LET'S TALK ABOUT IT
AN INVESTIGATION OF COMMUNICATIVE PARAMETERS IN SEXUALITY DISCOURSE

THESIS
Submitted in part-fulfilment of a
MASTERS DEGREE IN RESEARCH PSYCHOLOGY
by
JACQUELINE GREER MARX

January 2006
Abstract

This study investigated communicative parameters in parent-adolescent and peer discussions about sex. While most sexual health interventions rely on communication and the dissemination of information, little research has sought to elucidate how talk about sex is mediated by the social and cultural context in which it occurs. This study was undertaken with the purpose of obtaining a better understanding of the way in which contextual factors mediate talk. In order to do this, oral histories of participants' first knowledge of sex and first sex experiences were accessed. Participants of different ages were interviewed with a view to exploring how social and cultural factors mediating talk changed over time.

Previous research on this topic was conducted among an isiXhosa community situated in a deep rural area of the Eastern Cape. In order to explore further how contextual factors mediate sexuality talk participants for this study were drawn from a 'white', middle-class community living in an urban area of KwaZulu-Natal.

Activity Theory provided a theoretical framework for the study and thus informed the research design. Data was collected through a series of in-depth interviews and focus group discussions with women of different ages. The interview and focus group discussions were recorded and transcribed verbatim. Data in the form of text was then analysed using some of the features of Grounded Theory. The analysis of data was done using ATLAS.ti which is a qualitative analysis software programme that is designed to assist in Grounded Theory analysis.

Themes arising in the results include: the framing of sexual initiation within the context of a relationship; a limited acceptance of adolescent sexuality which has the effect of silencing young people's talk about their experiences; parental regulation of adolescents sexual activity; and peer talk as a platform for adolescents to talk about their experiences and to share information about sex. Following from these findings it is argued that there needs to be a greater acknowledgement in contemporary psychological research of female desire as a normative aspect of female adolescent development. Instead of focusing on abstinence and safe sex alone, parents should aim to facilitate the development of healthy sexuality among young women.
2.6 Context and mediation ............................................................................................................ 17
2.7 HIV/AIDS messaging ........................................................................................................ 18
2.8 Concepts: sex, sexuality, talk, and communication .......................................................... 19
2.9 Theoretical Framework ...................................................................................................... 19
    2.9.1 First generation Activity Theory .................................................................................. 20
    2.9.2 Second generation Activity Theory ............................................................................ 21
2.10 Talk as a form of activity .................................................................................................. 23
2.11 Extending the framework: third generation Activity Theory ........................................... 24
2.12 Summary of literature review .......................................................................................... 26

CHAPTER TWO: Methodology .................................................................................................. 28
1. Aim and rationale .................................................................................................................. 28
2. Research question ................................................................................................................ 28
3. Methodology ........................................................................................................................ 29
    3.1 Research design .............................................................................................................. 29
    3.2 Sampling ......................................................................................................................... 29
        3.2.1 Theoretical sampling .............................................................................................. 29
        3.2.2 Researcher / Participant dynamics ......................................................................... 30
    3.3 Participants ..................................................................................................................... 31
        3.3.1 Participant characteristics ..................................................................................... 31
        3.3.2 Participant recruitment .......................................................................................... 34
    3.4 Data collection ................................................................................................................ 35
        3.4.1 Oral history .............................................................................................................. 36
        3.4.2 Personal interviews ............................................................................................... 36
        3.4.3 Series interviews ................................................................................................... 37
        3.4.4 Focus group discussions ......................................................................................... 38
    3.5 Research procedure ........................................................................................................ 39
        3.5.1 Pilot interviews ....................................................................................................... 39
        3.5.2 Collecting data ....................................................................................................... 39
        3.5.3 Data processing ..................................................................................................... 40
    3.6 Method of analysis ......................................................................................................... 41
3.6.1 Information management ................................................................. 41
3.6.2 Analytic tool: Grounded Theory ......................................................... 41
3.6.3 Evidence .......................................................................................... 42
3.6.4 Computer-assisted analysis of qualitative data ...................................... 43
3.6.5 Activity systems ................................................................................. 43
3.6.6 Constant comparison ......................................................................... 44
3.7 Ethical issues ....................................................................................... 45
3.7.1 Topic .................................................................................................. 45
3.7.2 Informed consent .............................................................................. 45
3.7.3 Confidentiality ................................................................................... 46
3.7.4 Risks and benefits ............................................................................ 46

CHAPTER THREE: Results ........................................................................... 48
1. Contextualizing sex .............................................................................. 49
   1.1 Relationships ...................................................................................... 49
   1.2 Abstinence and monogamy ................................................................. 53
   1.3 The heterosexual ideal ....................................................................... 54
2. Responsibility normatively associated with engaging in sexual activity .... 56
   2.1 Avoiding pregnancy ........................................................................... 56
3. Coercive sex ......................................................................................... 57
4. Taboo issues identified in peer talk ....................................................... 63
5. Adolescents preference for peer talk .................................................... 66
6. Too young for sex .................................................................................. 68
7. Silencing talk about experiences ........................................................... 69
8. Pregnancy: the biggest disaster ............................................................. 70
9. Sex was never discussed ....................................................................... 71
10. Parental regulation of adolescent sexuality ......................................... 74
11. Summary of results ............................................................................. 76
CHAPTER FOUR: Discussion

1. Rules and the activity of talk
2. Normative ideals framing talk
3. Factors mediating mothers' talk
4. Factors mediating daughters' talk
5. Factors mediating peer talk
6. Parent and peer talk: different activities
7. Summary

CHAPTER FIVE: Conclusion

1. Concluding remarks
2. Recommendations
3. Limitations of the study

REFERENCES

APPENDICES
List of Figures

Figure 1  Vygotsky's concept of mediated action. 20
Figure 2  Engeström's depiction of the activity system 22
Figure 3  Interacting systems of activity 25
Figure 5  Factors mediating mothers' talk 86
Figure 6  Factors mediating daughters' talk 87
Figure 7  Factors mediating peer talk 92
Figure 8  Parent-adolescent and peer systems of activity 96

List of Tables

Table 1  Summary of participants 33
Acknowledgements

I'd like to thank my supervisor Mary van der Riet for her oversight and direction, valuable input and comments, and much-needed support.

Sally Bamber, for assisting me with the editing and checking of this document and for her comments on earlier drafts.

John Rautenbach, for his contributions regarding formatting as well as his all-around technical support.
Modalities of practices...are powerful and hard to resist precisely because they are silent and insidious, insistent and insinuating.

Pierre Bourdieu
CHAPTER ONE

1. Introduction

This study focuses on adolescents and talk on the topic of sex. The decision to focus on adolescents was informed by a contemporary approach in developmental psychology that constructs adolescence as a crucial moment of development, and in particular the development of adult sexuality. However, the perilous nature of this transition is indicated in a growing body of research that regards adolescent sexuality as problematic. In South Africa contemporary research on adolescence and sexuality is undertaken within the context of the HIV/AIDS pandemic. Within this context, interventions which seek to impact upon adolescents’ sexual health rely on communication and information dissemination. The type of information that is communicated is informed by research that has sought to identify specific factors increasing youths’ vulnerability to HIV/AIDS. This in turn has been informed by a dominant epidemiological approach to HIV/AIDS in which unprotected heterosexual intercourse has been identified as the primary means through which the HI virus is transmitted. In line with this approach interventions have sought to change behaviour at an individual level by advising people to adopt safer sex practices. An example of this type of messaging is the ABC message which advises individuals to Abstain, Be faithful to one partner, and use a Condom.

