violence.

South Africans have a propensity towards violence that may have its roots in traditional culture supplemented by the direct and structural violence of apartheid. In South Africa, violence has long been used in communities as a method of controlling women, punishing their everyday acts of insubordination and resolving conflict (Wood and Jewkes, 2001). Friedman, et al (2006, p.154) indicate that South Africa is traditionally a male dominated and patriarchal society, where women are frequently exploited or abused, supported by a culture that reinforces this. This may justify the aggression which men resort to asserting their power and dominance against the perceived weak individuals in the society. In this context, sexual violence is an assertion of power and aggression in an attempt to reassert the rapist’s masculinity. Women living in such environment may have difficult to make decisions that impact their lives, including the use of safer sex methods.

There are many factors inducing men to be sexually violent. Some of these factors are related to the attitude, beliefs and behaviour of the individuals involved, while others are deeply rooted in social environment. The reason for this vulnerability may include factors relating to poverty, lack of information, lack of economic and social empowerment, and lack of protective methods (Meel, 2005). It has been suggested that men are often reacting as victims themselves in their everyday lives, leading them to pay no attention to their own safety from HIV/AIDS and to commit violence against those weaker than themselves (Campbell, 2000).
Certain behaviours - such as forced sex - may be considered by some people as acceptable cultural practices, but are still regarded as violent acts (Krauss, 2006). Francis (2004, p. 54) explains that when people think of violence, they usually have in mind behaviour of a kind calculated to harm others, whether psychologically or physically.

Societal norms around the use of violence as a means to achieve objectives have been strongly associated with the prevalence of rape (Krug et al, 2002, p.162). Violence may increase a woman's risk for HIV infection through forced sexual intercourse (Maman et al, 2000). Francis (2004) demonstrates that typical official culture in some societies has shifted away from sanctioning violence, but the underlying culture persists and violence continues. Wood et al (2008, p. 43) sustains that South Africa’s complex social and political history has produced conditions for interpersonal violence. Rose-Innes (2006) indicates that men often use violence in order to maintain their status in society and prove that they are “real men” by keeping women under their control.

2.2 MALE ATTITUDES TOWARDS WOMEN AND SEX

Among rural Zulu male youth, for example, there is strong sense of entitlement as regards sexual gratification by their girlfriends (Sathiparsad, 2006). Men’s thinking of manhood is intimately linked with the ideas about sexual gratification and having other physiological ‘needs’ provided by a woman partner (Boonzaier, 2008). These attitudes will influence male behaviour towards females.

South African men may hold negative attitudes toward women, including attitudes that encourage sexual violence, such as the acceptance of rape myths (Jewkes et al., 2002; Jewkes & Abrahams, 2002, Wood and Jewkes, 2001). Sathiparsad and Taylor (2006, p.127) in their descriptive study among male learners attending public high school in rural KwaZulu-Natal, male participants confirm that men consider women to bear sole responsibility of HIV spreading. They believe men are AIDS-free in respect of transmission. Kalichman et al (2005) examine attitudes towards female and
sexual-violence encouraging beliefs (i.e., acceptance of culturally-defined rape myths) in a sample of South African men and women at high risk for HIV transmission, and find that gender attitudes and rape myth acceptance is associated with greater risks of HIV infection in both men and women.

Krug et al (2002, p.149), in a report raising awareness about violence throughout the world, indicate that coerced sex may result in sexual gratification on the part of the perpetrator, though its underlying purpose is frequently the expression of power and dominance over the person assaulted. Qualitative studies in South Africa demonstrate that men believe they are more powerful than women and they are expected to control women in their relationships (Jewkes et al., 2001; Morrell, 2002). Boonzaier’s (2008) in her narrative study conducted among women and men in Western Cape, South Africa finds that men exert pressure on females to be sexually intimate with them. They do so by indicating that women do not gratify them sexually, and thereby also attacking their lack of conformity to the traditional standards of femininity.

Men use their decision making power to justify their sexual coercion. Varga (2003), in her studies of Zulu speaking young people, demonstrates that most male participants agree that a girl cannot resist her boyfriend advances. Because he is a real man, he must not allow the girl to stop him. He must win and get what he wants. Male participants also emphasise that this action is cultural; man has to take decisions and woman to follow it.

Andersson et al (2004) in national cross sectional study conducted among South African young people indicate that participants report when a girl says ‘no’ for having sex, men interpret this to ‘yes’. Men have used the two assumptions to force girls who are unwilling to have sex. Varga (2003, pp. 163-164) corroborates that an urban boy in South Africa explained, “When women say “no” they mean “yes”. A woman can never come out clearly and say “Let’s do it.” You need to read her facial expression… If she keeps on saying “no” and closing her eyes, she wants it “sex”. Varga (2003) also demonstrates that the association between female self-respect and sexual coyness as a strategy often encourages socially acceptable violent sexual encounters. A survey conducted in KwaZulu-Natal reveals that 36% of girls were coerced into their first sexual beginning (Manzini, 2001). Same view is widely held in South Africa that a
boyfriend must use force in the first sexual encounter with a new girl (Jackson, 2002). Such a view may predispose men to the culture of violence, and encourage unwanted sex to take place.

For many men, female consent to sexual intercourse is not considered. Where this attitude is the prevailing one, women are less likely to demand the right to say no. Varga (2003) indicates that 84 percent of respondents identified the male partner as having the sole right to decide when to initiate sex in a relationship. Kalichman et al (2005) report that one in five participants in their South African study agreed that rape occurs as a result of the actions of a woman and that she is the one to be blamed for it. Wood et al (1998), in a qualitative study reporting on Xhosa-speaking adolescent pregnant women, found that male violent and coercive practices control sexual relationships. Conditions and timing of sex are fixed by their male partners through the use of violence and through the exchange of certain constructions of love, intercourse, and entitlement to which the teenage girls were expected to submit. Female peers who indicated that silence and submission was the appropriate response enforced the legitimacy of these coercive sexual experiences. Such a position may encourage men to justify their sexual coercion towards their partners.

African adolescents presume that they have a natural or biological need for sex and cannot control themselves. This makes it acceptable for them to expect sexual agreement in their relationship and to have multiple partners (Varga, 2003). For these men to have multiple partners emphasize cultural traditions in which sexual conquest is a status marker; male discourses often place a high value on multiple sex partners. Male having multiple sex partners is accepted in the community (Hallman 2004, p. 21). For men having multiple partners may also be a symbol measuring masculinity and success among one’s friends where men have multiple partnerships, this action is regarded as a tradition right (CADRE, 2003). The consequence of these may be higher incidence of HIV/AIDS among women. This can be quite reasonably described as a chain of violence, which leads to higher rates of HIV infection amongst females.

An ethnographic study examining multiple-sexual partners in historical perspective in KwaZulu-Natal reveals that women who seek education and other opportunities have been scorned as izifebe (loose women) and today the disciplining of rebellious women
as loose still serves to strengthen male power. The insult of *isifebe* is also given to women who challenge traditional gendered roles in the home and elsewhere. With this in mind, it is easier to see how men can adhere to differential claims over multiple-partners embodied in concepts such as *isoka/isifebe* that, while threatening to their lives if enacted in multiple-partnered relationships, reiterate gendered power in broader spheres of everyday life (Hunter, 2005, p.398).

Several studies have addressed the issue regarding male attitudes towards women; these are summarised in the table overleaf.
# Table 2.1: Studies examining men’s attitudes towards women

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Who was studied</th>
<th>Methods</th>
<th>Main findings</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural Ugu KwaZulu-Natal</td>
<td>2006</td>
<td>12 male learners, 16-24 year old</td>
<td>- Qualitative method</td>
<td>- Male participants attribute the spread of HIV/AIDS to women’s behaviour,</td>
<td>Sathiparsad and Taylor (2006)</td>
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<td></td>
<td></td>
<td></td>
<td>- Focus group and individual interviews</td>
<td>- Women are viewed as being carriers of HIV infection</td>
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<tr>
<td>Cape Town</td>
<td>2005</td>
<td>415 men and 127 women</td>
<td>- Quantitative method</td>
<td>- Some participants stated that women are not allowed to discuss sex with men</td>
<td>Kalichman et al (2005)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Logistic regression</td>
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<td></td>
<td></td>
<td></td>
<td>- Linear regression</td>
<td>- 27% of participants agreed that rape results from things that a women says or does</td>
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<tr>
<td>Cape Town</td>
<td>1996-1997</td>
<td>2,233 male Xhosa-speaking patients aged 21-35</td>
<td>- Quantitative method</td>
<td>- Most of participants state that women have no right to refuse sex, and that women should be submissive to men's sexual prowess</td>
<td>Meyer-Weitz et al (2003)</td>
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<td></td>
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<td>- Interview-administered questionnaires</td>
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<td>- Exploratory chi square</td>
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<tr>
<td>Study</td>
<td>Year</td>
<td>Participants</td>
<td>Methodology</td>
<td>Findings</td>
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<tr>
<td>Petersen et al (2005)</td>
<td>2003</td>
<td>10 boys and 8 girls aged 14-16</td>
<td>Qualitative rapid focused ethnographic method - In-depth interviews and focus groups</td>
<td>Boys were early socialized into traditional patriarchal notions of masculinity, which endorse and legitimise unequal gendered power relations. Boys believe that they should have sex as a maker of their masculinity revealing as a stronger factor that influence men who do not have a partner to rape.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2006</td>
<td>309 men aged 26-36</td>
<td>Questionnaire - Rape Myth Acceptance Scale</td>
<td>Negative attitudes towards women were associated with a high level of HIV risk behaviour, and that the approval of traditional male roles negatively linked with HIV risk behaviour. Attitudes towards women were connected to relationship control, such that the more negative are a man’s attitudes towards women, the more relationship control he is likely to have.</td>
<td>Kaufman et al (2008)</td>
</tr>
</tbody>
</table>
2.3 MALE SEXUAL BEHAVIOUR TOWARDS WOMEN

The rate of male physical violence against females in South Africa is generally acknowledged as being amongst the highest in the world. This may occur for a number of reasons e.g. in reaction to a female who is reluctant to satisfy a male’s sexual needs, rape of virgins as protection against HIV/AIDS, and refusal by males to practice safe sex, possibly in conjunction with having multiple sexual partners and in deliberate ignorance of their HIV status (Jewkes & Abrahams, 2002).

Wood (2005, p. 312) in an ethnographic study carried out among young people in an urban township in the former Transkei region, indicates that there is an assumption of gender equality has been distorted in favour of patriarchal notions that men and women are inherently in hierarchical relation with each other, and that men can and should play a disciplining role in regard to women’s “transgressive” behaviour – such as “disrespecting” their partner, being sexually unfaithful, undermining their boyfriends' relationships with other women, and refusing sex. In South Africa, violence has become ordinary to a large extent accepted rather than challenged (Jewkes and Abrahams, 2002; Wood et al., 1998). The male violent behaviour towards females is learned from an early age. Delinquent peer groups have been distinguished as training ground for ‘aggressive masculinity’ associated with sexual coerciveness (Hallman, 2004).

South Africa remains a male-dominated society where violence against women is at high level, though gender equality and freedom to express one’s sexual orientation is protected in the new constitution. The use of violence by men to control and punish women in particular situation is considered as social norms accepted to all ages and sexes (Jewkes and Abrahams, 2002).

Ackermann and De Klerk (2002) indicate that men beat their partners if they are seen talking to other men. In some cases control over women was reinforced by violent ways, including gang rape, especially when she is suspected of having other sexual partners is gang-raped by her partner’s acquaintances to punish her. Such practice is reported to occur in the community (Ackermann and De Klerk, 2002, p. 167; Walker et al, 2004; Wood et al, 1998). Wood (2005, p.309) explains that a young man
organises for his friends to have sex with his girlfriend as a way of ending the relationship when he was “tired” of her - because she would not wish to continue the relationship following this ordeal – and/or as a way of “teaching her a lesson” when she had been sexually unfaithful and made herself into isifebe (“bitch”), or if she had been behaving in other ways which publicly undermined his sense of masculinity. Several participants acknowledged their participation in this practice that aims to discipline the woman, destroy her “confidence” and humiliate her, while reinforcing group bonding through her being “shared” with the young man's male friends.

Violence and coercion, including intimidation and forced sex, are regular characteristics of young people’s sexual relationships and in adult intimate relationships in sub-Saharan Africa (MacPhail and Campbell 2001; Wood and Jewkes 2001). Forced sex has become the norm in male-female relationships in South Africa, it makes difficult for young women to protect themselves against unwanted sexual intercourse, pregnancy, HIV infection, and other sexually transmitted diseases. (Friedman et al, 2006, p.156). MacPhail and Campbell (2001) in a qualitative study conducted among young people in the township of Khutsong, in South Africa declared that they have tricked young women into sex, and used physical violence against women in order to have sex them. This culture of sexual violence has several social, political and economic explanations (Friedman et al, 2006).

Wood et al (1998) describe in their studies in Umtata that male violent and coercive practices dominated sexual relationships. Many females described their first sexual intercourse as resulting from deception or being forced by their partners. Some mentioned that their partners would continue to have sex with them despite their verbal refusal. Almost all the women reported experienced violence from their male partners, being beaten on multiple occasions particularly when they refused to have sex, when trying to end the relationship and when using contraceptives. A report by UNICEF et al (2002) points out that forced first sex has been identified as one of the risk factors for HIV infection among girls, joined with the fact that their first sexual experience is often coerced.

A baseline study conducted among male students in Eastern Cape finds that partner rape is re-interpreted by victim as a norm generating from overwhelming affection.
Men who are not boyfriends may also force women into sex in acts that come to mark the commencement of relationships (Jewkes et al, 2006b). Ackermann and De Klerk (2002, p. 167) demonstrate that whether strangers or intimate partners inflict sexual violence, the fact remains that violence increases women’s risk of exposure to HIV/AIDS. It is therefore impossible for women to negotiate safe sex in a culture of gender violence.

A subset of forced sex concerns the rape of virgins in the belief that this provides protection for men against HIV. There are regular accounts of HIV/AIDS-infected men who rape young women, especially virgins, misguided in the belief that they may cure themselves of the disease by passing it to uninfected individuals. This belief was reported to be common in South Africa. Leclerc-Madlala (2002) in an ethnographic research in peri-urban settlements of KwaZulu-Natal province deduces that the escalation of rape of young girls and children in South Africa could be partially attributed to this belief. In a study conducted in a nationwide survey involving 269,705 adolescents in South Africa 12.7 % of respondents believed HIV/AIDS could be cured by having sex with a virgin (Andersson et al, 2004), such an attitude predispose female children and girls to high risk of HIV/AIDS epidemic. Another study in one of Zulu townships, male respondents of 15-23 years old reported that virgins were seen as safe and there is no requirement of using condoms (Tillotson and Maharaj, 2001). Taylor et al., (2007) in their cross sectional descriptive study on virginity test in KwaZulu-Natal, showed that child rape is a major concern and the fact of identifying girls as virgins place them at risk. Beliefs such as this give people a false meaning of their level of risk, and play a major role in confusing people how HIV is transmitted.

Table 2.2 gives an overview of male behaviour towards women from a number of recent studies.
Table 2.2: Studies examining men’s behaviour towards women

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Who was studied</th>
<th>Methods</th>
<th>Main findings</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural Eastern Cape</td>
<td>2002-2003</td>
<td>1,295 women aged 15-26 years</td>
<td>- Quantitative method</td>
<td>- 59% of women have been raped by a man who was not a partner,</td>
<td>Jewkes et al (2006a)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Questionnaire administered during a baseline interviews</td>
<td>- 95% of men reported having raped an intimate partner</td>
<td></td>
</tr>
<tr>
<td>Rural KwaZulu-Natal</td>
<td>2002-2004</td>
<td>101 male and 199 female students aged 18-24 years</td>
<td>- Qualitative method</td>
<td>- Men reported hitting a partner or forcing her to do something if a female partner acted in ways that upset them,</td>
<td>Harrison et al (2006)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- In-depth interviews</td>
<td>- Men reported more sexual partners, and not using condoms</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Psychometric test measure</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Administered individual questionnaire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-Nine South African provinces -1418 South African schools</td>
<td>2002</td>
<td>269 705 school pupils aged 10-19 years</td>
<td>- Quantitative method</td>
<td>- 15.8% of participants reported that they prefer to have unprotected sex</td>
<td>Andersson et al (2004)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Questionnaires</td>
<td>- 65.8% of Men claimed to have forced women to have sex, and that would put women at high risk of HIV infection</td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>Year(s)</td>
<td>Participants</td>
<td>Methods</td>
<td>Findings</td>
<td>Source</td>
</tr>
<tr>
<td>--------------------------------</td>
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<td>--------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>---------------------------------------------</td>
</tr>
</tbody>
</table>
| Cape Town                      | 2006     | 435 men 18-26 years old | - Quantitative Questionnaire  
- Logistic regressions                                                     | - 12% of participants have attempted to use force to have sex with women, | Kalichman et al (2007)                        |
|                                |          |              |                                                                          | - 19% of men reported that they have used force to have sex with a woman, |                                             |
|                                |          |              |                                                                          | - From these findings, it was obvious that men who had sexually assaulted a woman were more likely to have had multiple sex partners without using condoms. |                                             |
| 70 rural villages in the Eastern Cape province | 2002-2003 | 1370 male volunteers aged 15-26 years | - Quantitative Baseline structured questionnaire in face-to-face interviews | - 44.3% of men claimed that they have raped an intimate partner and also raped a non-partner, | Jewkes et al (2006b)                        |
|                                |          |              |                                                                          | - 60.8% had rape a non-partner, |                                             |
|                                |          |              |                                                                          | - 8.4% of men have been sexually violent towards an intimate partner.    |                                             |
2.4 MALE SEXUAL BEHAVIOUR AND THE SPREAD OF HIV/AIDS

2.4.1 RELUCTANCE TO PRACTICE SAFE SEX

Negative attitudes towards condoms, as well as difficulties negotiating with their use contribute to the risk of HIV/AIDS in South Africa. Condoms have strong associations of unfaithfulness, lack of trust and love, and disease. Women are afraid to insist on condoms use, because men believe women are promiscuous and unfaithful when they ask for condoms. Condoms are associated with promiscuous women. This act also leads to rape, gang rape, or physical violence as a form of punishment especially when women ask for condoms. Women are looked upon as “less worthy people” (Abdool-Karim, 2001; Cichocki, 2007; Rose-Innes, 2006; Varga, 2003). Women who had been sexually assaulted are more likely to have been physically abused by partners; therefore, they are frightened to ask their partners to use condoms (Kalichman et al., 2005). Kaufman and Stavrou (2004), in their longitudinal study conducted among young adults in KwaZulu-Natal, indicate that many African female respondents maintain that it is not usual or easy to discuss sex and sexual issues. Girls worry that if they discuss sexual issues with their partners they can be misjudged. Condom use is reported to be consistently lower in these types of sexual encounters.

South African women reasons for non-discussion of condom use entail fear that they would appear not to trust their partners, or that their partners would suspect infidelity (Abdool-Karim, 2001; Hallman, 2004), leading to the possible result of being physical, emotional abuse (Hallman, 2004). Women are also hesitant to insist on condoms use because of fear of violence, as men believe women are promiscuous and unfaithful when they ask for condoms (Cichocki, 2007). Within sexual relationships, women are often compelled to give priority to their partners’ needs and wishes. Thus, women often decide not to ask men to use condoms, or do not persist in asking, because of concerns about men’s sexual satisfaction (Jewkes et al., 2003).

MacPhail and Campbell (2001) demonstrate that participants in their studies also supported that they wouldn’t trust young women who carried condoms. Young women have to gain a relationship by being dependable. Women are unwilling to talk about condoms when negotiating sex as condom use is stigmatised as a sign of
infidelity, and becomes a major risk to sexual health. This behaviour inhibit the potential effort of constructing social norms, and consequently for changing high risk sexual behaviour.

The obstacle to use condoms in South Africa includes negative beliefs and attitudes about condoms. Condom use is also associated with a lack of love and trust, which includes an association with even HIV/AIDS, as well as beliefs that usage of condom, reduces sexual pleasure and that condom use can be dangerous (Kelly, 2000). Meyer-Weitz et al (2003) in a quantitative study conducted among 2,978 Xhosa-speaking patients in Cape Town demonstrate that many of current negative beliefs and attitudes about condoms are entrenched from gender constructions with such as a perception that condom usage results in a "waste of sperm." This notion means that the expression of sexuality is moved by the desire for sex and importance of procreation and is thus a clear picture of how gender constructions impact negatively on condom use.

MacPhail and Campbell (2001) indicate that in South Africa the inequality of power diminishes the female voice in sex negotiation, and negative attitudes towards condoms internalised by young men dominate relationships. South African young women experience violence in the course of their sexual relationships that lessens their abilities to either refuse sex or negotiate condom use. In instances such as these the chances for women to insist on condoms are very small. Kaufman and Stavrrou (2004) reveal that for many young girls in rural areas, their first experience is a “forced one” by their uncles or cousins, particularly in instances where young girls’ fathers are migrant workers.

Women who suggest using condoms with a resistant sex partner may experience harmful consequences, including threatening the masculinity of their partner, raising partner suspicions about their monogamy or sexual histories, finding themselves at risk to further violence, being abandoned, and losing their partner's financial support (Ackermann and De Klerk, 2002; Maman et al., 2000; Wood & Jewkes, 2001; Wood et al, 1998). These situations render women unable to raise the issue of safer sex for fear of a violent response.
Cichocki (2007, p.3) indicates that women are economically dependent on men who are sources of their income, and feel an obligation of obeying their partners’ wishes in order to maintain the relationship. Abdool-Karim (2001) corroborates that such a situation put women in position where they are unable to negotiate safer sex and condom use because they are more dependent on their partners for survival. And again, because of male-dominated power, they have little or no choice regarding safer sex and condom use (Cichocki, 2007).

Hallman’s (2004, p. 24) study conducted among young women and men aged 14-24 years in KwaZulu-Natal indicates that for young people in South Africa, condom use is a difficult topic to introduce in conversation. The introduction of condom use as a topic of discussion with a sexual partner could result in emotional, physical, or “economic” abuse. Poor young people, especially females, are the most disadvantaged in discussing sensitive topics with their sexual partners. Ackermann and De Klerk (2002) confirm that economically dependent women are not likely to opt for the “safe” choice if it means a considerable loss in income. Discussing sensitive topics may threaten the stability of the relationship, with potential negative consequences for female’s economic security.

2.4.2 HIV/AIDS AND POVERTY

Hallman (2004) indicates that young people who live in underprivileged areas are more likely to find themselves in situations that are conducive to high-risk behaviour. If a sexual relationship provides economic security, poor young women may have much more to lose by mentioning such sensitive issues in their dialogue. Another possibility is the ending of the relationship; since low wealth is associated with fewer economic substitute options, poor young women may fear losing the economic benefits derived from a relationship.

Poverty and lack of parental incomes are also mentioned as primary reasons for young women to trade sex for goods or favours or to engage in relationships that involve financial support (Hallman, 2004; Kelly and Parker, 2000). Kaufman and Stavrou (2004) indicate that gifts have great impact on young people’s sexual behaviour, and play a role in negotiating sex and in altering expectations of sexual activity. Clearly
those young people who are economically disadvantaged are at risk of exchanging sexual favours - often unprotected sex - for money or other financial rewards.

The social and economic contexts in which young people negotiate their sexuality are an influence on their behaviour. In his study investigating how relative socio-economic status influences the sexual behaviours of young women and men aged 14-24 years in KwaZulu-Natal Province, an environment characterized by high HIV prevalence and high rates of poverty and inequality, Hallman (2004, p.2) states that relative economic disadvantage is found to significantly increase the likelihood of a variety of unsafe sexual behaviours and experiences. Low socio-economic position not only improves female chances of exchanging sex for money or goods, but also increases female chances of experiencing coerced sex, and males and females of having multiple sexual partners. Low socio-economic status has more consistent negative effects on female than on male sexual behaviours; it also raises females’ risk of early pregnancy and the propensity of unsafe sexual behaviours. Changing cultural values, poor economic options, and high prevalence of HIV/AIDS along with low expectations of concrete changes in the near future may bring social disappointment and encourage some young people, particularly those who are already socially or economically marginalised, to engage in unsafe sexual practices (Collins and Rau, 2000). Whiteside (2001) corroborates that poverty has played - and continues to play - an important role in the spread of HIV infection.

Collins and Rau (2000, p. iv) indicate that desperate people, who attempt to improve their income, adopt strategies that are contributing to the spread of HIV/AIDS. One is migration in search of work, within countries or across borders. A second is poverty-driven commercial sex work. Both place men and women in particularly high-risk situations, especially when considering that institutions providing normal support for stable family relations are absent. Both would be largely prevented if adequate opportunities for making a living were available at home. In situations of extreme poverty, the risk of HIV infection will not be the main concern of people. Poverty can compel women and young girls into selling sex for food, money or services (Brummer, 2002). For some people, HIV/AIDS infection is the first major disaster in their lives. But for other people, the disease is just an additional problem on top of many others. It is important to realize that, in the latter context, taking care to avoid
HIV/AIDS may seem a less immediate concern for them than simple survival (Collins and Rau, 2000, p. iv).

Finally, Hallman (2004, p. 24) indicates that poverty, low education, and lack of parental guidance and support can influence young people’s sexual behaviours by reducing access to information about safe sex practices or by inhibiting their ability to put such knowledge into practice. While information alone is not enough to bring about changes in behaviour, information remains a prerequisite.

### 2.5 DETERMINANTS OF MALE ATTITUDES

Male attitudes - masculinities (Morrell, 2001) - towards females come from a number of sources, including tradition (including the possibility that different groups within South Africa have different traditional attitudes towards women), apartheid (e.g. the disruption of normal family life by the migrant labour system, the education of the population in the ways of violence). These various sources will influence male attitudes towards females.

Ethnographic studies on relationships of young people highlights that South African men perceive masculinity in terms of number of sex partners, and the ability to control girlfriends (Wood and Jewkes, 2001). Thus, across cultures and communities, aspects of attitudes such as the centrality of sex, the importance of physical strength and control over females consistently emerge as key to the cultural concept of masculinity (Morrell, 2002). Boys are socially expected to engage in practices considered inappropriate for girls, and more emphasis is placed on sexual behaviour as a means for them to gain respectability (Varga, 2003, p.164). These elements negatively influence men’s sexual behaviour towards women (see section 2.4) and consequently enhance the spread of HIV/AIDS epidemic.

In understanding male attitudes towards women, it is first important to explore the causes of male violence against women that has become widespread in South Africa. Although there is no one cause or explanation for these patterns of male violence against female, there are several probable contributory factors.
Coercion plays a major role in initiating young women into sexual activity, as we have seen, in South Africa. The practice of forced sex is the norm for young African men who are driven by pressure from peers to engage in early-unprotected sex as makers of trust and commitment (Varga, 2003). Social pressure that prescribes that boys and men should have sex relations as a mark of their masculinity emerges as a strong factor influencing males who do not have partners or cannot get sexual intercourse legitimately; then they have to get it illegitimately (Petersen et al., 2005). Men justify the violence towards females as an enforcement of patriarchal masculinity (Boonzaier, 2008).

Men indicate that women are responsible for gender violence, and claim to be victims of biased legal system. They position themselves as powerless victims of domineering partners. Men discuss this in terms of gender identity crisis and thus perceive shifts in the power dynamics of their relationships due to the new South African constitution that empowers women (Boonzaier, 2008, p. 184). Despite the shifts in the power dynamics, the reality is that women are still traditionally considered as passive, obedient, docile and fulfilling traditional gender roles, especially in relationships (Ackermann and De Klerk, 2002; Kalichman et al, 2005). Several studies also confirm that men view women as subordinate to men and suggest that this is well understood when looking at the gender-power differentials in South African relationships (Maman et al., 2000; Wood & Jewkes, 2001; Wood et al., 1998). Boonzaier (2008) reports that men view their partners as domineering, they use violence to reassert their expected dominance in the relation because of such assumptions.

South African culturally gender roles encourage power inequality that facilitates women's risks for both sexual assault and HIV/AIDS (Morrell, 2002). Jewkes and Abrahams (2002) confirm that where there is gender-power inequality that put women in subordinate roles, women have few options for exercising personal control in their sexual relationships. If sex is not willingly provided, many men in the community feel that they can insist on it as being a necessary part of a relationship and as proof of their girlfriend's love. Violence and coercion are often used on unwilling sexual
partners (MacPhail and Campbell, 2001, p.1623). Consequently, women may experience difficulties in their efforts to lessen their risks for HIV infection, including risks for sexual violence in gender-power imbalanced relationships. Socially constructed gender roles and sexual scripts limit the possibility for women to reduce their risks for HIVAIDS (Ackermann and de Klerk, 2002; Maman et al., 2000; Wood & Jewkes, 2001). Kalichman et al (2005) indicate that South African women do not open discussions about safer sex because it is culturally unpleasant and also because it brings their own sexual behaviour into question. In this context the practice of safer sex behaviours greatly depend on men's commitment to it (Meyer-Weitz et al, 2003). Culturally approved gender roles promote inequality of power that causes women's risks for both sexual assault and HIV (Morrell, 2002).

Entrenched patriarchy, male social dominance, transactional sex and inequality in sexual relations places women at risk of unwanted pregnancy and infection especially as in many instances, it is men who decide to have sex, with whom and whether to use a condom (Friedman et al, 2006).

Varga (2003) demonstrates that a boy in Zulu culture gains esteem of manhood by being chic and employed, and being sexually active and aggressive, and might be judged by his experiencing repeat incidence of sexually transmitted infection. Sexually transmitted disease is regarded as a source of pride and virility for the rural Zulu male. Hunter (2005, p.394) confirms that for urban men in the 1950s, penetrative sex (as opposed to ukusoma that is non-penetration sex or thigh sex) had become a mark of manliness, and yet the embarrassing symptom such as syphilis reminded men of the risks of a masculinity that celebrated multiple-sexual conquests. Varga (2003) also indicates that the cultural value of childbearing amongst young people is estimated as a means of attaining masculine or feminine social integrity.
2.5.2 APARTHEID

South African history has left in its legacy a diversity of violent masculinities. This reflects the turbulence of the passed that may have been the cause of that turbulent past (Morrell, 2001). A culture of violence with its roots in apartheid and political struggle has grown and become endemic, dominating South African society over many years, spilling over into sustained and increasing levels of criminal and political brutality (Friedman et al, 2006, p.154). This view resonates with those of Parkes (2007, p.402) who states that apartheid has left a legacy of continuing inequality in economic and social circumstances. The ongoing struggle and transition has left many men with a sense of powerlessness and apparent emasculation. Rose-Innes (2006) contends that migrant labour during the apartheid regime contributed to the high levels of poverty, gender inequality, social instability and unsafe sexual practices that now continue to influence the spread of HIV/AIDS.

The migrant labour system has been for the most part an important way for HIV transmission (Rose-Innes, 2006). Brummer (2002) indicates that HIV/AIDS is closely linked to the process of migration. Migrants - and mobile populations in general - have played an important role in the spread of HIV in the southern African region. The consequences of apartheid such as the migrant labour system and massive population removals are responsible for much of the disease and illness in this society (Lurie, 2000, p.343).

Throughout the apartheid era, violence was used as weapon to ensure control, obedience and interracial conformity (Moodie, 2001). Apartheid’s disregard for human life generated a culture of violence. A black woman’s life, in particular, was considered valueless, and what had happened to her unimportant. It was not just the whites who committed rape, some men in the African National Congress (ANC) raped their female comrades or women associated with other political organizations (Gentry, 2004, p.3). Gentry (2004) also indicates that when remaining attitudes from conflict is linked to current social problems, the establishment of a systemic problem

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may be in development. This may suggest that boys today, especially in rape cases, have inherited such a practice.

African and coloured groups may have developed “non-traditional” sexual behaviours because of the massive efforts to destabilise these communities, including removing parental figures through an enforced migratory labour system (Cichocki, 2007). Van Donk (2002) illustrates that migrant labour system that separates individuals from their families was a main characteristic of apartheid preparation that remains prominent to this day. Generations of children grew up without fathers and often without mothers as well. Children leave without parents’ love in childhood find it more difficult to develop loving relationships with other people as they grow up. And when they become adult treat others badly, and they show no regret. Apartheid created several generations of children like this, and HIV/AIDS is creating several more, as the number of child-headed households grows. Rose-Innes (2006) also indicates that migrant labour continues because of unequal development and employment expectation, both within the country and in neighbouring African states.