More recently individualist approaches to behaviour change have been deemed problematic because they negate the context in which sexual behaviour occurs. In response to this shortcoming contemporary South African research has sought to understand how broader contextual factors such as poverty, gender relations, and cultural beliefs and practices mediate individuals’ capacities to engage in safer sex behaviour. However, despite the move to contextualise sexual behaviour HIV/AIDS messaging continues to focus on individual behaviour change. Thus, while it is acknowledged that sex occurs within a context, it has yet to be acknowledged that talk about sex also occurs within a context. This has implications for interventions based on information dissemination and discussion of sex and safer sex practices, arguably making it an important issue and one that deserves more attention. In order to bridge the gap this study sought to explore how contextual factors mediate adolescents’ discussions with their parents and peers on the topic of sex. The study was undertaken within the context of an urban ‘white’ middle-class community in KwaZulu-Natal.
2. Literature review

2.1 Adolescence and sexuality

In contemporary literature, adolescence is conceptualised as a process of developmental transition from childhood to adulthood (Burman, 1994). During this time adolescents occupy a precarious position where they exist simultaneously as - to adopt the Derridian concept of difference (Derrida, 1978) - child/not child and adult/not adult. Ambivalent positioning confounds some social expectations in terms of rules and practices about doing and appropriate doing (Burman, 1994). Thus, for adolescents, the social context in which their sexuality emerges has relations of power bound up with it, and these simultaneously sanction and preclude particular behaviour.

A cursory review of literature on the topic revealed that adolescents' sexual behaviour receives a lot of attention in contemporary scientific research, and this profusion has had the effect of highlighting a multitude of anxieties that seem to proliferate around that topic. In South Africa, as in the U.S.A and England, research on adolescent sexuality tends to focus on negative outcomes. Negative outcomes most often include; pregnancy, early parenthood, abortion, and HIV/AIDS (Boult, 1992; Boult & Cunningham, 1991; DiClemente, 1990; Eaton, Flisher, & Leif, 2003; Erasmus, 1990; Hayes, 1987; Makiwane, 1998; Poggenpoel & Myburgh, 2002; Preston-Whyte & Zondi, 1991; Rubinsztein, 1992; Vundule, Maforah, Jewkes, & Jordaan, 2001). One effect of this type of research is that it problematises adolescent sexuality and validates the perceived need to regulate and control it.

This appears to be the case in Africa where youth are identified as being particularly vulnerable to HIV/AIDS (UNAIDS/WHO, 2004). In Sub-Saharan Africa, at least 10% of those aged between fifteen and forty-nine are estimated to be infected with HIV/AIDS (ibid.) and the majority of new infections in this region are among young people aged fifteen to twenty-four (ibid.). In South Africa, HIV transmission occurs primarily through unprotected heterosexual intercourse (UNICEF, 2002) and, in the absence of an HIV/AIDS vaccine, risk reduction in the form of behaviour change remains the primary focus for most HIV/AIDS interventions (ibid.).
2.2 Defining ‘risk’ and ‘prevention’

HIV/AIDS is arguably not the only risk associated with sexual behaviour in South Africa today, but the current scale of the epidemic does have the effect of making it the most imminent concern in contemporary literature pertaining to youth and sexual behaviour (e.g. Abdool Karim, Abdool Karim, Preston-Whyte, & Sankar, 1992; Akukuwe, 1999; Kelly & Parker, 2000; Kelly, Parker, & Lewis, 2001; Leclerc-Madlala, 2002; MacPhail & Campbell, 2000; Ntlabati, Kelly, & Mankayi, 2001; Shisana & Simbayi, 2002; Wood & Jewkes, 1997). One effect of the dominant, epidemiological approach to HIV/AIDS research in South Africa is that ‘risk’ is defined in terms of the probability that sexual intercourse will result in HIV transmission (Bajos, 1997; Eaton et al., 2003) while ‘prevention’ is understood in terms of eliminating or at least minimising that risk (Bajos, 1997; Eaton et al., 2003). However, regardless of the type of risk associated with sexual behaviour, an underlying assumption of preventative interventions is that appropriate knowledge is a prerequisite for safe sex behaviour (DiClemente, 1990). In other words, it is assumed that knowledge about what constitutes ‘risk’ and how to control, or minimise that risk, will result in the adoption of safer sex behaviours (behaviour change) such as abstinence or condom use, i.e. ‘prevention’.

2.3 Parents as primary sexuality educators

International research focusing on adolescent sexuality appears to be dominated by American scholars who advocate for parental responsibility in sexuality education (e.g. DiClemente, 1990; DiLorio, Kelley, & Hockenberry-Eaton, 1999; Dittus, Jaccard, & Gordon, 1999; Fox & Inazu, 1980; Guzman, Schlehofer-Sutton, Villanueva, Stritto, Casad, Feria, 2003; Miller, Norton, Fan, & Christopherson, 1998; Nolin & Petersen, 1992; Young-Pistella & Bonati, 1998). This reasoning is largely based on the argument that a child’s sexual socialisation begins at a young age within the context of the family, and it is within this context that social and cultural values pertaining to sex and sexuality are communicated and understood (Dittus et al., 1999; Fisher, 1986a, 1986b; Fox & Inazu, 1980; Guzman et al., 2003; Miller et al., 1998; Nolin & Petersen, 1992).
2.3.1 Responsibility

Parent-adolescent talk on the topic of sex and sexuality is perceived to be an effective means of encouraging adolescents to adopt responsible sexual behaviours. This is supported by research which indicates that adolescents who talk frequently about sex with their parents are less likely to be sexually active, and report increased condom use once they become sexually active (e.g. DiLorio et al., 1999; Dittus et al., 1999; Fox & Inazu, 1980; Holtzman & Rubinson, 1995; Miller, Kotchick, Dorsey, Forchand, & Ham, 1998; Murray, 1994; Shoop & Davidson, 1994).

In line with quantitative epidemiological studies, much of this research seeks to evaluate the effectiveness of parent-adolescent talk in terms of risk avoidance or risk reductive behaviours. Typically, researchers ask respondents about whether they have received information about certain topics, and then compare those data to, for example, adolescents’ age at sexual debut or contraceptive use at last sexual intercourse. Unfortunately, the methodology employed in the bulk of those studies tend to investigate one-dimensional (whether or not talk occurred) assessments of communication and sexual behaviour (e.g. condom use) while omitting or failing to elaborate upon the complexities of those processes.

In contrast, a smaller number of local and international studies have sought to investigate the nature and scope of parent-adolescent sexuality talk in more detail (e.g. Abdool Karim, Abdool Karim, & Nkomokazi, 1991; Dittus et al., 1999; Nolin & Petersen, 1992; Tucker, 1989; Young-Pistella & Bonati, 1998). Some familiar issues arise for debate from quantitative as well as qualitative, local and international research conducted on the topic of parent-adolescent sexuality talk. These issues include: communication between mothers and daughters; topics that are likely to be covered in parent-adolescent discussions; the scope of those discussions; affective components; and moral and normative attitudes and expectations espoused in parent-adolescent sexuality talk.

2.3.2 Communication between mothers and daughters

Local and international research on parent-adolescent sexuality talk overwhelmingly indicate mothers as the primary source of information within the family for both male and female adolescents (e.g. Abdool Karim et al., 1991; DiLorio et al., 1999; Dittus et al., 1999; Fisher, 1986a, 1986b; Guzman et al., 2003; Jaccard, Dittus, & Gordon, 1996; Miller et al., 1998; Nolin & Petersen, 1992;
Ntlabati et al., 2001; Tucker, 1989) and communication between mothers and daughters is identified as the familial context in which sexuality talk occurs most often and covers the broadest range of issues (DiLorio et al., 1999; Dittus et al., 1999; Guzman et al., 2003; Kelly, 2000; Nolin & Petersen, 1992; Ntlabati et al., 2001).

In comparison, male adolescents are less likely to engage in talk on the topic of sex and sexuality related issues with either parent. One explanation for this discrepancy is that female adolescents experience, more directly than male adolescents, the consequences of unprotected sexual intercourse, in the form of unintended pregnancy (Boult, 1992; Boult & Cunningham, 1991; Flick, 1986; Gillmore, Lewis, Lohr, Spencer, & White, 1997; Hayes, 1987; Makiwane, 1998; Moore & Chase-Lansdale, 2001; Poggenpoel & Myburgh, 2002; Preston-Whyte & Zondi, 1991; Rubinsztein, 1992; Vundule et al., 2001). This arguably places female adolescents in greater need of preventative (parental) intervention.