Lurie (2000) argues that if one were to design a social study in an attempt to construct the conditions conducive to the spread of HIV and other sexually transmitted diseases, you would remove several hundred thousand rural men from their families, accommodate house them in single-sex hostels, provide them with cheap alcohol and easy access to commercial sex workers and allow them to return home periodically, which creates environment conducive to risky sexual behaviour. Brummer (2002) indicates that the above situations describe the situation of gold miners and numerous other migrant labourers working throughout South Africa today.

African population live in former homelands, an inheritance of apartheid (Moodie, 2001). African society is constructed around largely self-sufficient homesteads, where most rural areas were dependent on migrant labour (Hunter, 2005). Migration became common among rural men seeking employment in urban and mining centres, and this persists today (Lurie et al, 2003). A higher proportion of economic scarce resources within these areas forced many African male to work as migrant labourers (Rose-Innes, 2006). Consequently, men were periodically separated from their regular wives or partners and engaged in unsafe transactional sex outside of their stable
relationships (Lurie et al, 2003; Moodie, 2001; Rose-Innes, 2006), and making use of the sex-work industry that developed in the neighbourhood. The migration became a network of spreading HIV/AIDS infection. The migrant labourers during this period were prevented from settling where they worked in the urban areas, and then rented the single sex hostels that accommodating them. They maintained links with their families in rural areas by moving between the two. This back and forth migration has probably been a major factor in spread of HIV infection as men frequently become HIV-infected at their place of work, and then carry the infection back home and pass it on to their wives (Lurie et al, 2003; Rose-Innes, 2006). Manhood aspiration in the mid-century placed men in an extremely ambiguous position; building a rural home and family forced men to work in towns and yet the consequences of this separation often undermined the very institution men sought to construct (Hunter, 2005, p. 395). Such situations could highly expose male to HIV infection.

Hunter (2005, p.394), in his studies on multiple-sexual partners in historical perspective in KwaZulu Natal, demonstrates that it is not only men who sexually misbehaved during that the time of apartheid, but also a number of women did have extra-marital affairs with a certain level of implicit approval. They called a secondary lover isidikiselo, the top of a pot, while the first man, the ibhodwe, was the main pot; metaphors closely linked to women's need for sexual relations, and sometimes support, when her husband was working in the towns.

2.5.3 POPULATION MOBILITY

The precious section showed the centrality of labour migration to the apartheid system. Mobile populations may be exposed to HIV infection than non-mobile populations. People’s vulnerability refers to their social, cultural, economic and political environment, and arises in circumstances where people are limited in their ability to make free and informed decisions. Many poor people desperately look for livelihood that offers the promise of survival. This often involves migrating from their villages to towns and cities and other places where they hope to find employment. For some women the pressure of poverty may lead them to engage in sexual transactions in order to support themselves and their families. As we have seen, poverty-driven
migration for work and commercial sex work are two of the activities most commonly linked with risk for HIV infection (Collins and Rau, 2000).

Lurie (2000, p.353) states that migration has been an important determinant of the spread of infectious diseases, and has contributed to the extraordinarily rapid spread of HIV. Brummer (2002) informs that the mechanism that connects migration with sexual behaviour is the change of environment. The environment in which migrants are living is likely to differ from the social and cultural environment at home and migrants may not have contact with good sexual health services. Migrants face many problems living in a new environment. This may effect on their mental and physical health. High-risk behaviour such as sex with multiple partners is not only the result of migration, but it is also the result of alienation, of loneliness, of being separated from family and regular partners, and the breakdown of traditional family units.

Brummer (2002) also shows in his study of labour migration and HIV/AIDS in South Africa that some mineworkers stay without their women for four weeks, and visit them one day a month. Consequently, they have transaction sex with prostitutes. Mineworkers have worries that their distant rural wives or girlfriends might be unfaithful; worry about their children growing up without a father's guidance; and sometimes they feel guilt about money they might have wasted on drink and commercial sex which they should have sent to their families. The life situation of mineworkers in a range of contexts renders them particularly vulnerable to HIV infection.

2.6 CONCLUSION

Since I completed my literature review, a significant study by Jewkes et al (2009) showed just how prevalent male violence against women is in South Africa. It reports that 27.6% of a nationally-representative survey of 1738 African males in KwaZulu-Natal and the Eastern Cape said that they had raped a woman or girl and that 4.6% said they had done so in the last year. 42.4% said that they had been physically violent to an intimate partner, and 14% said that this had happened in the last year. The focus of the current research is based on the attitudes and behaviour of adolescent males towards women. In the above studies referred to in the literature review, we have
disclosed many contributing factors (including traditional beliefs and practices, apartheid, and socioeconomic) to the spread of HIV/AIDS that help fuel male attitudes and behaviour towards women. Consequently, these attitudes and behaviours may bring women to a limited capacity of negotiating the conditions under which sexual intercourse occurs.
CHAPTER THREE: RESEARCH METHODS

3.1 RESEARCH DESIGN

The research methodology used in this study is qualitative. Opinions, attitudes, personality, emotions, motivations, interests, personal problems, mood, drive and frustration are relatively complex and hence more difficult to capture quantitatively than variables that can be empirically verified (Baumgatner and Clinton, 1998). In short, they lend themselves to qualitative approach using such specific methods as focus groups and personal interviews.

3.2 PROJECT AREA

Data collection was carried out at NqabakaZulu Comprehensive High School in KwaMashu Township. KwaMashu Township is an urban residential location outside of Durban, in the Province of KwaZulu-Natal, where almost residents describe their ethnic and linguistic background as Zulu. KwaMashu is twenty miles north of Durban. It is one of the poorest areas in Durban where the unemployment rate amongst youth is estimated to be about 60 percent. It is the largest of three townships in the area (Inanda and Ntuzuma are more rural with a lower population density). The township has a population of between 800,000 and one million people. There are still many people staying in informal settlements surrounding KwaMashu. The area is associated with high rates of sexual violence, crime and HIV infection. Among the nine South African provinces, KwaZulu/Natal has consistently had the highest antenatal HIV prevalence, which in 2006 was 39.1% (South Africa Department of Health, 2007).

3.3 STUDY SAMPLE

The study focused on African male students from NqabakaZulu high school. Varga (2003) indicates that South African boys are earlier initiated in sex than girls, 14.8 years versus 16.2 years from girls. From this perspective it seems that men play a role of contributing to HIV/AIDS epidemic. Parker and Titter (2006, p.27) indicate that as far as qualitative academic research is concerned, the recruitment of participants for
focus groups (see section 3.4.1) is not something that should be carried out simply on an ad hoc basis. On the contrary, issues of sampling and selection are likely to prove crucial in relation to the form and quality of interaction in a focus group and therefore the kinds of data one gathers and the extent to which participants share their opinions, attitudes and life experiences.

The need for male-focused sexuality research, both specific to HIV/AIDS and in general, is particularly acute for adolescents and African populations, for whom both unsafe sexual behaviour and risk of HIV infection appear to be especially problematic. Therefore, the current research focused on male respondents aged between 15 and 20. This selection that was aimed at male further broke down into two age categories, namely 15-17 years olds and 18-20 years olds. Fourteen respondents were randomly selected from grades 11 and 12 where seven participants came from each age group. The selection of participants was facilitated by the assistance of the principal and one of the teachers of the school where the research was conducted, and then participants were invited to join in the study. There were no refusals. After each focus group that lasted about 60 minutes, five participants were selected and invited to voluntarily participate in in-depth interviews that took place during the two weeks that followed the focus groups the questions posed to focus groups and interviews are provided in the appendix.

Focus on such select groups calls into question the extent to which research results from this study cannot be generalized due to small size of this sample. The study reports the views of young Zulu males. Hopefully, the results of this case study will add to others (such as those listed in Tables 2.1 and 2.2) to strengthen understanding of male attitudes and behaviour. The results should be understood from within these limitations.
3.4 DATA COLLECTION METHODS

3.4.1 FOCUS GROUPS

This research highlights focus group method as tool of data collection. Focus group is an important tool that produces large amounts of qualitative data in a limited time, and generates more data than a range of other methods (Parker and Tritter, 2006). In focus groups, the researcher plays the role of moderator of group discussion between participants. Parker and Tritter (2006) promote the idea of using focus group because is a reliable way to examine public opinion, it is also a kind of interview where people are encouraged to discuss specific topics and discover underlying issues, norms, beliefs, and values that are familiar to the lives of participants. Table 3.3 summarises some recent studies which have used focus group in studying gender relationships in South Africa.

Lunt and Livingstone (1996) depict focus group as a microcosm of ‘the thinking society’, capable of revealing the processes through which social norms are jointly shaped through discussion and argument. Focus groups disclose the way in which specific individuals’ opinions are accommodated or taken in a developing group process. Individual contributions interlink and clash through the process of dialogue and argument between individual participants as peers ask one another questions, exchange stories and comment on one another's’ experiences and points of view.

In order to maximize transparency and to help ensure that greatest amount of information gathered from each group, a set of participants might meet on several occasions i.e. focus groups may be held in series as well as in parallel. Data collection in the current study took the form of two focus group discussions with seven participants in each group. The focus groups were single sex and were broken down into two age categories, namely 15-17 year olds and 18-20 year olds. These two focus groups were supplemented by in-depth interviews where five participants from each focus group were invited to participate. This enabled follow up of some of the insights gained from the focus groups. The interaction within a group discussion is what counts, and the moderator has as role to help generate in-depth discussion with a logical sequence of open-ended question that encourages participation within the
group (Parker and Tritter, 2006). During the focus group, the atmosphere was good when considering the interaction between participants in the focus group discussions. Conversations flowed easily between the moderator and participants as well as among respondents themselves.

Questions were developed in the broad categories of personal determinants: beliefs, attitudes and behaviour regarding sexual violence towards women and perceptions of HIV risks; and normative determinants including social norms regarding gender role beliefs about refusing sex and condom use behaviour as well as perceptions of self-efficacy in using condoms. In addition, questions were formulated regarding specific aims of this current study. Questions were formulated also to investigate on male attitudes and behaviour towards females. This research investigated the existence and strength of sexual beliefs and practices, which influence male attitude towards females. It also determined the attitudes of a sample of urban Zulu youth towards women.

Overleaf table 3.3 shows in details some recent studies that have used focus group in studying gender relationships.
### Table 3.3: Studies which have used focus group discussions

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
<th>Aims of the research</th>
<th>Number and size of focus group</th>
<th>Main findings</th>
<th>References</th>
</tr>
</thead>
</table>
| Rural KwaZulu-Natal | 2007 | The aim is to explore gender relations in a rural African community in the light of the HIV epidemic and examine the gender relations in the context of HIV in rural KwaZulu-Natal | - Seven to sixteen participants were in each focus group with a total of 107 participants. Eleven focus groups | - In seven out of the eleven focus group discussions, participants endorsed that men are the only ones to initiated sex.  
- Men demonstrated some tendency to conform to traditional roles of men initiating sex; but they also indicated that sex is often negotiated | Ndinda et al (2007) |
| Western Cape      | 2008 | The aim is to investigate how women and men in the Western Cape construct their gender identities and roles. | Eight single-sex focus groups with men and women with a total of 78 participants 40 women and 38 men. | - Participants reported that traditional gender relations of male dominance and female submissiveness were still in evidence,  
- But participants have also indicated that a change in gender roles and relations have increased women power in South Africa. | Henda et al (2008) |
<table>
<thead>
<tr>
<th>Location</th>
<th>Year(s)</th>
<th>Methodology</th>
<th>Findings</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural and semi-urban</td>
<td>2008</td>
<td>The aim is to explore understandings of anal sex among a rural Zulu population and the implications for the introduction of a vaginal microbicide as a means of preventing HIV infection among women.</td>
<td>Five out of the eleven groups claimed not to know for sure whether anal sex existed in the community. Men insisted that there was no need for a husband to practice anal sex with his wife when he could shaya enkomeni (‘penetrate the cow’ or have vaginal sex).</td>
<td>Ndinda et al (2008)</td>
</tr>
<tr>
<td>KwaZulu-Natal</td>
<td></td>
<td></td>
<td>Six focus group with 32 participants</td>
<td></td>
</tr>
<tr>
<td>Soweto</td>
<td>2002-2003</td>
<td>This study explores perceptions and subject experiences and the circumstances and meanings of heterosexual anal sex. In particular it draws attention to the ambivalent meanings of anal sex: as coercive and punitive and, at the same time, as recreational and desirable, and seeks to explain these contradictions.</td>
<td>Some participants regarded anal sex as a safe alternative to penile-vaginal penetration, But some of them reported that anal sex increased the risk of HIV infection, and regarded anal sex as improper and unnatural; and thought that it did not express love but hate and the desire to inflict pain.</td>
<td>Stadler et al (2007)</td>
</tr>
<tr>
<td>Location</td>
<td>Year</td>
<td>Description</td>
<td>References</td>
<td></td>
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<tr>
<td>Zambia</td>
<td>2006</td>
<td>The aim of this study is to examine the practice of multiple sexual partnerships among urban young people in Zambia, and the barriers and opportunities for behaviour change given the high HIV prevalence in Zambia.</td>
<td>Nshindano and Maharaj (2008)</td>
<td></td>
</tr>
<tr>
<td>North West Province</td>
<td>2007</td>
<td>The aim of the study was to assess accessibility of condoms, as well as knowledge, attitudes and practices around condom use among people in the North West Province.</td>
<td>Versteeg and Murray (2008)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Eight focus groups with five participants per group.</td>
<td>------------------------------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>- Most participants felt that there was nothing wrong with having multiple partners as long as people are getting what they want out of the relationships.</td>
<td>------------------------------------------------------------------------------------------------------</td>
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<tr>
<td></td>
<td></td>
<td>- Participants reported that peer pressure was a major barrier to changing one's own behaviour.</td>
<td>------------------------------------------------------------------------------------------------------</td>
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<td></td>
<td></td>
<td>- Majority of men and women did not often use condoms, though they were informed about the risks of unprotected sex.</td>
<td>------------------------------------------------------------------------------------------------------</td>
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<td></td>
<td></td>
<td>- Some participants were of the opinion that condoms may cause a rash, cause inflammation, have a bad smell, may make people sick, and may make people urinate.</td>
<td>------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Study</td>
<td>Year</td>
<td>Methodology</td>
<td>Findings</td>
<td>Location</td>
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<tr>
<td>Maja (2007)</td>
<td>2007</td>
<td>The aim of this study is to explore and describe the factors impacting on the use of contraceptives and contraceptive services among youth in Northern Tshwane.</td>
<td>Two separate focus group discussions (one group of male and another one of female) comprising each twelve participants.</td>
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<tr>
<td>- Participants have demonstrated inadequate knowledge about the reproductive function and consequently lack knowledge about contraception.</td>
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<tr>
<td>- 60% of participants reported that they were not informed about contraceptives, no information was available in their communities and that education programmes were unavailable to their schools.</td>
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<tr>
<td>- Male domination was perceived as an obstacle for condom use in instances where young girls had to take their own responsibility in protecting themselves against unintended pregnancies without the help of partners.</td>
<td>Northern Tshwane, Gauteng Province</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3.4.2 INTERVIEWS

Face to face interviews with individuals were used to further explore their attitudes and experiences concerning sexual violence and HIV/AIDS. An interview schedule was used (see the appendix) with sufficient flexibility to enable the interviewer to probe responses where relevant. Research that deals with the often taboo subject of sex must be aware of potential limitations concerning the honesty and completeness of participants’ responses. In the current study, a few of participants were reserved and shy to discuss sexual matters, particularly in the focus groups. In such a situation, it is impossible to measure the level of honesty and truth with absolute confidence. On the other hand, most of participants were generally talkative and readily volunteered to give information.