Nonetheless, it is noted (Kelly, 2000; Nolin & Petersen, 1992) that as a consequence, male adolescents often lack parental guidance and opportunity for talk on the topic of sex and sexuality related issues, and they are therefore left to interpret on their own their emerging sexual feelings and the cultural norms for male sexuality. This may also have the effect of rendering male adolescents more susceptible to peer pressure and influences from the mass media (Kelly, 2000; Nolin & Petersen, 1992). Thus, gender differences in family communication may result from, and serve to perpetuate, a sexual double standard (Nolin & Petersen, 1992) and this is elaborated upon in more detail below.

2.3.3 Themes and scope of parent-adolescent sexuality talk

Research indicates that parent-adolescent talk on the topic of sex is most likely to focus on issues such as: pregnancy, birth control, abstinence, HIV/AIDS and other STD's (DiLorio et al., 1999; Dittus et al., 1999; Helpren, 1983; Nolin & Petersen, 1992; Ntlabati et al., 2001; Tucker, 1989; Young-Pistella & Bonati, 1998). However, as noted above, talk on particular topics appears to be mediated by familial (mother-daughter) patterns of communication and in line with this, talk overwhelming centres on discourses of 'risk' and 'protection' (Abdool Karim et al., 1991; DiLorio et al., 1999; Dittus et al., 1999; Helpren, 1983; Nolin & Petersen, 1992; Ntlabati et al., 2001; Young-Pistella & Bonati, 1998). It is arguable that this implies a double standard – that female
adolescents, more than male adolescents, are deemed to be responsible for controlling for the risks associated with sexual intercourse – an assumption very often neglected in mainstream psychological literature.

Research findings also indicate that the nature of parent-adolescent sexuality talk is likely to change as adolescents grow older. For example, Fox and Inazu (1980) found that while menstruation and contraception were among the first sex-related topics mothers discuss with their daughters, talk on topics such as dating, sexual morality and sexual intercourse were more likely to be discussed with older adolescents.

Helpren (1983) suggests that mother-daughter sexuality talk can be classified into three general types. These are: (1) the big talk, which deals with issues such as conception and menstruation which tends to occur in early adolescence, (2) tea talks which deal with family values as applied to the behaviours of people who are known to both parents and daughters, and (3) social issues which address issues such as abortion, unintended pregnancy, and promiscuity which are more likely to occur later in life (Helpren, 1983). However, this is based on American research and may not be applicable to the South African context. For example, South African research findings (Ntlabati et al., 2001; Wood, Maforah, & Jewkes, 1998) suggest that in some local cultures, talk on the topic of sex is generally considered to be taboo. However, within such contexts it was also found that where talk does occur that it occurs primarily between mothers and daughters and is limited to talking about contraceptives and the avoidance of pregnancy (Ntlabati et al., 2001). Thus, while the latter appears to indicate some similarity across different social and cultural contexts, it is prudent to keep the limitations of those comparisons in mind.

Finally, because there is such a large body of research supporting a common finding that, within the family, mothers and daughters most often talk about sex and sexuality related issues, Tucker (1989) investigated the quality of mother daughter talk on the topic of sex and found that the information discussed in the process of that talk, which could arguably mediate its outcome, was often inaccurate. Areas that were identified where knowledge was particularly poor included: knowledge of the process of ovulation, discussion about male and female anatomy, the sexual process, and information about where contraceptives could be obtained (Tucker, 1989). In other words, much useful information that was needed for informed sexual decision making was neglected. This
highlights the need for researchers to take into account not only whether or not talk occurred, but the scope and accuracy of parent-adolescent talk also needs to be considered.

2.3.4 Affective component

Research investigating the affective component of parent-adolescent talk on the topic of sex indicates that parents often feel uncomfortable talking to their adolescent children (DiLorio et al., 1999; Geasler, Dannison, & Edlund, 1995; Nolin & Petersen, 1992). Findings from these studies indicate that while parents reported feeling relatively comfortable talking about factual information with young adolescents, they reported that talk on social and cultural issues relating to sex, such as when it is appropriate to have sexual intercourse, proved to be a lot more difficult (Geasler et al., 1995; Nolin & Petersen, 1992).

Some explanation for this is offered by Geasler et al. (1995) who suggest that parents are often confused about the conflicting values and norms about sex and sex related issues that are depicted in popular culture, compared with the norms and values they grew up with. This is supported in the findings of research conducted by Jaccard et al. (2000) in which parents indicated their concern that talk on the topic of sex would embarrass their adolescent child, or that their adolescent child would ask a question that they could not answer. Other parental reservations highlighted in the research include concern that their adolescent child would think they were prying, that they would not be taken seriously, or that their child would not be honest with them (ibid.). These latter findings also point to constructions of sex as a private activity, and it is arguable that the private nature of sex makes it all the more difficult to talk about.

2.3.5 Normative attitudes and expectations

Despite the risks associated with adolescent sexuality and the perceived need for parents to regulate and control it, Ntlabati et al. (2001), in a study of social and cultural factors mediating adolescents sexual behaviour in a rural community in the Eastern Cape, found that mothers were often hesitant to talk to their female adolescent children about sexuality related issues such as contraception for fear that adolescents would interpret that as an indication that their becoming sexually active was condoned.
In the U.S.A, researchers Dittus et al. (1999) found that mothers of female adolescents who participated in their study, were concerned to talk to their daughters about: the risk of gaining a bad reputation, about not having sex until marriage, about feeling guilty afterwards, that sex outside of marriage was sinful, or that sex should at least occur within the context of a loving and committed relationship, about parents’ own attitudes towards adolescent sexual activity, parental punishment as a result of sexual activity, and the shame and embarrassment associated with adolescent pregnancy within their community.

Thus, the avoidance of sexual liaison as a pervasive issue in studies on mother-daughter sexuality talk led some American researchers to suggest that parental attitudes and values are conveyed in sexuality talk more often than facts (Dittus et al., 1999; Jaccard et al., 1996; Nolin & Petersen, 1992; Rogers, 1999; Tucker, 1989). Related to this, researchers Moore and Chase-Lansdale (2001) suggest that parental disapproval of teenagers’ behaviour, for example their decision to initiate sex, impacts negatively on the emotional closeness between parent and adolescent, resulting in distance, conflict, and a lack of communication in the parent-adolescent relationship (Moore & Chase-Lansdale, 2001).

On the disparities in the scope and comfort of parent-adolescent sexuality talk South African researchers Kelly, Parker and Lewis (2001) argue that when parents choose to speak to adolescents about sex, it is done in a way that upholds social and cultural values. This means that talk is bound by particular social and cultural conventions and occurs within certain “communicative parameters”, (Kelly et al., 2001, p.259). Thus, the nature of the relationship (parent-child) means that ideological restraint on talk will reflect in the type and scope of discussions that young people have with their parents. For example, the above research findings suggest that dominant social and cultural constructs such as heterosexuality and the corresponding emphasis on reproductive measures and safe sex legitimises discourses of risk and prevention in parent-adolescent talk about the facts of reproduction and the technicalities of heterosexual protection, while critical reflection of those practices (gender inequality, or protection within the context of homosexual sex practices, for example) is summarily omitted.
2.4 Other sources of sexuality information

2.4.1 Peers

In a study conducted in a rural area in the Eastern Cape which used qualitative methodologies such as interviews and focus groups, Ntlabati et al. (2001) found that among the youth in the community both peers and siblings provided a theatre for observing emerging sexuality, and that most of what was learned prior to becoming sexually active came from older siblings and peers. In this community sexuality talk amongst peers occurred on a boy-to-boy or girl-to-girl level about what they had seen and heard, or sharing their learning experiences. It was also found that young people appeared to take the cue from their peers about the appropriate time at which to begin sexual experimentation. It was found that once the members of an adolescent’s peer group begin to experiment sexually, that sexual experimentation became normatively acceptable, and an adolescent’s decision to become sexually active was thus mediated by this. The findings suggested that the cultural regulation of sexuality in this community had shifted from being vertically regulated (parent child), to horizontally (peer) regulated (Ntlabati et al., 2001).

In the U.S.A, researchers Forehand and Wierson (1993) suggest that in the process of developing their own identities and establishing more complex social networks, the point of reference by which adolescents guide their behaviour shifts from parents to the broader social environment that includes other relations such as the peer group. The authors (Forehand & Wierson, 1993) argue that peers are an important source of reinforcement, modelling and support concerning value and belief systems.

Peer influence on the determination of what is ‘normal’ behaviour for the group is supported by research conducted by Kinsmen, Scharwartz and Furstenberg (1997) who found a significant correlation between adolescents’ belief that sexual intercourse is a normative behaviour and as such is socially acceptable, and adolescents’ intent to initiate sexual intercourse. This supports the findings of Ntlabati et al. (2001) indicating a shift from parental regulation to peer regulation and influence on adolescent sexual activity.

This shift was investigated by researchers du Bois-Raymond and Ravesloot (1996) who found that adolescents see their parents as having more restrictive sexual attitudes than themselves.
The researchers (du Bois-Raymond & Ravesloot, 1996) suggest that this generation gap in sexual attitude sharing results in adolescents talking more often and more openly with their peers, rather than their parents, about sexuality issues.

In line with this Rozema (1986) found that the communication climate among peers was less defensive than between adolescents and parents. Numerous studies indicate that adolescents feel more comfortable talking to friends about sex and sexuality related topics (e.g. DiLorio et al., 1999; Guzman et al., 2003; Kelly, 2000; Kelly & Parker, 2000; Kelly et al., 2001; Ntlabati et al., 2001; Young-Pistella & Bonati, 1998), and that peers play a unique role in the acquisition and transmission of information and values about sexuality (Guzman et al., 2003; Moore & Rosenthal, 1993; Rozema, 1986).

This is supported by research findings which indicate that adolescents whose peers are sexually active are more likely to be sexually active themselves (Flick, 1986; Romer et al., 1994), and adolescents’ peers who engage in sexual risk-taking (e.g. inconsistent condom use) are more likely to engage in sexual risk-taking themselves (Gillmore et al., 1997; Metzler, Noell, Biglan, Ary, & Smolkowski, 1994; Millstein & Moscicki, 1995). Although this literature suggests that peers play an important role in an adolescent’s decision to initiate sexual intercourse, there is a dearth of literature describing the nature and scope of adolescent discussion on that topic.

2.4.2 Mass media

South African media studies are not as sophisticated as American research on the effects of mass media on adolescent sexual behaviour. In South Africa, within the context of a burgeoning AIDS pandemic, studies exploring the effects of mass media on sexual behaviour appear to be limited to assessing the extent of the dissemination of HIV/AIDS information. The findings of research conducted in this area (Kelly, 2000; Shisana & Simbayi, 2002) indicate that adolescents receive high levels of media exposure (radio and television) to information on HIV/AIDS, although this varies with lower levels of media exposure in the rural areas of the Eastern Cape and higher levels of media exposure reported in Gauteng (Kelly, 2000). On the scope of media coverage research findings indicated that the promotion of condoms was the most common theme discussed in the media (Kelly, 2000). In contrast to this the other risk prevention options were underplayed. They included: being
faithful to one partner; abstinence (both for those already sexually active and those not yet active); and delay of onset of sexual experience (ibid.). These findings indicate the persistence of HIV/AIDS messaging leveled at individual behaviour change.

2.5 Contextualising sex talk: South African findings

Research that purposefully seeks to investigate adolescent sexuality talk often negates or minimises the influence of the social and cultural context in which talk occurs. This point relates specifically to American research which is also most often quantitative in nature, and seeks only to determine whether or not talk occurred rather than an investigation of factors mediating that talk. In contrast, South African researchers have become more concerned with the impact of contextual factors and are increasingly appropriating qualitative methodologies in order to investigate this. However, while qualitative research offers a richer description of factors mediating human sexuality, as well as talk on those issues, one shortcoming of this type of research is that the findings are limited to the context of the study and cannot be generalised to the broader population. Despite this limitation, a continual gathering of such data from different contexts does make it possible to identify common trends which, while not generalizable, do validate a certain degree of transferability (Yin, 1998). In this section, the issue of context will be addressed as it relates to findings from South African research on the local contexts in which adolescent sexuality emerges.

2.5.1 Problematising heterosex

Findings of a large body of research indicate that South African women endure unprecedented levels of coercion and violence in intimate relationships, and this research has fuelled the problematisation of heterosex (heterosexual sexuality) (e.g. Buga, Amoko, & Ncayiyana, 1996; Conco, 1996; Dunkle et al., 2004; Gupta, 2000; Jewkes, Penn-Kekana, Levin, Ratsaka, & Schreiber, 2000; Shefer, Strebel, & Foster, 1998; Varga & Makabalo, 1996; Wood & Jewkes, 1997; Wood et al., 1998). The problematisation of heterosex stems largely from issues around hegemonic masculinity. Hegemonic masculinity refers to the ascendancy of men and the subordination of women (Connell, 1987), and it is achieved through practices that institutionalise men’s dominance over women, not the least of which is the institution of heterosex.
The problematisation of heterosex is a relatively new trend in research that seeks to explore the relationship between gender inequality and women's health. It can also be viewed as a counter-current to the historical trend in psychological research to pathologize homosexuality.

On the issue of homosexuality it should be noted that very little South African research has focused on this aspect of human sexuality, and reflects the limited social and cultural acceptance of homosexuality in this country (Human Rights Watch, 2003). Early research conducted in the 1950s and 1970s, was primarily based on the 'homosexuality as pathology' or 'deviance' model, and was undertaken with a view to 'curing' homosexuals (Potgieter, 2003). While a more liberal attitude towards homosexuality is reflected in South African research undertaken from the late 1980s onward, homosexuality continues to be a marginalised issue. It was therefore not surprising that homosexuality did not feature in the local literature on adolescents and sexuality. In South Africa, research on human sexuality continues to focus exclusively on heterosexuality.

A qualitative study conducted by Wood, Maforah and Jewkes (1998) originally intended to investigate contraceptive use, circumstances of first sexual experiences, bodily and reproductive knowledge and perceptions of the reasons for early pregnancy among a group of pregnant adolescent women in Khayelitsha (a 'township' in the Western-Cape), found that violence by male sexual partners was a central part of participants' narratives.

In narratives of sexual initiation it was reported that after a couple of weeks of being acquainted, female adolescents accepted male requests to establish a liaison. It was found that, to these young women, an agreement to love was equated specifically with having penetrative intercourse and being available sexually, and that this was an equation which was derived from the men. Within this context constructions of love, as defined by men, constituted the major reason for young women to begin and to continue sexual activity. In addition, in their narratives, sexual initiation was most often characterised by violence. For example, participants reported that men typically made a series of demands such as to "undress" and "lie on the bed" and that assault occurred if they attempted to refuse a demand for sex (Wood et al., 1998, p. 237). Within this context, participants said that they did not feel that they could discuss matters such as contraceptive use with their partners.
2.5.2 Mystifying sex

The study’s findings revealed that young women in this community were initiated into sexual matters through the sexual act itself because their mothers had not given them any information about sex. Within this community talk on sex and sex related issues was a cultural taboo and consequently the young women had only received abstract biological information from nurses and teachers at school (Wood et al., 1998).

2.5.3 Desire as a male prerogative

The findings also suggested that women in this community were not allowed to demonstrate desire or initiate sex. In this community desire was constructed as a male prerogative and participants explained that women who demonstrated desire were regarded as ‘loose’ women. Generally, sexual relationships with this community were depicted by male force and female submission (Wood et al., 1998).

While Wood et al. (1998) are careful to point out that the extent and variation of sexual (dis)empowerment across different contexts requires careful and specific situational analysis, (disempowerment in this context refers to women’s lack of control over their own bodies and in sexual decision-making), these findings are echoed in numerous other local studies.

For example, in a study conducted by Shefer, Strebel and Foster (1998) among students at the University of the Western Cape, focus group participants shared their own and others’ experiences of date rape, marital rape, and battering. Interestingly, it is in this study that the relationship between rape and ‘normal’ heterosex (heterosexual sexuality) is problematised because it emerged from participants’ accounts that they did not consider non-consensual sexual intercourse within a relationship to be rape. This led the authors (Shefer et al., 1998) to draw on radical feminist theory (MacKinnon, 1989) to suggest that inherent inequality within the institution of heterosex, where gendered constructs of male power/agency and female submission/passivity, forecloses any understanding of forced or coercive sex within such a context as rape, but rather, as ‘natural’.