Participants were asked to state, in some of questions in this study, whether they agreed or disagreed with some statements on male violent attitudes and behaviour towards females. To investigate current sexual behaviours that expose young people to HIV/AIDS, participants were also asked to give the number of female sex partners they have and whether they have sex with them. Risk behaviours included having two or more sex partners, and having sex without using condoms. To examine whether participants have experienced sexual violence, participants were asked to indicate "Yes" or "No" to questions regarding having perpetrated sexual assault: Have you ever had sexual intercourse with a person when she really did not want to? Do you think that forced sex is normal in a relationship? What is your reaction when your girlfriend says no to your suggestion of having sex with her?

3.5 THE MODERATOR

The current study hired a moderator who was able to relate to and communicate well with the participants to conduct the focus groups and interviews in Zulu. The transcripts were translated and transcribed by the moderator from English to Zulu before going to the field. Data were recorded in tape recorder while the moderator conducted the focus groups and in-depth interviews in Zulu, the first language of participants. The moderator verbally transcribed the collected data from the tape recorder from Zulu to English. Before going to the field for data collection, I had five
meetings with the moderator who is the former student of University of KwaZulu-Natal. Through these meetings, I provided him additional training and information about issues related to the overall objective and specific aims of our study, its context, clarification of the questioning way, moderating skills, possible probes and anticipated challenges.

3.6 ANALYSING THE DATA

Discussions and interviews were analysed by means of an ‘interpretative thematic analysis’, that is, what themes emerged from the data collected from the focus groups and interviews which shed light on the sexual attitudes of young Zulu men. Vicsek (2007, p. 22) recommends that in the matter of attitudes the researcher’s position has to come closer to the views of the majority. There suppose to be an individual internal attitude that is not necessarily stable or focused on a fixed point, the researcher has to consider that it moves over a wider spectrum and take into account the limitations, the fact that he or she can obtain only an estimate of the individual’s internal attitude as the polling, it is better to quote extracts from the discussion containing several contributions. Given that different individual in a focus group will contribute differently - in quantity and strength of opinion - Parker and Tritter (2006) note that analysis has to include an assessment of comparative input that different participants make to the overall discussion and the social changes likely to impact upon levels of participation.

The researcher should note while analysing data that the opinion in the group can change in the course of the group discussion or that there is a difference of opinions in the group. It can also be worth considering how the free expression of opinions can be influenced by what ideas the participants have of how many persons represent the minority position in the group and who those persons are. Other modifying factors might be the extent of the difference between the minority and the majority opinions and how homogeneous the opinion of the majority is (Vicsek, 2007). In this study during discussion groups, two participants from one of focus groups did not contribute much to the discussion. It is possible that some of the group members might not have expressed a view on the theme, as they may believe what the other person thinks is not his or her real internal opinion.
So, I have reported male attitudes and behaviour towards females according to common themes from the focus groups and interviews. Vicsek (2007) advises that the researcher has to concentrate largely on what participants said and not how they said it or through what interaction it occurred. This was analysed, and interpreted by concentrating largely on what participants generated. For instance, more intention has been given on how a respondent brought his opinion into line with that of others, and how his opinion coincided or not coincided with that of participants. This analysis helped characterise the similarities of opinions among the majority of participants. The analysis also helped the researcher to examine the existence and strength of sexual beliefs and practices that influence male attitudes towards females that lead to spread of HIV/AIDS and fuel the culture of violence.

The atmosphere and mood in the group can also influence what is said, so the researcher should mention it in his analysis. A point to be considered in the analysis is how far the moderator succeeded in creating a relaxed atmosphere of trust in the group where the individual participants feel that they can freely offer more intimate information about themselves, or feel confident enough to express opinions that might not meet social expectation (Vicsek, 2007, p. 25).

3.7 ETHICAL CONSIDERATION

The ethics of privacy, confidentiality and anonymity were strictly respected in both my research topic approach and the execution of the study. Respondents, for instance, were assured that their identities would be protected. This has been reflected in the study’s naming system for reporting purposes, where each male student chose a pseudonym. Due to the sensitivity of this research, we ensured participants that their information will be confidential and anonymous, and provided them the opportunity to choose their own pseudonyms. We also asked them to state their false name each time they spoke to ensure we record their information accurately with their false name so that the person transcribing the tape could attribute participants’ false names to their specific voices as an initial point of reference.
The participants were informed about the purpose of the study, that participating in the study was not compulsory and that they were allowed to withdraw at anytime from the study if they felt uncomfortable about answering the questions during the focus group discussions and interview. The principles of informed consent were applied to this study; consequently I ensured all participants’ ages did not fall below the legal limit of 15 years old. The South African government requires that children aged 14 and under must have the approval of their parents or guardians before being interviewed. The study also received an ethical clearance from the Ethics Committee at the Westville campus, University of KwaZulu-Natal. Permission was also obtained from the school where the current study was conducted, and from the KwaZulu-Natal Department of Education and Culture.

3.8 LIMITATIONS OF THE STUDY

I would have conducted focus groups and interviews, but due to the fact that I was a non-Zulu speaker, this was not possible. Because of this situation, I was unable to even play a role of an observer during focus group discussions although I managed to assist the moderator with recording during focus group discussions and interviews. This may have resulted in less than complete data being collected e.g. during the focus groups there could occur some opportunity for the moderator to probe some questions where necessary but we failed to do so because I did not know what was going on during the discussion.

Our study is also limited by its focus on small number of male adolescents from KwaMashu Township; further research is needed to confirm these results before allowing generalization of the findings to other populations. Our focus on male adolescents likely biased the study results by only representing men, though men and women are engaged in considerable risk behaviours and are at some of the highest risks for HIV infection.
3.9 CONCLUSION

We chose focus group discussion as a tool of data collection through qualitative method because of our interest of taking into central account the conceptualisation of attitudes and behaviour as a socially phenomenon strongly influenced by peer norms. The in-depth interview was chosen as a supplementary technique in this study to get individual opinions that could be difficult to divulge in focus group discussions as regarding sexual discourses appearing in the core of our study. Such discourses are more likely to be expressed in individual interviews than in the context of debate and argument inherent in the focus group approach used alone.
CHAPTER FOUR: DATA ANALYSIS

4.1 INTRODUCTION

This chapter discusses the findings from my fieldwork that elicited data on male attitudes and behaviours. The chapter draws largely from focus group discussions and in-depth interviews conducted at NqabakaZulu Comprehensive high school in KwaMashu Township. To reflect the respondents’ arguments, their quotations are cited verbatim but their identities are protected by the use of pseudonyms. The study examines the underlying determinants that actually lead adolescents to engage in unsafe behaviours that expose them to HIV/AIDS and to a culture of sexual violence.

It explains how young men’s attitudes and behaviour contribute to the spread of HIV/AIDS in South Africa. It identifies how the relationships and behavioural practices of young people are shaped by economic, social and cultural realities.

This chapter comprises four sections. The first one focuses on male attitudes and the second centres on male behaviour, with particular reference to the use of condoms. The third explores the culture of violent sexual behaviour, while the fourth section investigates influential cultural beliefs and practices.

4.2 YOUNG MENS’ ATTITUDES

4.2.1 YOUNG MEN AND SEX

Thando: I don’t agree that we should wait till we married, I am a guy and I have feelings and needs, just look at the weather today [Laughter in the room]. Sometimes some girls are going for virginal testing, so it’s best to wait until she is ready. But hey you can have another girl on the side though, while you wait [everybody laughs]. I mean we are guys and we have feelings and needs, I am telling the truth.

Andile: No, no I can’t wait there are quick bites out there as we all know. I can’t wait.

Ajex: I can’t wait without having sex with my girlfriend, take me for example I have three girlfriends, but I don’t go to bed with any of them. I am just enjoying with them.
Nhlaka: I agree with Ajex, I can’t wait.

Coke: when I am in a relationship with a woman I expect sex.

Thando maintains that men cannot have a relationship without sex, and emphasises that men are unable to control their sexual desire. This view corroborates with Varga (2003) who indicates that men are socialised to think that they cannot sexually control themselves. Andile portrays young girls as “quick bites”. From his view, girls are available and easy to have sex with; therefore, there is no reason for men to wait.

Coke sustains that a relationship with a woman means sex. It is quite clear that young men link sex with a relationship; both are intermingled dependent from each other; sex cannot be separated from a relationship. Once in a relationship, men consider sex as a right that a relationship has to provide. This assumption supports the study of Kaufman and Stavrou (2004) that shows that girls sometimes give sex to males as a sign of their faithfulness and approval of the relationship or maintains levels of affection. MacPhail and Campbell (2001) also corroborate that young women conveyed that if they do not willingly give sex, their boyfriends would insist on it as proof of their love.

Running counter to male stereotypes of masculinity, one of participants has a different opinion:

Njabulo: For me it’s not that I am waiting as such, but to be honest I am scared of HIV/AIDS [Laughter in the room].

Njabulo implies that waiting (until marriage?) is possible, and that at least some young men have to exercise abstinence from sex as one of strategies of eradicating HIV/AIDS. This practice seems to be very important in such time when HIV infection rates in South Africa and in particular in KwaZulu-Natal are very high. For most young people wanting to have sex in a relationship, abstinence would seem to be ineffective due to peer pressure.
4.2.2 PEER INFLUENCE

Joe: Waiting is good, but due to peer pressure you end up not being able to wait. Because guys are laughing at you and saying you have not had sex yet.

Mario: I don’t feel a relationship right now should have sex involved, but then peer pressure makes young people of my age to engage in early sex. Boys laugh at other boys when they know that they don’t have sex. And they bring in those myths that people who have not had sex are slower, and you start to see those signs on yourself.

Coke: yes I can have a relationship without sex, but peer pressure out there is big, guys ask things as to why do you keep an apple without eating it. So as a guy you might end trying to change your girls mind to have sex with her [a girlfriend].

Joe reveals that peer pressure is an obstacle for young people to have a relationship that does not involve sex. Peers’ criticism or comment can ultimately change the course of a relationship. Joe’s opinion demonstrates how young people are pressurized to have sex. Those who do not have sex are subject to mockery. Consequently, young people are psychologically influenced by their peers, and choose a position that endangers their lives. Wood and Jewkes (2001) have described how the control of women was an important aspect of successful masculinity among many young men, mostly proved in terms of their ability to have most desirable partner, and to have a greater number of partners and to control their girlfriends. Manhood was constructed and assessed on continuous competition in relation to male peers. Sexual conquest was regarded as a sign of status that was achieved by wooing, begging, trickery, or, ultimately, the use of force.

It is important to acknowledge the extent to which social pressures govern young men’s sexual behaviours and choices. For example, if a young man does not have sex with a girl, his reputation may suffer among his male peers (MacPhail and Campbell 2001). Some Zulu young men express that they would support abstinence before marriage, but admit that they feel obliged to have sex before marriage for fear of social rejection (Varga 2001).

Coke changes his previous position where he demonstrated that he could not have a relationship without sex. His comments clearly reflect the objectification of women as
apples to eat. He also points at peers as being a problem for young people to restrain from sex, because peers laugh at young people when they are in a relationship that does not involve sex. Because of such an attitude young people adopt a position that pleases their peers. MacPhail and Campbell (2001) confirm that young men who try to resist dominant influences of masculinity by avoiding sex are also subjected to taunting and teasing. Barker and Ricardo (2005) show that men often aim at proving their manhood before their peer and social group within narrow constructs of what it means to be a man. Young men report a sense of being observed and watched to see if they culturally meet the standard versions of manhood. Achieving manhood is in effect evaluated or judged by other men and women.

From Mario’s viewpoint, peers label those who do not have sex as ‘slower’. It is quite understandable that young men consider those who are most sexually active to be on top and worthy their peers’ esteem and respect. Wood et al (2008) corroborate in demonstrating that sexual relationships offer a source of daily entertainment for township youth; sexual relationships are also an important showground in which selfhood is practiced and negotiated in relation to others. For young men, the importance of women to their sense of masculinity, both in terms of their own self-respect and esteem and in the eyes of others, was evident in the energy they expended on acquiring and maintaining desirable girlfriends, gaining sexual access to them, seeking to establish exclusive sexual access, and attempting to control their behaviour. Kaufman and Stavrou (2004) indicate that peers have attestable effects on several dimensions of adolescents’ risky sexual behaviour.

During the interviews the moderator asked the participants if having sex was their own decision, they answered as following:

Andile: I was not forced but there was some pressure.

Thando: I was 13 years, and it was due to peer pressure.

Coke: it was my decision, but with some pressure from the guys.

Halls: It was not my choice; it was another person’s choice.
Tshepo: It was not my decision, but the girls.

Thando reported that he was 13 years old when he had his first sex; this was due to peer pressure. Peers also influence early debut because of the pressure that they exercise on their friends. Friedman (2006) corroborates that young men experience pressure from their peers to be sexually active and have multiple partners, in order to be seen as men. Wood (2005) indicates that sexual relations are important sites of negotiation of peer relations and identities, and centre of sharing “resources” (in this case women) as a means of consolidating group bonds that are sometimes seen in forms of group rape.

Coke has shown that young men are exposed in taking dangerous sexual decisions because of peer influence. Wood et al (1998) confirm that pressure from male peer partners are considered as contributing factors to early and unprotected sexual intercourse. Kaufman and Stavrou (2004) declare that peer pressure plays an important role in sexual timing. Among participants in the study, premarital sex was discussed as though it were a given. Such view endorsed sex before marriage as expected and accepted.

There is also a belief in the necessity of sexual intercourse for health reasons. One of the participants in the focus group stated that:

Sex is important too, and I feel that people who don’t have sex regularly are a bit not right upstairs. So until they release the sperm their mind will be clogged up (Halls).

Halls believes that people who do not have regularly sex cannot maintain good health and such state may cause an abnormality or cause somebody to become crazy. He makes a strong link between sex and masculinity in relation to people’s physical and mental health and well-being. This concurs with the finding of Campbell (1997) who indicates that most of participants state that sex plays a key role in the regulation of the stable supply of blood and sperm, and that having regular sex is essential for the maintenance of a man's good health. They mention that a range of possible ill effects of poorly regulated bodily fluids can result from prolonged celibacy. They also
believe that most of mental ill effects that can result from such state are: depression, short-temperedness, violence and an inability to think clearly.

In-depth interviews when the interviewer asked the participants to indicate their age when they had sex for the first time, they answered as following:

Thando: first time I had sex I was 13 years old.

Nhlaka: I was 11 years old when I had sex for the first time.

Ajex: I started sex at the age 13, and it was with an older person.

Sizwe: 13 years was my first time.

Joe: 12 years and it was an older person.

Tj: I was twelve when I first had sex.

Halls: I was 8 years old when I had sex for the first time.

Most of participants reported having their sexual debut at young age at the time they are not aware of the risks of having unsafe sexual intercourse. Most of their sexual encounters at such ages may seem to be unprotected one, because these often take place at the time that most of young people do not have skills to negotiate safe sex. The current study shows that most of boys report to have sex before 13 years that is a big gap as comparing to the finding of Varga (2003) that indicates that South African boys are earlier initiated in sex than girls, 14.8 years versus 16.2 years from girls. Singh et al (2001) also indicate in their studies that significant numbers of young people report having their sexual debut well before age 14. Boys are reported to start sexual activity earlier and in higher proportions than girls. Most of boys in the current research had their first sexual debut before 13 years old. Such situation demonstrates that the younger generation keeps going down instead of improving, such behaviour expose them to HIV/AIDS. Kelly and Parker (2000) corroborate that young people begin having sex at younger ages.
4.2.3 SEXUAL CONSENT

Joe: I think it’s all about romance/oral sex once you are in the bedroom. It’s a big yes that the girl wants you. And if you fail then the problem is with you as a guy.

Thando: Joe is right, once she (a girl) is in the bedroom, it’s a yes, if he fails to make it [sex]; this means that the guy has a problem.

Sizwe: I agree with Joe and Thando once a girl is in your room, she knows why she is there. So if the guy can’t sleep with her then that means he lacks the skills to control her.

Andile: some girls like forced sex, they sometimes want to see how a guy is going to react, it’s not because they are saying no.

Mario: Some girls mean yes when they say no, even though they say no their bodies are respond with a yes, so all a guy has to do is put enough pressure till she says yes.

Halls: When a girl is in my room that means yes. She would not leave without giving me sex, but if she persists in saying no, I will not force myself on her.