MacKinnon (1983, p.651) has argued that “rape from a woman’s point of view, is not prohibited, it is regulated”, meaning that within intimate heterosexual relationships women often do not have the power to refuse sex. In other words, sex is a contractual part of such arrangements and women are thus expected to be sexually available to men. This issue is elaborated further by Russo, Koss and Ramos (2000) who define rape in two categories: transgressive rape and normative rape.
transgressive rape represents the ‘typical’ conception of rape as forced sex with a complete stranger, normative rape on the other hand, is sex that is unwanted by the women but does not fall outside what is considered to be ‘acceptable’ behaviour within particular cultures. The authors cite marital rape, acquaintance rape, and date rape as examples of normative rape (Russo et al., 2000). It would be naïve to suggest that a construct of heterosex as necessarily coercive could apply universally, but pervasive and aggressive gender inequality in South Africa means that the findings of the study conducted by Shefer et al. (1998) might well apply in other situations.

2.5.4 'Risk group'

A review of these and other studies revealed a trend in South African research on adolescent sexuality to focus on HIV/AIDS and also almost exclusively on women in poor and ‘black’ communities (e.g. Abdool Karim et al., 1991; Abdool Karim et al., 1992; Buga et al., 1996; Campbell, Mzaidume, & Williams, 1998; Jewkes et al., 2000; MacPhail & Campbell, 2000; Makiwane, 1998; Preston-Whyte & Zondi, 1991; Varga & Makabalo, 1996; Vundule et al., 2001; Wood & Jewkes, 1997; Wood et al., 1998). It is arguable that this adds to the stigma of already vulnerable individuals because it associates HIV/AIDS (or other sexually related ‘risks’) with particular group membership. While health and social issues associated with HIV/AIDS are rendered more visible in poor communities where women rely on state health services which make those women more accessible to researchers, it also has the misleading effect of making academics and health authorities alike believe that behavioural interventions tailored for and targeted at particular groups of people will suffice. While it would be naïve to think that those sorts of interventions do not have their place, it is arguable that they cannot be provided without a critical examination of broader social and cultural values and practices that perpetuate gender inequality in South African society. It is also not hard to imagine that (re)conceptualising vulnerability for HIV/AIDS in those terms would require different sorts of intervention from those which are currently afforded.

2.5.5. Gender and HIV/AIDS

It is necessary at this point to explicate the relationship between gender and HIV/AIDS. Firstly, women have been identified as being at greater risk for contracting HIV/AIDS. In sub-Saharan African 6.9% of women are living with HIV while 2.2% of men are living with HIV/AIDS (UNAIDS/WHO, 2004). In South Africa the gender disparity in HIV/AIDS infection rates appears
to be much higher. Results from the second South African National HIV Prevalence, HIV Incidence, Behavioural and Communication Survey (Shisana et al., 2005) reveal that among 15 to 24 year olds, the infection rate of young women is 8 times higher than that of young men. Secondly, gender-based violence and gender inequality are increasingly cited as important determinants of women's risk for HIV (e.g. Eaton et al., 2003; Jewkes, Levin, Mbananga, & Bradshaw, 2002; Jewkes, Levin, & Penn-Kekana, 2003; Leclerc-Madlala, 2002; Lesch & Kruger, 2004; Shisana et al., 2005; Wyatt, 1994). Recent research assessing gender-based violence as a risk factor for HIV (after taking women's own high-risk behaviour into account) found that intimate partner violence and high levels of male control in relationships were associated with HIV seropositivity (Dunkle et al., 2004). It is thus quite apparent that gender inequality and gender-based violence mediate women's ability to negotiate safer sex practices, and significantly impact upon the health and dignity of women in South Africa.

2.5.6 Negotiation

In comparison to the previous study conducted by Wood et al. (1998), an earlier study conducted by Wood and Foster (1995) explored condom negotiation among heterosexual students at the University of Cape Town (UCT). The study (Wood & Foster, 1995) is mentioned here because, while the demographics of the participants in this study were vastly different from the participants in the Wood et al. (1998) study of female adolescents in Khayelitsha, the findings are similar in that gender inequality was indicated as a factor impacting upon women's ability to negotiate safer sex practices, thereby increasing their vulnerability to HIV/AIDS.

Participants in the Wood and Foster study (1995) were students at a prestigious South African university and it can thus be assumed that they were intelligent, well educated, and future oriented. Participant information explicitly stated in the study indicated that none of the female participants were economically dependent on men, nor did they report any physical abuse. These factors collectively place the participants in this study in a very different category from those women who participated in the 1998 study conducted by Wood et al. Despite this, findings of the Wood & Foster study (1995) revealed that condom negotiation for female participants was a difficult and complex matter, and that they were not necessarily in a position to make purely rational,
individualistic decisions about safer sex based on the information they had. This was as a result of social and cultural factors mediating the context in which condom negotiation occurred. For example, the association of condoms with casual sex and correspondingly, symbolic gestures of trust within intimate relationships, were factors that inhibited talk about condoms (ibid.). For women, the social construction of sex as a mysterious and spontaneous event meant that they could not prepare for or anticipate it because it would “spoil the moment”, and this included carrying condoms with them (ibid., p.26). Similarly, men who carried condoms were described as “just wanting one thing” (ibid., p.26). It was also found that within this community sex was constructed as a means for a woman to show a man that she loved him, and that sex for a man is most pleasurable when it is penetrative and condomless. The result of this is that, within this community, a woman is expected to satisfy a man and show him that she loves him by having condomless sex with him (ibid.). This also highlights another cultural value that privileges men’s sexual pleasure above women’s. Thus by defining sex in terms of love and a relationship, women in this study were more likely to view sexual practices in terms of men’s needs and men’s pleasure while foregoing insistence on condom use so as not to interfere with that (ibid.). This study was mentioned in order to make the point that while gender issues and HIV risk behaviour are often described in relation to ‘black’ and poor communities, they are also applicable to other contexts.

2.5.7 Reflexivity, knowledge production and the politics of location

At this point it is prudent to acknowledge not only the context in which sexuality talk and behaviour occurs, but the context in which research is conducted which feminist researchers argue mediates the sort of knowledge that is generated from it (Jackson & Van Vlaenderen, 1994). The relationship between knowledge and power in the research process is a marginalised area of concern in mainstream social science research. However, with a move towards more exploratory, qualitative-type studies in the area of HIV/AIDS and human sexual behaviour, and the increasing use of interview and focus group methods for data collection, reflexivity (a central theme in feminist research) has become an issue that deserves more attention. Reflexivity refers to the capacity of the researcher to reflect on her role in generating research knowledge. It means that rather than attempting to remove herself (subjectivity) from the research in order to control bias, the researcher
should seek to understand the political implications of her own location as a researcher (Ali, Campbell, Branley, & James, 2004).

Implications for acknowledging the politics of location and the effects of interpersonal relations on talk within various contexts, including the research context, was highlighted in a study conducted by Lesch and Kruger (2004). The study aimed to explore female adolescents first sexual experiences, and the findings indicated what has been referred to elsewhere as the ‘missing discourse of desire’ (Fine, 1988). In accounting for the apparent lack of desire that appeared to underpin the young women’s first sex experiences, the authors questioned whether the way in which the participants, who were young ‘coloured’ women from a disadvantaged community, talked about their sexuality was influenced by the fact that they were talking to older ‘white’ and middle-class women from an academic institution. In other words, the authors had to consider that the young women may indeed have experienced pleasure in their sexual encounters but that they might also have felt that the research interview was an inappropriate context in which to discuss that (Lesch & Kruger, 2004).

The implication that this has for the study at hand, is that while South African studies exploring women’s sexual experiences (some of which are mentioned above) tend to focus on the negative aspects of heterosexual relations and young women’s emerging sexuality, the possibility of those experiences being initiated by women’s desire rather than male force, should not be discounted. Pervasive gender inequality and violence does not mean that heterosexual sexuality necessarily equates with sexual encounters that are coercive or violent. It may, however, silence those women whose experiences of agency in their sexual encounters locate them in a position that normative discourses of female sexuality do not call them to take. In other words, it may be uncomfortable for women to talk about experiences that are not normatively associated with female sexuality. This aspect was born in mind in considering the type of methodology appropriated for this study, as well as participant and researcher characteristics.

2.6 Context and mediation

South African literature presented in this review reveals a contemporary trend acknowledging that adolescent sexual behaviour does not occur in a vacuum, but is firmly embedded within social and cultural contexts (Abdool Karim et al., 1992; Campbell et al., 1998; Kelly & Parker, 2000; Kelly et
al., 2001; Leclerc-Madlala, 2002; Ntlabati et al., 2001; Shefer et al., 1998; Wood & Foster, 1995; Wood & Jewkes, 1997; Wood et al., 1998). Social and cultural contexts can be understood, broadly, to refer to cultural, historical and institutional settings (Wertsch, 1997) in which human behaviour occurs.

Research that seeks to contextualise sex and sexuality related issues in South Africa, is increasingly focusing on the way in which sexual behaviour is mediated by social and cultural factors. This approach represents a fundamental shift from traditional psychological approaches that focus narrowly on internal (mental) processes, in which the individual constitutes the basic unit of analysis. In contrast to the traditional approach, mediation is concerned with the interaction of internal and external processes (Daniels, 2001). From this perspective internal processes cannot be understood and analysed separately from external (social and cultural) processes because it is assumed that human activity is the outcome of mutual influences between these processes. The context (interplay between internal and external processes) thus constitutes the basic unit of analysis, rather than the individual. It has been argued (MacPhail & Campbell, 1999) that a contextual approach to sexual behaviour is necessary because it extends our understanding of factors that promote or hinder sexual behaviour change in concrete social settings.

2.7 HIV/AIDS messaging

While there appears to be a commitment in contemporary South African research to contextualise sexual behaviour, it is surprising that the bulk of HIV/AIDS messaging disseminated in the public realm continues to be directed at individual behaviour change. The problem with this type of messaging is that it over-simplifies the complexity of human sexual behaviour. For example, by assuming that sex is an activity in which consenting, well informed individuals engage, by assuming that the respondent is the dominant partner who is the decision maker in all sexual encounters, or that the threat of HIV/AIDS is superordinate to other problems (Wyatt, 1994).

The short-comings of individualistic approaches to HIV/AIDS messaging are apparent in the inconsistency that appears to exist between young peoples' knowledge about HIV/AIDS and their sexual behaviour (Abdool Karim et al., 1991; DiClemente, 1990; Eaton et al., 2003; Ingham, Woodstock, & Stenner, 1992; Shisana & Simbayi, 2002). This inconsistency has constituted the main thrust towards investigating contextual factors mediating sexual behaviour rather than purely
individual factors. In other words, research in this area currently aims to understand what impedes or promotes the translation of safe sex messages into safe sex practices. This change in research focus renders HIV/AIDS messages that continue to promote behaviour change at an individual level inconsistent with contemporary approaches in understanding human sexual behaviour.

If social and cultural values and practices within a particular context have the effect of mediating sexual behaviour within that context, then it is fair to assume that that social and cultural context must also mediate the way in which we talk about sex. This issue has been neglected and needs to be taken into account.

2.8 Concepts: sex, sexuality, talk, and communication

For the purposes of this study, sex refers to sexual intercourse while sexuality (and sometimes, sexuality issues) refers to issues that people associate with sex. These include (but are not limited to) contraception, conception, pregnancy, STI's and STD's, gender, romance, relationships, partners, and menstruation. Sexuality talk refers to talk on those issues. In addition, while this study focuses on talk, talk is sometimes also referred to as communication. Where communication is used it should be understood as talk between individuals (communication can take non-personal forms and that is not, generally, the type of communication that is referred to here). Communication is used in the place of talk in instances where the structure of a sentence would make it grammatically incorrect to use the word talk.

2.9 Theoretical framework

The idea of investigating mediated behaviour directed the researcher to the work of Lev Vygotsky. Vygotsky was a revolutionary Russian Psychologist who together with his colleagues Alexei Leont'ev and Alexander Luria, were known collectively as the Russian School (Engeström, Miettinen, & Punamäki, 1999).

In the 1920's and 1930's the Russian School worked on developing psychological theory that could account for the way in which human behaviour is mediated by social and cultural factors – the popularity of Marxism in post-revolutionary Russia favoured an intellectual environment that
pursued the integration of social and individual processes. Their approach to understanding human behaviour was considered to be revolutionary because up until that time theoretical insights were largely influenced by positivist epistemological and ontological assumptions. Vygotsky (1978), in direct contrast to the Cartesian idea that mind exists prior to and separate from the social, postulated that the mind is constituted in the social, and coined the term 'mind in society' to illustrate this idea.

2.9.1 First generation Activity Theory

Of the Russian school, it was Vygotsky who initiated the idea of mediation of behaviour through signs and other cultural artefacts. Artefacts can be thought of as 'tools' that enable individuals to accomplish specific tasks. Thus, with artefacts (tools) mediating the outcome of individual action Vygotsky conceptualised behaviour as a tripartite structure. In this tripartite structure human activity is always object orientated (meaning goal directed) and artefact mediated (facilitated by the tools available to the individual within that context) (Engeström et al., 1999).

Figure 1 is a diagrammatical representation of Vygotsky's (1978) concept of mediated action. It should be noted that Vygotsky's diagrammatical representation of his theoretical concept was formulated as: stimulus, response, and mediating artefact. Engeström (1999) extended the diagram to include: subject, object, and tool(s).

![Diagram of mediated action](Figure 1. Vygotsky's concept of mediated action extended by Engeström (1999, p.30).)
Vygotsky’s (1978) diagrammatical representation of mediated action is intended as a ‘tool’ that can be used to understand how he conceptualised the relationship between goal directed action — represented by the line between the subject and the outcome — and the mediating artefact — represented by the intervening variable (X). To relate this to the study at hand, in the context of adolescents and sexuality the subject in the above diagram could represent adolescents, the object could represent their sexual behaviour and the desired outcome could be ‘safe’ sex. A mediating artefact (tool) in this system of activity could, for example, be a condom.

Thus, Vygotsky’s model provides a way of understanding the mediation of individual activity. However, in his original formulation of object-orientated action mediated by artefacts (cultural tools and signs), Vygotsky did not expand on the role of other human beings (the group to which an individual belongs, for example) and broader social relations. This was expanded upon and theoretically integrated into the concept of mediated action in what has since become known as the second generation of Activity Theory (Engeström et al., 1999).

2.9.2 Second generation Activity Theory

The second generation of Activity Theory was influenced by the work of Leont’ev (1981), who expanded on the difference between individual action and collective activity by focusing on the division of labour. Engeström incorporated the idea of the division of labour and expanded upon the original triangular representation of activity in a way that allows us to examine systems of activity at macro – social and cultural level – rather than being limited to an individual level of analysis only (Daniels, 2001). In the second generation of Activity Theory Vygotsky’s triangular model of mediated action was extended to include rules, the community, and the division of labour (Figure 2).
In this model of activity the subject refers to an individual or group – in this study the subject could be an adolescent – whose perspective is chosen as the point of view in the analysis (Engeström, 1987). The object is the outcome which motivates action, and towards which activity is directed (ibid). Outcomes are achieved by using certain tools, by this it is meant that action has an operational aspect – how it can be done – which is defined by the tools available to individuals within a particular context. The division of labour refers to the division of tasks between members in the community, as well as the division of power and status within that community (ibid). Lastly, in Activity Theory rules refer to laws, conditions, or normative expectations in an activity system (Daniels, 2001), they are a community's social and cultural conventions that determine doing and appropriate doing (Engeström, 1987).