Joe’s view demonstrates what young men think when girlfriends accept to enter boys’ bedrooms; for boys this act means that their girlfriends are willing to have sex, and if boys do not profit from such an opportunity they are considered as weak and lack skills to manipulate women. Varga (2003) corroborates that men use their decisionmaking power to justify the sexual coercion that use on their partners. Male participants in this study agree that a girl cannot resist her boyfriend advances. Because he is real man, he must not allow the girl to stop him. He must win and get what he wants. Participants also indicate that in Zulu tradition, it is the man who makes decisions and a woman must follow.

Andile maintains that girls like forced sex, and their negative expressions do not justify their position of refusing to have sex. Young men believe that women are ashamed of saying yes from their boyfriends’ demand to have sex, and women do not like to leave an impression that they like sex for their first encounters with their boyfriends. Such assumptions motivate men to force women for accepting their sexual suggestion. Moore et al (2007) confirm that these gender roles for women are coupled
with sexual scripts for men about what it means to be a real man is not taking “no” for an answer. Men are socialized to think that they cannot sexually control themselves. We return to this issue in section 4.4.1.

Mario’s attitude reveals the continuation of belief promoting that when women respond negatively from their boyfriends’ suggestions of having sex, and their verbal responses are different from their bodily expressions that keep at demonstrating that they like to have sex. This concurs with the finding of Andersson et al (2004) where 56% of participants claimed that girls mean yes when they say no. Wood (2005) indicates that young people legitimise their rhetoric about their own coercive practices, and turn to their advantage the fact that sexual consent is rarely voiced. Some participants admitted that they profit from girls because girls are fearful, outnumbered and have “nowhere to run”. Wood et al (1998) confirm that men believe that woman’s refusal to submit to sexual demands indicates that the woman has other sexual partners.

Moore et al (2007) find that the assumptions about women’s sexuality condone sexual violence. Girls’ exhibition of sexual unwillingness in order to maintain her respectability opens the door to socially acceptable coercive sexual behaviour including violence. Krahé et al (2007) supports that if the use of ambiguous communication strategies is part of adolescents’ sexual scripts, this can increase their vulnerability to sexual aggression and victimization. Ackermann and De Klerk (2002) demonstrate that women have little bargaining power to negotiate safe sex with their partners and do not have control over their partners’ sexual behaviour. Wood (2005) maintains that men believe women play a game in particular when saying “no” even if they were interested in a potential sexual relationship. Halls offers an alternative view. While he believes that a girl’s presence in his bedroom means that sex is on the cards, he would not force her.
4.2.4 MULTIPLE PARTNERS

Njabulo: I think that all men are dogs and girls are dustbins. Dogs go through the bins and leave them open and the next dog does the same. Men are just dogs.

Mario: I think you can have one girlfriend, but at times the one person breaks your heart so I think sometimes it is ok to have more than one girlfriend. But when you decide to get married I think it is good to just have one person that you have chosen to be your wife for the rest of your life.

Tshepo: I think it right to have more than one girlfriend, but only if you are not married. This would help you to choose a good wife. You must not choose because of beauty but due to compatibility.

Thando: I think we should have more than one girlfriend. Even to sleep with one girlfriend for each day of the week.

Nhlaka: I think too many girls in ones life spread AIDS, I think two is just fine.

Mario supports the assumption of men to have multiple partners as a way of ensuring that men cannot miss having a girlfriend if one ‘breaks your heart’, and the fact of having multiple partners can also help men to make a nice choice in term of marriage. Wood et al (2008) corroborate that it was common for young people to have more than one partnership at a time (whether casual or more serious, and an entire slang terminology was used to describe sexual partners positioned differentially in the hierarchy of an individual’s relationships. Control and discipline by young men of their main sexual partners was an aspect of relationships that was concern to them, and it was primarily out of this that violent practice arose.

Hunter (2005) explains that for young Zulu men, courting behaviour is a very important part of their education because a young man must achieve the distinction of being an isoka. According to participants, being isoka and having several girlfriends was countered to the ignominy of life as an isishimane, a man too scared to talk with girls and without a single girlfriend. If the standard isoka figure in the 1950s was a single young man famous for his prowess in courting several women, the isoka
masculinity had a much wider influence, one example being its support of husbands’ position that they alone should enjoy extra-marital liaisons. Friedman et al (2006) confirm that perceptions of male sexuality are shaped by a wide range of socially rooted gender stereotypes which depict masculinity as being synonymous with having multiple sexual partners and using control over them.

Tshepo reports that young people have got the right to have multiple partners due to their unmarried status. Hunter (2005) confirms that men generally present isoka as a part of a seamless Zulu custom. Some of participants describe how men conflate polygamy with multiple partners saying that it is their culture to have more than one girl. Young people justify it by indicating that their grandfathers had six wives, they want to be like them. Young people are still speaking of isoka lamanyala (dirty isoka) although today the concept has been unlinked from marriage. The term isoka lamanyala is also used to describe a man who cheats on his girlfriend with her best friend, or a man who spreads HIV.

Thando suggests that men should have more than one partner, so that he can sleep with one different girl each day. CADRE (2003) indicates that men also justify the fact of having multiple partners as the source of gaining power and control over women. The relationship between men and women is learned through societal norms. Constructions of gender categories are closely related to fantasies of power and identity. For instance, for a man, having multiple partners may be a symbol of measuring masculinity and success among one’s friends, where men have multiple partnerships because it is considered as a traditional right. Hunter (2002, p.106) finds that men are both empowered and restricted by dominant rules and norms. While it is desirable to have many girlfriends to become an isoka, a man who refuses to marry can be positioned as isoka lamanyala (literally, a dirty isoka). A participant in this study describes the way some men position their quest for women: “If he has six, I want seven, then he wants to have eight”. The numbers are very often much higher than the one or two girlfriends mentioned by the elder generation and penetrative sex is invariably taken for granted.

For men having multiple partners is considered as their right, and is reinforced in numerous ways in many cultural groups in Africa. The tradition of polygamy is
closely linked to the norm by which masculinity is conveyed as sexual conquest and prowess (Barker and Ricardo, 2005). However, in some countries, this tradition has now become more informally interpreted as a man’s right to have as many sexual partners as he wishes and the normative discourse that a man needs more than one partner continues (Friedman et al 2006).

Njabulo likens those women and men who have multiple partners to ‘dogs’ and ‘dustbins’ and by implication strongly supports monogamy. Hunter (2005) corroborates that male multiple partners and masculinities are under scrutiny and critique, though women are frequently blamed for promiscuity and the spread of HIV/AIDS. Men's own self-doubt is propelled by women's aggressive critique of irresponsible men infecting women with HIV/AIDS. One 29 year-old woman stated that many women no longer use the tradition concept of isoka lamanyala to criticize men: “the young they just call [bad men] izrinja (dogs)”. Sathiparsad and Tylor (2006) also in the other side demonstrate that one of participants in their study described a woman with AIDS as being useless and an AIDS toy. Women are reduced to a plaything only worthy of being discarded after use.

Nhlaka reveals the misconception that characterises some young people when it comes to the question of knowing how HIV/AIDS spreads. He believes that having two girlfriends is fine and safe, and the risk of HIV infection is reduced when he is sexually intimate with one or two girlfriends. Jewkes et al (2006) have shown that young people who have a higher number of sexual partners are at risk of HIV/AIDS.

The participants in interviews answered the following when the moderator asked them to give their opinion whether a man has to have more than one partner.

Njabulo: one/two girlfriends are ok

Ajex: one/two girlfriends

Andile: A guy can have as many girls as he wants, so long as we use condoms.

Sizwe: Two girls are fine
Tj: I think one girl is enough, back in the days it was ok to have more than one girl since there was not a lot of disease. It is also a financial burden on you as a guy.

The above responses demonstrate the assumptions that to reach an acceptable standard of masculinity, a man has to get more than one partner. Meyer-Weitz et al (2003) confirm that multiple-partners have been generally accepted as a normal practice in Southern Africa. Ackermann and De Klerk (2002) also support that many African cultures approve that a man has the right to more than one partner. These sexual partnerships are often encouraged and arranged by the family. In traditional society, for example a man could have more than one wife only if his wealth permitted. However, urbanization and modernization have changed the organization of sexual partnerships, and what has emerged is a sexual structure allowing mistresses and love affairs. This configuration of relationships has led to the rampant spread of AIDS. Silberschmidt (2001) maintains that for young men in East Africa in order to have the successful masculinity, it requires to have many sexual partners, the attractiveness of to those partners and the ability to control them.

Not all girlfriends are sexual partners. When the interviewer asked participants about the number of girlfriends they have, they answered as following:

Ajex: I have seven girlfriends, one is my age, and the others are younger than me. But I have not been to bed with any of them.

Thando: I have many girlfriends, about 7 to 8. Some are my age and others are younger. I don’t go to bed with all of them but it does not matter which one I go to bed with.

Sizwe: I have four girlfriends, ranging from 13 to 18 years, I don’t go to bed with all of them just the one’s who are 17 and 18 years.

Sifiso: I have none, but I had 4 before, they raged from 15 to 19 years old and I went to bed with all.

Coke: I have two girlfriends one is 15 and other is 16 and I go to bed with both of them.

These participants report the incidence of several partners in their sexual relationships; having a great number of girlfriends reveals their quest of becoming
famous in their ability of courting several women. In doing so they want to impress their peers with number of girlfriends with whom they are in relationship with. The fact of having multiple partners is seen as a sign of sexual prowess and dominance over women but the number of girlfriends may exaggerate the number of sexually active relationships. In Kaufman and Stavrou’s (2004) studies, participants also reported to have multiple-partner relationships. Hallman (2004) explains that the reasons given to men for having multiple partners is usually emphasised by cultural traditions in which sexual conquest is a status marker. Masculine discourses often place a high value on multiple sexual partners. In a number of settings, males’ having multiple sex partners is accepted by both genders and may even be encouraged by male peers or elders.

For Hunter (2002, p.107), an isoka is still a successful man with women, and having sexual relations with many girlfriends even though he is no intention of marrying them. An isoka lamanyala is a man who has more than the acceptable number of sexual partners, which one of participants thought was somewhere between four and ten. Legarde et al (2001) argued that multiple sexual partner relationships play an important role in driving the HIV infection.

In the focus group discussions, we asked participants to demonstrate if there is a link between HIV expansion and population mobility. Participants were clear that males working in towns were likely to contact HIV/AIDS and to pass it on their wives/girlfriends at home.

Ajex: it [HIV expansion and population mobility] has a link, for example people who left the rural areas and went to work in Jozi mines, they got new girlfriends and maybe contracted HIV, and when they went back home they had sex with their unsuspecting wife and passing on AIDS to her even though they themselves had no clue that they have it. And when they do find out they go it, they blame their wives saying that when they were gone their wives slept around.

Joe: Some men had more than one girlfriend when they left anyway and being accustomed to having more than one girlfriend they would get more in their place of work, and maybe they already have AIDS they carry on passing it to the women who live in that place and still spread it to all the women they are involved with.
Sifiso: when people went to work in far away places, it influenced the spread of AIDS because man went away for long periods of time, and they did get new women to keep them company.

Coke: back in the days people had more than one wife, and when they went to work far away they would contract AIDS and bring it back to their wife’s and even give to their new girlfriends.

Ajax demonstrates that men played a role of spreading HIV/AIDS during their labour migration, but when men get HIV infection they blame their wives of being a carrier of spreading the disease. Campbell (2001) and Moodie (2001) demonstrate that some mineworkers do not directly perceive the risk of HIV, and consider it as unimportant when compared to their occupational risks. They perform a specific version of manhood, and take HIV back to their wives. They seek to achieve socially recommended versions of manhood - being sexually active with multiple partners and providing for their families - even when they rationally understand the risks of their occupation and their sexual activity.

Sifiso explains that men are vulnerable to HIV infection especially when they involve in sexual transaction with a number of girls due to the fact of being separated from their regular partners for a long period. Rose-Innes (2006) corroborates that people separated for long periods are likely to seek sex outside their stable relationships. Consequently, they become infected with AIDS and carry the infection back home and pass it on to their wives and unborn children.
4.3 YOUNG MENS' SEXUAL CONDUCT

4.3.1 FLESH TO FLESH AS A SIGN OF MASCULINITY

Mario: I think man lacks respect, because some men just believe that they only want to have flesh-to-flesh sex. And they don’t care. Some guys just use date drugs to get a woman, and when she is drugged they all just have sex without using a condom.

Coke: I think this (flesh-to-flesh sex) is due to a lot of peer pressure, when they are talking and saying thing like they don’t eat sweets in a wrapper. The media also has a lot of bad influence in how young people behave, drugs and going to clubs.

Mario’s discourse reveals how young men are exposed to HIV/AIDS. They deliberately engage in an unprotected “flesh-to-flesh” sex as a sign of celebrating their masculinity that veils them from perceiving the risk of HIV/AIDS. Wood and Jewkes (2004) and Hunter (2002) indicate that dominant masculinity sometimes shapes men’s violent control over women, and induces men to insist on “flesh to flesh” sex. Versteeg and Murray (2008), conducting a qualitative study among men and women on condom use in the North West Province, report that participants indicate that condoms reduce pleasure and have a negative impact on the ability of men to perform the sex act. Young men therefore, express that they want ‘meat-to-meat’, ‘flesh-to-flesh’ and ‘skin-to-skin’. Eaton et al (2003) prove that for young people who have flesh-to-flesh sex, the immediate costs of HIV-preventive behaviour are perceived to be high when comparing to their felt personal risks. Hunter (2002) notes that male coercion, however, is often mediated through subtle discourses of persuasion. Men will convince women that using a condom represents “unfaithfulness” and that true love is symbolised by inyama enyameni (“flesh-to-flesh” sex).

Coke indicates that peer pressure is also one of the motivations that influence young men to engage in unprotected sex as they try to impress their peers with an account of their sexual performances. They are deviated by thinking such as ‘you do not eat sweets in a wrapper’ that keep on encouraging young people to have unsafe sex. MacPhail and Campbell (2001) claim that the notion of masculinity is associated with an ideal of unprotected sex “flesh to flesh” as being more pleasurable. Wood and Jewkes (2001) and Hunter (2002) indicate that in South Africa dominant masculinities
construct men’s violent control over women and demand for “flesh to flesh” sex. Campbell (1997) adds that men link masculine identity to insatiable sexuality, and a manly desire for the pleasure of flesh-to-flesh sexual contact. All these are factors that put men at risk for HIV/AIDS.

4.3.2 THE UNRELIABILITY OF CONDOMS

The responses regarding condom use and misconception around its use were alarming in light of the ever-growing HIV/AIDS epidemic in South Africa today. During interviews respondents were asked if they think condom is safe in sexual intercourse, they answered as followed:

Nhlaka: I don’t trust the condom it breaks and tears; it’s just a white man’s thing, a thing of this world. And condom does not protect at all.

Mario: I think condoms are safe, but I don’t think they are 100%. They are better than nothing.

Tshepo: Condoms are safe but one must know that when one has sex even with a condom you must know that you are taking a risk.

Mario: I think condoms are risky because they can break and get torn.

Halls: I think they (condoms) are 50% safe, I think they are more expensive and they are not safer. I prefer brown dash, and I think the government condoms are the one that burst the most.

Nhlaka states that he does not like to wear condom because he does not trust it, and he believes that condom can break during sexual intercourse. Barker and Ricardo (2005) corroborate that young men demonstrate uncertainty and lack of confidence regarding the proper use of condoms. Condoms are perceived to be ineffective or defective. Brummer (2002) maintains that condoms were seen as ‘not natural’ or people did not trust the safety of condoms. As one participant stated, “I do no use condom because it
Mario shows that he does not trust condom for his protection during sexual intercourse, and believes that it can break. Ackermann and De Klerk (2002) explain that the negativity of men toward condoms revolves around two issues. The first is physical: Men claim that condoms reduce pleasure. The second is attitudinal: The perception exists that only prostitutes use condoms. If a woman suggests the use of a condom, she may be accused of being unfaithful or hiding sexual transmitted disease.

Halls and most of other participants prove that condom usage is not safe in sexual intercourse. They prefer to have ‘brown dash’, that is sex without condom. They also report that they do not like condom because they believe condom is good for nothing, and they are taking risk by using it. MacPhail and Campbell (2001) claim that these sexual behaviours are reinforcing among peers. Young men are criticized for using a condom and, as a result, may decide to not use it again.

Despite the dominant discourse, one of participants remarks as following:

Yes we can have a relationship without sex, if the girl knows what she wants. And both parties should take protection against HIV/AIDS. That would help with prevention of early pregnancy and unwanted costs that bring burdens to young people and their families. And condoms are not safe, so waiting is definitely good. Waiting ensures good bright futures for both parties (Sifiso).

Though Sifiso demonstrates that condom is not safe, he also brings in the idea that young people have to stay away from sex until they marry. Belonging to religious organisations may encourage such an assumption.
4.3.3 CONDOMS AS A SIGN OF MISTRUST

Joe: I think she is protecting herself from becoming pregnant, and she may also be protecting me or that she does not trust me.

Sizwe: Maybe it would be because she does not trust me or that she thinks I am sick.

Tshepo: If a girl says we must use a condom, I think she knows that she has AIDS, and that she does not trust me. The reason I would ask why is because every time I have sex I expect the guy to be the one to suggest using a condom.

Sifiso: What comes in my mind is that she loves me and that she is protecting us from all the disease out there. The other thing is that she might not trust me.

Tshepo and most of participant believe that women show a sign of mistrust when they ask their partners to use condoms. He also states that man is the only one who has to suggest the usage of condom. Hallman (2004) confirms that men consider women who want to use condoms as promiscuous. MacPhail and Campbell (2001) corroborate that trust was given as the dominant reason for not using condoms. Young men believe that girlfriend’s appearance and reputation determine trustworthiness. Abdool-Karim (2001) indicates that young men avoid using condom in long-term relationships because of viewing it as a lack of trust and an admission of infidelity. Ackermann and De Klerk (2002) prove that women are unable to insist on condom use due to their lack of power in interpersonal relationships and their lack of communication regarding sexual matters. Cichocki (2007) supports that fear of violence makes women hesitant to insist on condoms use, as men believe women are promiscuous and unfaithful when they ask for condoms. Insisting on condom can lead to rape, and physical violence as a form of punishment.
4.3.4 MEN AS CARRIERS OF HIV/AIDS

Andile: Men’s behaviour sometimes helps to perpetuate the spread of HIV/AIDS, because we as men cannot control ourselves. And like to have sex without a condom.

Nhlaka: Most of the times I think men are the ones who spread AIDS because they refuse to use condoms (saying I can’t eat a sweet while it is wrapped up). And we as men have more than one girlfriend, when we will break up with some of them [girls] and they will start in new relationships, where the next man in their relationship will also refuse to use a condom. So AIDS spreads quickly.

Halls: I don’t use a condom and I think that is just one of the male behaviours that spread AIDS. But I look at a person and judge them according to their behaviour. I believe that you can’t eat a sweet in a wrapper.

Mario: I think that girls also behave badly, because women also make men have sex without condoms, and they say that condoms hurt them. This also leads to spreading AIDS.

Section 2.5.3 and 4.2.4 included an examination of migrant workers as a source of the spread of HIV/AIDS. Andile shows that men believe that they cannot sexually control themselves, and do not like to wear condoms. By using “we”, he does not dissociate himself from the rest of men who cannot sexually control themselves.

Nhlaka attributes the spread of HIV/AIDS to men, because men have multiple partners with whom they have sex without condom, motivated by males’ belief that having sex with condoms can diminish the sexual pleasure during sexual intercourse.

Halls reports that he does not use condom because he looks at a girl’s behaviour before having sex with her. Most of young men are misguided by a woman’s exterior appearance and apparent current healthy condition so they have sex without condom. These assumptions support MacPhail and Campbell (2001) who found that young men still rely on appearance and reputation to make decisions about a woman being safe and therefore not insisting on condoms, and continue to view the use of condoms as only necessary among those already infected with HIV infection. They do not know whether or not they are personally vulnerable, implying that they do not connect
their own behaviour with HIV risk messages. Varga (2001) maintains that condoms are often used for casual sexual encounters, a young man in Uganda demonstrates this as follows: “just the time you begin to trust your partner you stop using a condom.” Condom usage with a steady partner may imply or insinuate a hidden sexual history.

Mario, on the contrary, attributes the blame of the HIV spread on women because they do not ask men to wear condom, and states that women say condoms hurts them. Jewkes et al. (2003) corroborate that women do not like to ask men to use condoms, or do not persist in asking, because of concerns about men’s sexual pleasure. Kaufman and Stavrou (2004, p.19) explain that African women found that if they “wanted” to see the man again, then the issue of condoms “becomes a nonissue and you take your chances.” But, unless they “really knew the guy,” they would insist on the use of condoms. Respondents argued that men often got argumentative about the use of condoms and sometimes ended up “slapping the woman around.” Meyer-Weitz et al (2003) observe that in these contexts the practice of safer sex behaviours therefore greatly depends on men’s commitment to it.

4.4 A CULTURE OF VIOLENT SEXUAL BEHAVIOUR

4.4.1 BELIEF IN FORCED SEX

Joe: No, no you can’t let her leave the room without having sex with having sex with her, because she will go around and have bad mouthing about you, that you failed to sleep with her, when she was alone with you.

Thando: Joe is right, too many of today’s girls have had sex so they know what is going on. So if you disappoint her, she will definitely go around bad mouthing you. Once a woman is wet in my room there is no way she is leaving without having sex with me. I would not force myself on her though, but I’d try to change her mind.

Coke: I agree that some girls just do it [refuse to have sex] to play with guys, I would pressure on her till she says yes.
Andile: Me I would not let her go once we are in the room, my rule apply. She is wet; I am horny so it means sex to me.

The above discourse (once we are in the room, my rule apply, she is wet; I am horny so it means sex to me) confirms what young men believe as an excuse to apply force while demanding sex. It also endorses the belief that men cannot sexually control themselves especially when feeling sexual desire. Meyer-Weitz et al (2003) confirm that gender role beliefs play a significant role in supporting the belief that men are unable to refuse sex because their sexual desires are uncontrollable, consequently women to refuse sex is not acceptable. This implies the expectation that men should always want and be ready to have sex, while women on the other hand are not expected to refuse sexual advances from males. This also reflects existing notions that male sexuality is instinctive and uncontrollable, while women on the other hand should be submissive to men's sexual prowess. Friedman et al (2006) argue that men consider their abusive behaviour as consistent with their culturally accepted male rights. Women may without knowing accept this assumption and expect their male counterparts to act in ways that are abusive. Many continue to believe that men have difficulty in controlling their sexuality; as Moore et al (2007) have noted, this is a socially-constructed belief. Some men feel themselves as inferior when a girl refuses to have sex with them, especially in the case where a man presumes that the girl he failed to have sex with will probably report his unsuccessful challenge to her peers.

Coke demonstrates that if a girl refuses to have sex with him, he must put pressure on her until she accepts. Those men who believe in forced sex, though women may respond negatively to their suggestion, will force them to accept it because they believe that their girlfriends are just playing with them in taking such a position. Kaufman and Stavrou (2004) corroborate that coercion is often a part of sexual relationships in South Africa, especially among adolescents. Friedman (2006) maintains that the use of sexual coercion and violence against women, unsafe sexual behaviour are often efforts by young men to publicly define or affirm themselves as men. Jewkes et al (2002) indicates that in a rural area of Cape Town, 32 percent of girls reported their first sex was forced or rape. Campbell (2003) reports that rape and coercion are common in young people’s first sexual experiences in a mining community outside of Johannesburg.
4.4.2 ‘GIRLS LIKE FORCED SEX’

Ajex: I think it depends on some women, some like forced sex, but not all of them.

Andile: some girls like forced sex, they sometimes want to see how a guy is going to react, it’s not because they are saying no.

Njabulo: I also agree some girls like forced sex, and even ask for it themselves at time.

Coke: With my experience some girls like forced sex, they go even to a point to spread the rumours that they want a particular guys to have rough sex with them.

Mario: I think some women like forced sex, for me I heard this from one girl in my class, who said that at one point in her life a guy she did not know took her, and when they got to the room he pulled out a knife on her, and cut her skirt, her shirt, bra and finally her panties and proceeded to have sex with her without her consent, with a knife on her throat, she found so pleasurable till she enjoyed the sex and gave in and she never pressed charges. So girls like forced sex sometimes.

Sifiso: 50% of women like it [forced sex] and some don’t like it, and when you use force that turns some off. And some learn it from past relationships.

Ajax’s discourse shows that he believed that some girls like forced sex. Such belief entails young men to engage in rape, because they believe that women enjoy such practices. Andersson et al (2004) indicate in their study conducted in South Africa that 27.3 % of men stated that girls like sexually violent guys. Stavrou and Kaufman (2004) maintain that coercion and violence are so common that young women accept it as an expression of love, and involve very little negotiation or communication.

Mario’s narrative demonstrates how young men encourage the culture of violence by endorsing violence as a way of gaining control and obtaining sex from women. Boonzaier (2008) shows that many men discuss their violence as an enforcement of the patriarchal masculinity narrative.

Coke and Njabulo demonstrate that young men are encouraged to have forced sex because of rumours spreading that girls seek such a practice from their boyfriends.
Boonzaier (2008) corroborates that there are social norms that encourage violence against women, these norms supporting the acceptability of men’s violence against women are internalised and reproduced by both young men and women.

However, a few young men openly state that such treatment is wrong. One of the participants in the current study gives a different opinion concerning the assumption that indicates that girls like forced sex:

No means no, it does not matter how wet/ready she may seem. Once she says no it’s no, you as a guy should stop because she knows why she says no (Joe).

In terms of actually practicing violent sex, at least one participant was responsive to the request of women: I tried once but she cried and I stopped (Hall). This concurs with the finding of Kalichman et al (2005) where 23% of men indicated that they had sexually assaulted a woman, and 16% of women also reported that they had perpetrated sexual assault.

4.4.3 GIRLS ASK FOR RAPE

Joe: women of today also perpetuate rape in some way, because of the way they dress. Some dress in the shortest mini skirts they can find, women’s dress code is the biggest cause of rape.

Thando: I agree with this point that women dress in short dresses, and that some women go out late at night in these mini skirts and some don’t even wear panties. When they dress like this, then guys who take drugs might see her and be tempted to commit rape.

Ajex: I think women who go out at night wearing these mini skirts and no panties, are at times on a mission to spread the HIV/AIDS when they know they already got the virus.

Mario: I think sometimes it is due to their dress code, going out alone at night by a bush. Sometime she is drunk and usually guys see that she is asking for rape or to teach her a lesson.

Tj: I spoke with one girl who said she goes out in her mini skirt without panties late at night, and when someone could say he wanted to rape her she would tell the person to calm down, and that she is not wearing panties he can have as much as he wants, that’s why she is here.
Coke: I think when they go out late at night they are asking for rape. Girls are always told not to go out at night and they must go out in a group.

Joe believes that women are responsible of rape they claim to be victims of, and also shows that rape occurs because of women’s way of dressing that attracts men to have sex with them. This assumption is consistent with previous research conducted in South Africa that indicates that as many as one in five participants across genders agreed that rape usually occurs as a result of the actions of a woman and that she can often be blamed for it (Kalichman et al, 2005). Another study conducted in South Africa also concurs that 15.1 % of male claimed that girls who are raped ask for it (Andersson et al, 2004).

Thando’s assumption demonstrates how men find an excuse in committing rape because of women’s dressing code. Men believe that women are seeking for rape when they go out during the night wearing mini skirts. Petersen et al (2005) argue that both male and female participants in their findings link patriarchal ideology to rape myths, and from these ones they try to rationalise and legitimate sexual abuse. They again assert that men are unable to control their sexual urges and that women/girls are responsible for controlling them. This implies that if a girl wears clothing that shows off her body, or walks about at night, she is asking to be raped.

Ajex adds an additional point to men assumption towards female in which men believe that women who dress in mini skirts during the night are spreading HIV/AIDS. Sathiparsad and Taylor (2006) in their study find that though boys are very clear that they are at risk of HIV, they do not see it as their role to implement safe sex and try to avoid the blame. Men still perceive women to bear the main responsibility.

Tj demonstrates in his narrative that girls are dressing to harass males’ minds, after seeing girls’ dressing code as an invitation to rape them. He shows that when women dress in such a way, women are ready for sex with anyone who asks for it. Jewkes et al (2002) indicate that forced sex is more widespread in societies where societal
attitudes are conducive to sexual violence, such as in those that accept and believe in prevailing ‘rape myths’ such as the belief that men rape because they cannot control their sexual lust, women encourage rape, rapists are strangers and women enjoy being raped. These myths intend to present women as responsible for the rape and to view men’s actions as excusable, thereby giving silent consent to their actions. These rape myths also reduce the likelihood of women reporting their rape, for fear of being blamed and stigmatised. Kalichman et al (2005) demonstrate that women in Cape Town supported the view that women are subordinate and passive in their relationships with men and that women are often to blame for rape. Boonzaier (2008) also finds that women endorsed the rape myths at rates that did not differ from men.

Some reported that girls entice men to rape them so that they expose men as perpetrators.

Thando: We have see this all the time, and woman have even formed a way to solve the problem, when they (women) see that a guy rapes woman and threatens them not say anything, one will try to entice to her till he does come to her and when he rapes her or tries to she will expose him and get him arrested.

Sifiso: some (girls) might like to have sex with you, so they can use that against you.

4.4.4 NOT DYING ALONE

Joe: we as men have an influence in spreading AIDS, once we have AIDS we definitely want spread it. I’ll definitely spread it if I have AIDS. I would spread as much as I can before I die.

Thando: I would spread it [HIV/AIDS]; I’d want to know that I am not dying by myself.

Njabulo: I’d spread it.

Ajex: Man behaviour is bad, when a guy knows he has AIDS he will want to spread the disease to other people. Some even go to the point of going around and raping both men and women to spread the virus.
Some of participants (Joe, Thando, Njabulo) were quite clear that if they contracted HIV/AIDS they would take other people with them. Thando and Njabulo reveal that some men do not bear the idea of dying alone when they contract HIV/AIDS. These respondents also prove that they are ready to spread the virus.

Ajax deplores the behaviour of some men who are animated with such vengeance when they find themselves being victims of HIV/AIDS; their intention being to spread the virus to those who are still not infected so that they cannot die alone. Kalichman et al (2006) in their surveys completed by 414 HIV positive men and 641 HIV positive women participants in Cape Town. The majority of participants had HIV positive partners. 50% of men and 32% of women reported having HIV negative partners and 39% of both men and women had sex partners whose HIV status they did not know. Both men and women reported unprotected vaginal and unprotected anal intercourse with HIV concordant and HIV non-concordant sex partners. Men were more likely than women to have unprotected anal intercourse with concordant and non-concordant partners. HIV exposure risks could occur in these sexual encounters.

4.4.5 HIV STIGMA

Mario: I think some people might be scared to come out with their status, for example Gugu Ndlamini came with her status and the mob in the township killed her.

Coke: I think coming out with our status is good but not all the time.

Thando; Hey dude it’s such a drag going to have a test, we should just use condoms and stick to it.

Thando’s opinion describes the challenge that many people encounter while trying to reveal their HIV status. Some people are afraid of publicly disclose their HIV status because of the stigma that people have towards those who are HIV positive. Kalichman et al (2007) corroborate that young people do not talk to friends and others about their HIV positive status because they feared potential adverse reactions. Individuals who have disclosed their HIV status to sex partners were significantly
more likely to have experienced discrimination related to their HIV status and they were more likely to lose a job or a place to stay because they are HIV positive.

Mario and Coke’s assumption reveals that the stigma surrounding HIV/AIDS in African society is more prevalent. People living with HIV/AIDS are often fearful of their neighbours’ response. They are often ashamed they contracted the disease. Where speaking of Dlamini, Mario refers to an HIV positive woman of 36 years old, Gugu Dlamini, who was beaten and stoned to death by a mob of young men in KwaMashu in 1998. Many believe that her death was because she broke the silence of her illness in publicly declaration made at an AIDS awareness gathering where she revealed her HIV positive status before she died. Maman et al (2000) maintain that women who test for HIV and decide to share their test results with partners may be at increased risk of violence. Barker and Ricardo (2005) find that some young men believe being an HIV positive brings a person to lose his traditional ideal of being virile, healthy, productive and working. Consequently, both adult and young men are less likely to care for their health in general and are reluctant to reveal their HIV status. Brummer (2002) argues that the attitude of the respondents towards the issue of HIV testing was characterised by a lot of ambiguity. Most of them acknowledged the necessity of knowing their HIV status, but at the same time there was a lot of fear and a consequent reluctance to be tested.