The second generation of Activity Theory provides a conceptual framework for understanding how a subject's perspective is mediated by elements within the activity system. For example, the division of labour makes it possible to take into consideration how power differentials mediate how work is divided up and how specific individuals are tasked with specific types of activity (e.g. women performing childcare). It also makes it possible to take into consideration how rules in the form of social and cultural norms which are developed in the practices of a community, determine what behaviour is considered to be appropriate within that context. It also provides a framework against which to analyse how social conditions such as the introduction of female contraceptives or women's liberation can facilitate or impede particular types of behaviour, and following from this, expectations about doing and appropriate doing that mediate activity for an individual within that community. Thus, the development of a system of activity which provides an account for the way in
which contextual elements, in interaction with one another, mediate behavioural outcomes marks a significant departure from traditional psychological understanding of individual behaviour and behaviour change.

Salomon (1993, p.3) provides a description of mediation as follows:

- Cognition is distributed among individuals, that knowledge is socially constructed through collaborative efforts to achieve shared objectives in cultural surroundings and that information is processed between individuals and tools and artefacts provided by the culture.

In addition to the development of a system of activity, Engestrom (1999) also drew on Il'enkov’s (1977) idea of internal contradictions. Internal contradictions can be thought of as different viewpoints, within a particular community, which account for the drive behind change and development within a system. This means that the object of activity is not fixed because the motive for engaging in the activity can change. To illustrate this Engestrom (1999) depicted the object of activity with an oval to indicate that object-orientated actions are always characterised by ambiguity, surprise, multiple interpretations, and potential for change. This makes it possible to take into account diversity within a system (different perspectives), and the part that plays in precipitating change and developing the system.

2.10 Talk as a form of activity

The system of activity in this study is the activity of talk about sex and sexuality related issues. In other words, for the purposes of this study ‘talk’ is viewed as a form of activity. In arguing for talk as a form of activity the author draws on MacNeill (1985) who argues that the performative side of language can be viewed as a type of action, and that just as concrete actions have physical manipulations and movements of objects, language actions are thoughts of manipulations and movements. Moreover, these thoughts can become external and effect physical movements (McNeill, 1985), for example when a speech act commands or makes a request, “come and sit over here”.
Continuing on from this, in order to argue for talk as something that constitutes an activity rather than being limited to a discrete action, an understanding of talk as ‘a way of doing’ (practice) is required. In this respect the researcher refers to Davydov (1999) who argues that communication and activity should not be viewed as separable entities. Davydov (1999) reasons that communication and activity are inextricably linked because collective and individual activity is realized in the form of social relationships, and that communication is an expression of those relationships (Davydov, 1999). It is thus arguable that as action becomes practice so does the talk which is tied to that activity.

The researcher appropriates this stance since it is arguable that talk (and the topic and scope of talk), has a lot to do with to whom one is talking. In other words, social and cultural values and practices held by a particular group of individuals mediate what individuals say within that context, just as they mediate what individuals do within that context. It can be argued that contexts have the effect of establishing ‘communicative parameters’.

2.11 Extending the framework: third generation Activity Theory

Activity (collective) is not reducible to actions (individual) because actions are relatively short-lived and have a clear cut beginning and end, while activity systems (practices) evolve over periods of social and historical time (Daniels, 2001). Historicity is a principal of Activity Theory and it refers to the idea that because activity systems take shape and are transformed over long periods of time, their problems and potentials must be understood in relation to their own history (ibid.). This has implications for the study at hand. It means that sexuality talk (the activity) should be investigated over a period of time in order to elucidate which social and cultural factors mediate that activity, and changes in the activity over time (across generations).

Investigating sexuality talk over a period of time requires that the theoretical framework be extended to include multiple systems of activity (systems of talk across different periods of time). While second generation Activity Theory makes it possible to consider multiple perspectives, it does so within the same system of activity – among individuals who belong to a particular group (a group of adolescents in 2005). This means that the second generation of Activity Theory is not sufficient to examine the interactions of multiple systems, for example, comparing sexuality talk among a group
of adolescents in 2005, with sexuality talk among a group of adolescents in 1950. However, this can be accounted for by third generation Activity Theory which expanded on the previous generations to include a minimum of two interacting systems of activity. This makes it possible to examine one system of activity in relation to another.

Fig 3. Interacting systems of activity (Engeström, 1987)

An important issue arising from the conceptualisation of interacting systems in the third generation of Activity Theory, is the idea of a shared object (Daniels, 2001) (see figure 3). In the first generation of Activity Theory action is motivated at an individual level by the desire for attaining a particular outcome. The motive driving the action is directed towards a particular object (that will bring about cessation of that desire), and it is this object that identifies the action at hand. In second generation Activity Theory collective activity is achieved through constant negotiation and struggle between the different goals and perspectives of individuals within a community which can have the effect of changing the object of that activity (and thus the activity itself) over time. In third generation Activity Theory, where different interacting systems are contrasted and compared, it is assumed that those systems can be identified by the objects (motives for activity) that they have in common, and this is facilitated in some way by the history of that activity. It is therefore not difficult to see how this can become problematic, as tensions within a system of activity result in changes in motives and outcomes, which over a period of time might result in a comparison of two different activities rather than a comparison of the same activity. This caused Engeström (1999) to raise the question of the possibility of a shared object. This bears upon the current study because the study aims to explore the activity of talk, and the motive behind that activity may change across generations – periods of time – resulting in a comparison of two or more distinct activities, rather
than a comparison of the same activity. This is an aspect of Activity Theory will be taken into account in the analysis of data.

2.12 Summary of literature review

In closing, in contemporary research adolescent sexuality is constructed as problematic. In line with this, and as a measure of intervention, parents are expected to play a role in the sexual socialization of their adolescent children. For this reason, a lot of research conducted on the topic of parent-adolescent sexuality talk aims to assess the efficacy of parent-adolescent sexuality talk. Most of this research is conducted in the U.S.A among what is perceived to be ‘at risk’ populations.

In South Africa there is a lack of research focusing exclusively on parent-adolescent talk on the topic of sex, although some HIV/AIDS studies have touched on issues pertaining to parent adolescent sexuality talk. Issues for debate arising from research conducted both here and abroad include: the topic of parent-adolescent sexuality talk, the role of mothers as primary sexuality educators, the affective component of sexuality talk, and young people’s risk behaviour. However, the pragmatic value of the knowledge generated from these studies is questionable when one takes into account the context in which adolescent sexuality emerges. Research in this area indicates that cultural sanctions on sexuality talk as well as pervasive gender inequality in South African society means that young women often do not have the skill or opportunity to negotiate safer sex practices, and this confounds the widespread belief that information about the risks associated with sexual activity alone, will impact upon young peoples sexual health.

In South Africa there is a growing acknowledgement of the role of contextual factors mediating individuals’ sexual behaviour (e.g. Campbell et al. 1998; Jewkes et al., 2000; Varga & Makabalo, 1996; Wood & Jewkes, 1997; Wood et al., 1998). In line with this the current study seeks to investigate how contextual factors, in the form of social and cultural ideals, mediate talk on the topic of sex. This is undertaken with a view to problematising a simplistic model of information dissemination, such as the ABC message (Kelly, 2000).

It has been mentioned that because adolescent sexuality is often constructed as ‘problematic’, the bulk of the research in this area is conducted among communities where individuals are considered to be most ‘at risk’. In South Africa contemporary research focusing on adolescents and sexuality is almost always conducted within the context of HIV/AIDS and among poor and ‘black’ communities.
This study was informed by previous research undertaken by Ntlabati et al. (2001) among isiXhosa people living in a deep rural area of the Eastern Cape. The study (ibid.) used qualitative methodologies such as interviews and focus group discussions with people of different ages in order to elucidate which social and cultural factors within that community had the effect of mediating young people's sexual behaviour. The study identified particular factors associated with early sexual debut in the community. These included: communication and learning about sex, negotiation at sexual debut, and the introduction of oral contraceptives (Ntlabati et al., 2001). Communication and negotiation are inter-personal processes mediated by specific social and cultural factors, and this study (ibid.) illustrated some of the limitations to communication between individuals, parents and adolescents or between partners. For example, in this community the communicative context in which talk about sex and sexuality related issues most often occurred, was between female adolescents and their mothers and focused primarily on the avoidance of pregnancy. Fathers in this community were traditionally uninvolved in sexuality education and there was almost no sexual instruction for boys. In addition to this, parents reported that they felt uncomfortable to talk to their children about sex because they had not had such discussions with their parents, and therefore had no personal experience to draw upon.