4.5. CULTURAL BELIEFS AND PRACTICES

4.5.1 A PATRIARCHAL CULTURE

Njabulo: I believe that it is mostly guys who want sex rather than the girls.

Nhlaka: I agree, the moment you do it [forced sex], you get the power every time a man does and so he carries on all the time. And because men are stronger than women, this position gives them power.

Njabulo believes that man is the mostly one who wants sex. Such a patriarchal attitude portrays males as being the only one who has got right of demanding sex and fixing time of sex. This assumption may encourage men from not seeking the consent to have sex because of considering their girlfriends as less inferior. Wood et al (2008) corroborate that in young men’s thinking, their female peers are unequivocally inferior. Young men’s talk was described with comments like “a woman is someone who is left behind,” “a woman is weak by nature,” and “it is the way it was created.” Hierarchical sexual difference was also something that many young men described as cultural, both explicitly using the words “it’s our culture” and implicitly describing it as an aspect of life in which they grew up simply “knowing.” Ackermann and De Klerk (2002) maintain that power relations and gender dominance in favour of men characterise the approach to sex among South African males and females. For instance, males are able to initiate sex whenever they wish because of their dominance in the relationship, while females are expected to be passive. Wood et al (2008, p. 60) argues that young men use the notions of masculine superiority in sexual relationships. Hierarchy is described in relation with sexual practice and reinforced through the culturally entrenched notion of ukulonipha (respect). Barker and Ricardo (2005) emphasise that the imbalanced social power between young men and women in Africa, combined with the patterns of risk behaviours among young men, suggests that young men play a key role in shaping the future of the epidemic.

Nhlaka demonstrates that young men believe women are weak, and that men profit from their natural physical conditions to abuse and rape women. Every time men do so, they think gaining control over women. Friedman et al (2006) explain that sexual
violence is enhanced by culturally defined male and female roles in society. South Africa is traditionally a male dominated and patriarchal society, where women are not given enough power and authority and are frequently controlled or abused, supported by a culture that reinforces this. Varga (2001) maintains that young women have been socialised to accept the subtle forms of control around sexual activity. Wood and Jewkes (2001) prove that young men regard violence against women as a socially accepted extension of male authority in the private realm. Kalichman et al (2005) confirm that gender-power differences are related to a range of factors that increase risks for sexually transmitted infections, including HIV infection. CADRE (2003) emphasises that the unequal power in sexual relations is associated with sexual transmission of HIV infection in many respects.

4.5.2 SEX IS FOR SHOWING LOVE

Njabulo: I believe that there must be sex to show love

Nhlaka: I agree there must be sex to show love

Thando: For love to grow there must be sex

Andile: For me sex and love go hand in hand.

Sizwe: I agree sex and love go hand in hand, and to show trust sex must be given.

The above participants prove that having sex in a relationship is an obligation. There cannot be a relationship without sex, and believe that sex helps love to grow. The relationship that does not involve sex is not worthy to exist. Barker and Ricardo (2005) confirm that for young men in sub-Saharan Africa, sexual practice is often associated with initiation into manhood and achieving a socially accepted manhood. This nurtures a perception of sex as performance, specifically a means by which to demonstrate masculine prowess. Wood et al (1998, p.236) indicate that young women also believe that the agreement to love is equated specifically with having penetrative intercourse and being available sexually, an equation which appears to derive mostly from the men, who report telling women that sex is the “purpose” of being “in love”,

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and that people “in love” must have sex “as often as possible”. Andersson et al (2004) report in their study that 43.5 % of male claimed a man has to have sex with a girlfriend to show that they love each other. Boonzaier (2008, p.193) proves that there is constant ambiguity between sexual love and abuse that is prevalent in some men’s assumption and shows how their notions of manhood are intimately associated with ideas about sexual gratification and having other physiology ‘needs’ supplied by a woman partner. Sexuality and the control of females are connected to ideals of masculinity and femininity and it is a primary means by which men and women can adhere to and observe conformity to dominating gendered standards. MacPhail and Campbell (2001) in their study conducted in a South African township, find that female participants demonstrate that men engage in relationships to satisfy their own sexual needs whereas women perceived themselves as powerless to define relationships on other terms.

4.5.3 A CULTURE OF FORCED SEX

Ajex: I agree with that some guys who force their girls to have sex, nurture a bad habit of doing it to other women at parties when they find that these women show resistance they rape them.

Thando: I think this [forced sex] go beyond the one person you are in a relationship with. For instance some guys have a tendency to even ask out women in a rough manner, so sexual violence goes beyond to other people they are not in a relationship with.

Joe: Yes I think it does go further than the relation one has, if one is used to it they start not to be afraid to do it to other woman.

Ajax disapproves men’s practice of forced sex. He demonstrates that those who nurture a bad habit of applying such a practice when women show resistance to their sexual intercourse suggestions, they may continue to do it to other girls who are not their girlfriends. Wood and Jewkes (2001) corroborate that young people in sub-Saharan are used to violence and coercion, involving verbal threats and forced sex which are common in their sexual relationships. MacPhail and Campbell (2001) confirm that for example, in a study in a South Africa township, young men ages 13-
25 report that they have tricked young women into sex, misled them about the use of condoms and used physical violence against women.

Thando and Joe also disapprove this culture of sexual violence, and believe that once the perpetrators are used to forced sex they cannot stop to perpetuate it to other women though these women are not in relationships with them.

We saw earlier (sections 4.2.3 and 4.4.1) that men believe that they cannot control their sexual urges and that therefore forced sex is justifiable. But there does seem to be some leeway if a ‘good reason’ exists. The fact that good reasons may help explain why having multiple partners is common.

Joe: According to me she (woman) does not have a right to say no to sex, and if she does she must have a good reason that allows her to do so.

Nhlaka: Girls do have a right to say no to sex, but they must not say no all the time, the following time she must have a good reason.

Coke: Girls have a right to say no, but guys put pressure thinking that girls have slept with another person, so they must sleep with them as well.

Mario: I think if you have had sex with her before she must have a good reason why, when she says no the next time.

Halls: I can respect the woman’s decision not to have sex, but only if she goes for virginal testing.

Joe states that women basically have no right to refuse sex. His opinion demonstrates men’s thinking of women as unequal of men. Such thinking fosters violence and shapes men’s behaviour of believing that there is no need to have a sexual consent with a woman. Andersson et al (2004) maintain that women on the other hand are not expected to refuse sexual advances from males. 28. 4 % of men report in this study that girls do not have right to refuse sex with their boyfriend, this reflects existing notions that male sexuality is instinctive and uncontrollable. Boonzaier (2008) confirms that men put the lack of sexual activity in the relationship forward as the rationale for marital infidelity.
For Nhlaka, women have no right to often refuse sex; they must give a good reason in explaining why they do not agree to have sex with their partners. Krahé et al (2007) corroborate that the traditional sexual script provides the role of initiators to males and the role of gatekeepers of sexual intimacy to females. It indicates that the negative response to male’s sexual advances by the woman is part of this role division.

Coke acknowledges consensual sexual right to women, and mentions that some men do not recognise such right to women because they believe women do not like to have sex with them while they can have it with other men. That why majority of young men put pressure to women for having sex with them though they verbally express and demonstrate that they do not like it. Boonzaier (2008) confirms that men use pressure on females to be sexually intimate with them. They do so by showing that women do not gratify them sexually and in so doing that men attack females’ lack of conformity to the traditional standards of femininity.

For Halls, women have right to refuse sex only if they are virgin. Otherwise for those who are sexually active and those who have lost their virginity have no right of refusing sex with their partners.

4.5.4 SPEND MONEY, GETTING SEX IN RETURN

Tshepo: some girls pick the guys they want to have sex with nicely, those guys who have money they freely give sex to them without a fuss. For us young guys we have to use pressure on them, so that receive what we want from them.

Tj: Today young people sleep with complete strangers and it’s so cool to today’s youth, sex without strings. Woman today are known as two quarts, you only have to buy them two beers and you guaranteed sex for the night.

Andile: A woman is making a fool out of you if she say’s no after you have spent so much on her, you have to put her in pressure until she accepts.

Thando: Yes, I spend money on her, and then we must go to bed.
Tshepo indicates that girls freely give sex to men who have got money and resist those who do not have. He states that he, and the rest of men who do not have money to offer to girls, have to use pressure on girls to have sex. Such an assumption reveals that women are exposed to sexual violence due to the fact that young men believe when women resist them for having sex is because they have no money to spend on them. Low-income young men frequently express frustration over the fact that young women are largely attracted to those older men with income who compete with young men and seduce their girlfriends. Young men also believe that it is not easy to negotiate sex with girls because they do not have money to give to girls while these ones are receiving money from old men for having sex with them. And because of this situation, young men have to put pressure to girls when they negotiate sex with them. Hallman (2004) in his study of young people in South Africa finds that both gift giving and coercion were reported to be common in sexual relationships. Hunter (2005) confirms that the pleasure of sex is openly celebrated, but these relationships are based on money, especially those relationships with sugar daddies. Some unemployed men or schoolboys complain that they find it difficult to secure a single girlfriend because sugar daddies are well financially positioned to attract more girls. Hunter (2002) and Kaufman and Stavrou (2004) corroborate that poor men frequently complain about the difficulties they have in attracting girlfriends. These men are angry of rich men, not simply because they consume expensive goods, but because they consume many of the women in the area. Collins and Rau (2000) maintain that in societies characterised by social inequalities, so-called “sugar daddies”, older men with money procure the sexual services of young girls in exchange for gifts or spending money. Kelly (2000) explains that the "sugar daddy" is a phenomenon where younger girls offer sexual services to older men in exchange for gifts. This is facilitated by the older men's higher socio-economic status which encourages multi-partner behaviour and an increased risk to contracting sexually transmitted diseases and HIV/AIDS. Friedman et al (2006) argue that the shifting sexual arrangements, in which young women become involved in relationships with older men, have implications for HIV risk for both young women and their peer males. Kaufman and Stavrou (2004) maintain that sometimes this is because gifts are supposed to convey sexual privilege, a privilege that is sometimes assumed forcibly. The evidence suggests that gifts are likely to reduce the ability of girls to demand condom use, and
can also be associated with sexual influence, an exchange that somehow entitles one partner to physical and sexual rights to the other’s body.

Gifts play an important role in shaping the sexual terms of a relationship and may have destructive effects on the ability of women - and sometimes of men - to express their preferences for the type of sexual activity, its initiation, or the use of safe practices when engaging in sex (Kaufman and Stavrou, 2004, p.21). Young men, particularly low-income young men, are constantly at risk of losing face because older men and men with money are more likely to attract partners. Some men may use other strategies to compensate for this lack of power. And achieve and secure their authority over women, including aggressiveness and violence (Silberschmidt, 2001).

Gifts are often accepted implicitly and sometimes explicitly as a sign of imminent sex. They connote physical obligation. When asked female participants what the expectations might be should money be given and received by partners early in a relationship, they declared that this would mean the right to demand sex (Kaufman and Stavrou 2004). Sex is recognised as a driving force for males to engage in relationships, and money as one of the main reasons for females to have relationships (MacPhail and Campbell 2001).

Andile believes that when a man spends money on a woman and she refuses to have sex with him, he has to put her in pressure until she accepts. Men believe that they have the entitlement right on their girlfriends especially when young men give money or gifts to girls. In such a condition, young men believe that they have to impose their will to women. Kaufman and Stavrou (2004) corroborate that sex does not occur without economic exchange of some form, if a man had spent a lot of money to entertain the woman, then he would be aggrieved if she did not consent to sex. Ackermann and De Klerk (2002) confirm that young girls who have financial problems exchange sex for money to buy the basics such as soap and food, and some even use this money to pay for their education. Relationships are constructed in nature, with the girls expected to be available in exchange for presents of money, clothes, and food. Hunter (2002) differentiates sex related to subsistence needs and sex related to socially expecting consumption desires in KwaZulu-Natal. The former behaviour is more frequent in rural areas where economic circumstances have
severely limited the livelihood opportunities of young women. The latter behaviour is more characteristic of semi-urban areas where fashionable consumer goods are highly socially valued; here young women are more likely to assert their agency and exercise greater freedom of movement, both of which facilitate relationships with men including “sponsors.” Kaufman and Stavrou (2004) remark that during dating and courtship between young people, exchanges of gifts are normal and are often expected.

4.5.5 PARENTS, TRADITION AND SEX

Sifiso: yes there is a link between male behaviour and the spread of HIV/AIDS. Men tend to listen to their friends more. If we as young people could listen to our parents more the spread would be slowed. Every parent wants his or her child to do the right thing.

Tshepo: I think what went wrong from the beginning was the lack of respect for elders, which has led to such immoral behaviour from men. Back in the days young people never ever kissed and touched in public but today it’s common to just see boys and girls doing what they like in full view of people. This behaviour has perpetuated the spread of AIDS.

Sifiso attributes the spread of HIV/AIDS to young people’s behaviour, and states that young people rely more on the peers for education than their parents. Parents no longer exercise their role of sexually educating their children, although their children require their support in the time like this where HIV infection extremely increases. Parents have difficult discussing sexual matters with their children because of considering sexual matters as taboo.

Tshepo links HIV/AIDS with cultural practices, and indicates that young people broke their traditions and imitate sexual practices that were not done in the past. They are no longer afraid of exposing their intimate sexual practices in public view what was not done with the older generation. Hunter (2002, p.397) confirms that many youth, particularly in urban settlements, are unaware that the practice of ukusoma (thigh sex) ever existed. Non-penetrative forms of sex (ukusoma, or thigh sex) were widely practiced among unmarried persons. The practice of non-penetrative thigh sex,
*ukuhlobonga* or *ukusoma*, was central to the control of sexuality and prevention of illicit pregnancies. Most men were discouraged from penetrative intercourse. Pregnancies were punished by the payment of *ihlawulo* (damages) and a man was also expected to marry any girlfriend who might become pregnant.

### 4.5.6 GENDER RIGHTS AND GENDER CONFLICT

Tj: women behave badly due to government laws which have given children too many rights, which have drastically led to women’s lack of respect towards men.

John: Due to government giving to women too many rights respect has been lost.

Tj and John reveal the conflict that exists between men and women because of the power shift dynamic in relationships. Men have difficult to accept women social position change where women were traditionally considered as passive, obedient, and unequal to men, and fulfilling traditional gender role in their relationship with their partners. Now women are in good positions due to the South African new constitution that recognises their right of protection from men’s abuse, and enshrines their equal position with men regarding job opportunities. Such a social change does not please some men who would like to see women keeping their past positions. Consequently men rape women in thinking that they discipline women. This finding is consistent, however, with recent data by Bhana et al (2009) from a semi-structured interviews and focus groups conducted in rural KwaZulu-Natal. They find that male teachers felt threatened by gender change emphasised by the new constitution drawing on the “crisis of masculinity” discourse which encourages ideas about male dominance and legitimated defensive ideas about male power making it difficult to develop alternate patterns of gender relations. Feelings of male disempowerment were also found in a similar study conducted in the Western Cape Province by Boonzaier (2008) who corroborates that men indicate that women are responsible for the violence, and claim to be victims of biased legal system. They position themselves as powerless victims of domineering partners. Men discuss this in terms of gender identity crisis and thus perceive shifts in the power dynamics of their relationships due to the new South African constitution that empowers women. Morrell (2002) supports that now even
women are competing. Men and women are competing for work, and women are expected to contribute to the family. Barker and Ricardo (2005) maintain that men react to women’s new roles, access to the labour market and education. In South Africa, for example, a handful of anti-feminist men’s groups have emerged.

Massive inequities and extreme poverty may exacerbate the sense of impotence that many men feel³, and women's efforts to get livelihoods in harsh socio-economic circumstances can also effect to construct dominant masculinities (Hunter, 2005). Men believe that traditional gender roles are being challenged in South African society, and that this is leading to increased power for women, and a correspondingly growing disempowerment among men (Kaufman et al, 2008). Men usually perceived their partners as domineering and used violence to reassert their expected dominance in the relationship (Boonzaier, 2008). However, it is important to highlight that men and masculinities are constantly in crisis and always changing (Barker and Ricardo, 2005).

³ “Men Think We Bring the Disease”: Challenges facing HIV-positive mothers in Soweto. http://www.journaids.org/docs/ja_research_garson_HIVpositivemothers.doc
4.6 CONCLUSION

This study has investigated the sources of men’s attitudes and behaviour towards females and found that there are various factors influencing male attitudes and behaviour, these factors were associated with violence. The risk of being violent was associated with using violence to solve problems. The majority of respondents have demonstrated to encourage violence as a way of solving problems especially when negotiating sex with their girlfriends. This chapter has shown, based on the response of a group of young Zulu men, that

1. Men feel that they are in charge
2. Men feel that they cannot control their sexual urges
3. Therefore, when they are aroused, they believe that their girlfriend/partner/wife must meet their sexual needs
4. If women are reluctant to have sex, it is ok to force them to do so.
5. Condoms reduce sexual pleasure

As a consequence of the above beliefs and practices, the spread of HIV/AIDS is likely to continue.
CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS

This chapter discusses the main findings of the study with reference to the key objectives, and provides some recommendations regarding male attitudes and behavioural change from the culture of violence and HIV/AIDS.

5.1 OVERVIEW

This study has examined the beliefs and practices that influence male attitudes and behaviour towards females at NqabakaZulu Comprehensive High School in KwaMashu Township, KwaZulu-Natal. Its specific aims (see section 1.3) were to:

- review relevant literature on male attitudes towards women and male behaviour towards women in South Africa; and the link between male behaviour and the spread of HIV/AIDS
- determine the attitudes of a sample of urban Zulu youth towards women and sex
- investigate the sources of these attitudes
- investigate the relationship between these attitudes and behaviour
- propose ways of building more peaceful attitudes and behaviour from the perspective of the culture of peace.

This study has explored how young men negotiate sex within socially conceptions of masculinity, and found that young men are at risk of HIV infection through their practice of unprotected sex. It found that young men at NqabakaZulu Comprehensive High School have adequate knowledge about HIV/AIDS transmission, but this does not translate into substantial safe behaviour. Few take the need for safe sex seriously or perceive HIV/AIDS as a personal threat. Young men were likely to engage in unprotected sex. Young men advocated the thinking such as “a man cannot eat a sweet in a wrapper,” which encourages them to deliberately engage in an unprotected sex “flesh-to-flesh” as a sign of celebrating their maleness. These attitudes and their impact on risk-taking behaviour are linked to the spread of HIV/AIDS (see section 4.3.1).
Use of condoms was viewed by most of participants as unpleasurable and suggestive of mistrust. In response to questions regarding condoms, participants reported that they do not like to wear condom because they are unreliable and can break during sexual encounters. They reiterated their desire to have “brown dash” i.e. sex without condom. The majority of participants in the study also claimed that if a woman asks a man to use condom, it means that she does not trust her man, or maybe she thinks her boyfriend is sick. In case a woman insists on condom use, men believe she is infected with HIV/AIDS. The practice of having sex without condom was motivated by males’ belief that having sex with condoms can diminish the sexual pleasure during sexual intercourse. By demonstrating the above assumptions, young men reveal to have little accurate information on condom knowledge and low perceptions of personal risk. Such ignorance leads young men to engage in unsafe behaviours that put them and their partners at risk.

The majority of participants in the study deliberately ignored their risk of HIV infection as they reported to have an exaggerated number of partners. Young men justified their multiple partnerships as a way of ensuring that they cannot miss a girlfriend to befriend and that this assists them in making a better choice in terms of marriage. Multiple partnerships reveal to be a risky behaviour conducive to the spread of HIV infection, especially in the case young men having unprotected sex with their girlfriends.

This study has also explored the way in which forced sex in KwaMashu is partially accepted as a norm among young men and their peers. Most obviously, forced sex emerges out of young men’s control over women and as a way to impress their peers. The respondents believe that a man cannot control his sexual urges. A majority of participants reported that a woman does not have the right to say no to sex, and if a woman says no, she must have a good reason that allows her to do so.

Young men in the study believed that when a girlfriend accepts to enter her boyfriend’s bedroom, this directly implies she is willing to have sex, and if a boy does not from profit such an opportunity he is considered as weak. This revealed that the search of consent among adolescents relating to their safe sex negotiation and sexual
encounters remains problematic. Young men believed that some girls mean yes when they say no, and even though girls say no their bodies still responding with a yes, so all a man has to do is put enough pressure until she says yes. The implications for forced sex and violence are clear.

This study found that peer pressure has a significant role in influencing young men’s sexual behaviour. Young men rely more on their peers for education than their parents. They are more susceptible to peers’ pressure that influences them to engage in relationships involving sex. Young men who attempted to withstand dominant discourses of masculinity by avoiding sex were subjected to taunting and teasing.

The majority of participants linked sex with a relationship and claimed that a relationship with a woman means sex, and sex cannot be separated from a relationship. The relationship between man and woman has to involve sex in order to show trust. Young men considered sex as a right that a relationship has to provide, for that reason men need sex and have to take it from women.

In this study most of participants reported that women are responsible for rape. They proved that rape occurs because of women’s code of dressing that entices men to have sex with them, especially when they dress attractively and flirting to men it is an invitation for attention. Young men in the current study attempted to excuse rape and blame the victim, they assume that a woman who draws attention is looking for sex or deserves what she gets. Young men view their actions as excusable. This reinforces the stereotypes of female receptiveness to male sexual aggression. Although these assumptions attributed the responsibility of rape to women, the dominant discourse still centres on men as the carrier of the disease who can infect women with HIV infection. The majority of the participants in the study did attribute the spread of HIV/AIDS to men due their behaviour such as wanting to have unprotected sex (flesh-to-flesh), having multiple sexual partners and deliberately spreading the virus. A majority of young men disapproved of the culture of sexual violence, asserting that once perpetrators are used to forced sex they cannot stop and will extend it to other women are not in relationships with them.
5.2 RECOMMENDATIONS

The results summarised in the previous section point to the need to change the attitudes of young men. Young men are encouraged to accept beliefs and attitudes such as:

1. Men can control their sexual urges.
2. While sex is good, it is possible for a person to live without it without suffering any mental or physical side effects.
3. Masturbation is a natural way of getting sexual release.
4. Violence or the threat of violence against another person is never justified.
5. It is very desirable to talk about your sexual needs with your partner and to listen to her talk about her needs. This will build your relationship.
6. Being faithful to one partner will help build a strong relationship and family and will prevent the partners contracting HIV/AIDS.
7. Condoms are very effective in preventing pregnancies and contracting HIV/AIDS and other STDs.

This not the place to discuss how such attitudes could be cost effectively spread; that would require a separate study. Peacock and Levack (2004), Chege (2005) and Petersen et al (2005), among others, have reviewed various efforts of ‘constructive male involvement’ to reduce levels of gender violence. Re-educating men to treat women respectfully and non-violently require sustained inputs from government, civil society, churches and schools. This study has clearly demonstrated the need for such re-education.
6. REFERENCES


Abdool-Karim, Q., 2001, Barriers to preventing human immunodeficiency virus in women: Experiences from KwaZulu-Natal, South Africa. *Journal of American Medical Women’s Association*, 56 (4) 193-196


Boonzaier, F., 2008, ‘If the Man says you Must sit, Then you Must sit’: The Relational Construction of Women Abuse: Gender, Subjectivity and Violence. *Feminism Psychology*, 18 (2) 183-206


Campbell, C., 2000, Selling sex in the time of AIDS: The psycho-social context of condom use by sex workers on a Southern African mine. *Social Science and Medicine*, 50 (4) 479-494
Campbell, C., 2003, Letting Them Die: Why HIV/AIDS Prevention Programmes Fail, 
*Health Education Research*, 20 (2) 266-267

level model of the roots of AIDS stigma in two South African communities, *Journal 
of health psychology*, 12 (3) 403-416.

Chege, J., 2005, Interventions linking gender relations and violence with reproductive 
health and HIV: rationale, effectiveness and gaps, *Agenda* (Special Focus: Gender, 
Culture and Rights), 114-123.

Cichocki, M. P. N., 2007, HIV around the World - South Africa, political turmoil and 
denial feeds a ranging epidemic http://aids.about.com/od/clinicaltrials/a/safrica.htm

Programme on Social Policy and Development*. Vol. no 4

Department of Health South Africa, 2007, HIV and AIDS Statistics for South Africa

Dunkle, K.L., Jewkes, R., Nduna, M., Jama, N., Levin, J., Sikweyiya, Y., and Koss, 
M.P., 2007, Transactional sex with casual and main partners among young South 
African men in the rural Eastern Cape: Prevalence, predictors, and associations with 
gender-based violence, *Social Science and Medicine*, 65 (6) 1235-1248

iour in South 
African youth, *Social Science & Medicine* 56(1) 149–165

Francis, D., 2004, Rethinking War and Peace, Pluto Press, London

Friedman, I., Mthembu, W., and Bam, N., 2006, The Impact of male sexuality on 
women’s and children health, *South African Health Review*, 151 (9) 151-164

presented at the annual meeting of the International Studies Association*, Montreal
http://www.allacademic.com//meta/pmlaapareseachcitation/0/7/4/6/1/pages74612/p7 
4612-3.php (accessed, 13 June 2008)

Hallman, K., 2004, Socioeconomic Disadvantage and Unsafe Sexual Behaviors 
Papers* No. 190. New York: Population Council

Harrison, A., O'Sullivan, L.F., Hoffman, S., Dolezal, C., and Morrell, R., 2006, 
Gender Role and Relationship Norms among Young Adults in South Africa: 
709-722

adolescents, *Spring*, 40 (157) 171-81


Lunt, P. and Livingston, S., 1996, Rethinking the focus group in media and communications research, *Journal of Communication* 46 (2) 79-98


Ndinda, C., Chimbwete, C., Mcgrath, N., and Pool, K., 2008, Perceptions of anal sex in rural South Africa, Culture, Health and Sexuality, 10 (2) 205-212

Nicodemus A., 1999, Africa still stigmatizes HIV-positive people, Mail and Guardian, Johannesburg


Pulerwitz, J., and Barker, G., 2008, Measurement Attitudes toward Gender Norms Young Men in Brazil, Development and Psychometric Evaluation of the GEM Scale, *Men and Masculinities*, 10 (3) 322-338


UNAIDS, 2008, Uniting the World against AIDS


Vicsek, L., 2007, A Scheme for Analyzing the Results of Focus Groups. International Journal Qualitative Methods, 6 (4) 20-34


Wood, K., Maforah, F., and Jewkes, R., 1998, “He forced me to love him”: putting violence on adolescent sexual health agendas. Social Science and Medicine, 47 (2) 233-242

QUESTIONNAIRE: FOCUS GROUP DISCUSSION AT NQABAKAZULU COMPREHENSIVE HIGH SCHOOL

I promise to keep confidentially all information that you will give me, so feel free to answer questions as honestly as possible. To ensure that nobody will know your identity, I will ask you to give a false name at the beginning of this interview to enable me to distinguish what you say from what other interviewees. I am going to use a tape recorder with your permission, to ensure I record your information accurately. Before introducing yourself at the beginning of this interview, please give me a false name, and your age. Each time you speak again, please give your false name.
## Focus group questions

<table>
<thead>
<tr>
<th>Specific aims</th>
<th>Focus group questions</th>
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<tbody>
<tr>
<td>2. To determine the attitudes of a sample of urban Zulu youth towards women</td>
<td>1. As a male, once you have a girlfriend, what are you expected to receive from her?</td>
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<tr>
<td></td>
<td>2. Man claim they cannot do without sex. Give reason why you agree or disagree with this statement.</td>
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<td></td>
<td>3. A man is supposed to start sexual contact. Give reason why you agree or disagree with this statement.</td>
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<td></td>
<td>4. Man is the only responsible for deciding on condom use. Give reason why you agree or disagree with this statement.</td>
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<td></td>
<td>5. When a girl says “no” to have sex, does she actually means “yes”?</td>
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<td></td>
<td>6. Girls enjoy forcing sex. Do you agree or disagree with this statement?</td>
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<td></td>
<td>7. What do you think of a man with more than one sex partner?</td>
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<td></td>
<td>8. What do you think of a girl with more than one sex partner?</td>
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<td></td>
<td>9. Who is the sexual decision making between man and woman? Give reason for your choice?</td>
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</tbody>
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QUESTIONNAIRE: IN-DEPTH INTERVIEW AT NQABAKAZULU COMPREHENSIVE HIGH SCHOOL

I promise to keep confidentially all information that you will give me, so feel free to answer questions as honestly as possible. To ensure that nobody will know your identity, I will ask you to give a false name at the beginning of this interview to enable me to distinguish what you say from what other interviewees. I am going to use a tape recorder with your permission, to ensure I record your information accurately. Before introducing yourself at the beginning of this interview, please give me a false name, and your age. Each time you speak again, please mention your false name.
### Specific aims

3. To investigate the sources of these attitudes

### In-depth interview questions

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<tbody>
<tr>
<td>1.</td>
<td>What was your age when you had sex for the first time?</td>
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<td>2.</td>
<td>Was having sex at that time your choice, or your partner’s choice?</td>
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<td>3.</td>
<td>Can you have a relationship (with your girlfriend) without sex? If not explain why?</td>
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<td>4.</td>
<td>What reason /s can you give for having sex?</td>
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<td>5.</td>
<td>A person has to have sex with a girlfriend to show that he loves her. Give reason why you agree or disagree with this statement.</td>
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<td>6.</td>
<td>Does a girl have right to refuse sex with her boyfriend?</td>
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<td>7.</td>
<td>In your community, do people say AIDS is a ‘male’ or ‘female’ disease? What reasons do they give for their beliefs?</td>
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<td>8.</td>
<td>People believe that sex with a virgin can cure HIV/AIDS. Do you agree or disagree with this statement?</td>
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<td>9.</td>
<td>How many girlfriends do you have? What ages are they? Do you have sex with all of them?</td>
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<tr>
<td>10.</td>
<td>Do you use condom each time you have sex with your girlfriend/s or partner</td>
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<td>11.</td>
<td>What come in your mind when your girlfriend/partner asks you to use condom in your intercourse relations.</td>
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<td>12.</td>
<td>In your traditional culture, who is considered a ‘real man’? Is today’s ‘real man’ ‘different, and if so, in which ways?</td>
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<td>13.</td>
<td>What do you do when your girlfriend refuse to have sex with you?</td>
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<td>14.</td>
<td>Do you think that the use of condom in sexual intercourse is a safer way?</td>
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<td>15.</td>
<td>Do you think that forced sex is normal in a relationship? What do you think encourages it?</td>
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<td>4. To investigate the relationship between these attitudes and behaviour</td>
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<td>16. In your opinion, is there a link between HIV expansion and population mobility including changing sexual networks during apartheid era?</td>
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<td>17. Do you think that the disruption of normal family life by the migrant labour system during the apartheid influenced the spread of HIV/AIDS?</td>
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<td>18. What do you think of the following practice: young women have to become pregnant to prove their fertility before marriage?</td>
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<td>19. What do you do when your girlfriend/partner insists on condom use during the sexual intercourse?</td>
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<td>20. Have you ever had sexual intercourse with a person when she really did not want to</td>
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<td>21. Do you use condom in sex? If yes explain why? If not, explain why?</td>
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<tr>
<td>22. What is your reaction when your girlfriend says no to your suggestion of having sex with her?</td>
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<td>23. Girls who are raped ask for it. Do you agree or disagree with this statement?</td>
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<td>24. Sexual violence does not include forcing sex with someone you know. Give reason why you agree or disagree with this statement.</td>
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<td>25. Are boys of your age sexually active, do they use a condom each time they engage in sex? If yes why? If not why?</td>
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<td>26. Would you spread HIV if you find yourself being HIV positive?</td>
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