In order to further investigate the role of social and cultural factors mediating activity, the current study sampled participants from a different social and cultural context. After all, one way to study how social and cultural factors mediate individuals' behaviour is to study those factors in a different social and cultural context. Participants for this study were drawn from an urban, 'white', middle-class community in KwaZulu Natal. In order to elucidate how social and cultural factors have impacted upon individuals' behaviour in this context, oral histories of individuals of different ages were accessed through personal interviews. In addition, focus group discussions were conducted with adolescents in order to contrast and compare the accounts of adult participants with contemporary adolescents.
CHAPTER TWO

1. Aim and rationale

The aim of this study was to obtain an understanding of the way in which social and cultural factors mediate adolescent talk on the topic of sex. The motivation for investigating the social and cultural embeddedness of talk on the topic of sex is to inform communicative strategies around sexual health.

2. Research question

In line with contemporary South African research that seeks to contextualise human sexual behaviour, this study seeks to explore social and cultural factors as mediators of talk on the topic of sex and sexuality related issues. In other words, because contemporary research acknowledges that human sexual behaviour does not occur within a vacuum but is mediated by the social and cultural context in which it occurs, it is argued that it would be naive to assume that one can talk about sex and sexuality related issues within such contexts without also acknowledging how talk is, in turn, mediated by that context. The objective of the research is not to criticise talk per se, only to acknowledge that talk may be mediated (constrained or allowed) by the context in which it occurs. This has implications for interventions based on information dissemination and discussion of sex and safer sex practices, arguably making it an important factor and one that deserves more attention.

In relation to the characteristics of this study, the following questions are explored:

- Which social and cultural factors mediate talk among peers?
- Which social and cultural factors mediate talk between parents and adolescents?
- Do social and cultural factors mediating talk change over time?
3. Methodology

3.1 Research design

This study takes the form of qualitative research undertaken within an interpretative paradigm (Durrheim, 1999). The aim of this study was to obtain an understanding of the way in which social and cultural factors mediate adolescent talk on the topic of sex and sexuality related issues and in order to achieve this, the researcher made use of participants’ oral accounts of their first knowledge of sex and their early sexual experiences. Participants’ own understanding of those experiences was of central concern. Consistent with an interpretative approach which emphasises the meaningfulness of individuals actions and experiences (Lazar, 2004), analysis of the data followed an inductive form of inquiry (Durrheim, 1999).

Grounded Theory (Glazer & Strauss, 1967) was employed to analyse the data. Grounded Theory methods consist of guidelines for collecting and analysing data and for providing frameworks that explain the collected data (Charmaz, 2000). In Grounded Theory theoretical categories arise from the coding process, rather than being imposed upon it, as is the case with positivist methods of analysis (Charmaz, 2000). The emphasis on an interpretive understanding of subjects’ experiences is as a result of Grounded Theory being developed out of an ethnographic tradition in which the researcher aims to situate herself within the social world of the subject. This is also referred to as verstehen (Kelly, 2000), and its focus on meaning from the subjects point of view makes it consistent with an interpretivist approach.

3.2 Sampling

3.2.1 Theoretical sampling

As the aim of the study was to explore which social and cultural factors mediate adolescents’ sexuality talk within a particular context, it was necessary to conduct the research among an homogenous group of individuals. After all, a diverse sample – people from many different backgrounds – would confound any attempt to generate an understanding of the impact of specific social and cultural (contextual) factors.
Previous research was taken into account when deciding which group of people (constituting a specific social and cultural context) should be included in the study. It has already been mentioned that previous research on social and cultural factors mediating activity undertaken by Ntlabati et al. (2001) was conducted among Xhosa people living in a rural area in the Eastern Cape. The sample thus represented a group of people who shared a specific (isiXhosa) traditional African heritage in addition to other factors such as language, geographic location, and ethnicity. Within this community, traditional customs and ways of being mediated talk on the topic of sex. In contrast with this, and to explore social and cultural factors in a different social and cultural context, it was decided to conduct this study among urban, ‘white’, English-speaking women in KwaZulu-Natal. A group of people who might be conceptualised as ‘western’ in comparison to the participants in the Ntlabati et al. (2001) study thus allowing for an investigation of social and cultural factors mediating talk within a different context.

However, participants sharing bounded, clearly defined, homogenous characteristics do not occur naturally in a city where people from very different backgrounds all live together. In order to create an homogenous sample in an urban area, theoretical sampling (Glazer & Strauss, 1967) was employed. A researcher uses theoretical sampling (ibid.) by selecting participants who are likely to contribute to the development of an emerging theory, in this case the way in which context mediates talk on the topic of sex and sexuality related issues. It can thus be stated that theoretical sampling was used in order to sample for a particular context.

3.2.2 Researcher / Participant dynamics

Given that the research focuses on sex, and that sex is quite often a sensitive topic for people to talk about, it was important to consider what other factors might confound the investigation. Further to this the nature of the relationship between the researcher and the participant can play an important role in social science research. A lot has been written about the effects of the relationship between the interviewer and the interviewee in qualitative research (Archer, 2002; Cotterill, 1992; Jackson & Van Vlaenderen, 1994; Oakley, 1981). Some of the effects that have been studied include cultural differences (Archer, 2002; Jackson & Van Vlaenderen, 1994), vulnerability and power (Cotterill, 1992; Jackson & Van Vlaenderen, 1994) gender differences (Archer, 2002; Jackson & Van Vlaenderen, 1994; Oakley, 1981), and socio-economic status (Jackson & Van Vlaenderen, 1994).
Interview participants were selected initially in the following age categories: 18 to 24 years; 25 to 34 years; 35 to 44 years; 45 to 55 years; and 55 years and over. This resulted in five age categories each spanning a 10 year period. In the process of recruiting participants these five categories were reduced to four categories to allow greater between-group differences. In the final stages of sampling there were two participants representing each age category – 20's; 30's; 40's and 60's. Within each of these categories there was very little variance in participants' ages. This was important given that it could be argued that there might be qualitative differences in life experiences of people aged 10 years apart, even though they might technically still be in the same age category (e.g. between a 31 year old and a 39 year old). Participants aged in their mid-fifties could not be accessed, however, two participants both aged sixty were willing to participate in the study, and were included. Thus, the reason for not including participants in their mid-fifties was as a result of the limitations in accessing participants and not the result of specific purposes in the design of the study.

A decision was made to limit participation in the study to women only. As mentioned earlier, the researcher intended to personally conduct all of the interview and focus group discussions. In addition, it has been noted in the literature on interviewing that gender is a factor impacting upon the interviewer/interviewee relationship (Archer, 2002; Jackson & Van Vlaenderen, 1994; Oakley, 1981) and consequently, the data that is collected and the sort of information that is generated from it. While limiting participation to women only does result in a one-sided view of things, an investigation of social and cultural factors mediating men's talk on the topic of sex might be undertaken more successfully (and with less bias) by a male researcher.

In addition to interviews, focus group discussions were conducted with adolescents in order to compare contemporary social and cultural factors mediating talk with those identified by older participants. The focus group participants were selected in terms of their level of study at school. Two school grades were selected: Grade 8 learners who represented a group of young adolescents (14 to 15 years old), and Grade 12 learners representing a group of slightly older adolescents (17 to 18 years old).

Efforts were made to match focus group participants' characteristics with those of the interview participants. However, because participant recruitment for the Grade 8 focus group discussion was facilitated by the school counsellor rather than the researcher, an error was made and participants were not recruited strictly in terms of the participation criteria.
The racial characteristics of two participants selected for the Grade 8 focus group discussion was ‘coloured’, rather than ‘white’. Not wanting to exclude those students from participating in the focus group discussion, the researcher simply made notes on their interactions and views in relation to other members of the group.

<table>
<thead>
<tr>
<th>Interview participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age category</td>
</tr>
<tr>
<td>Participants ages</td>
</tr>
<tr>
<td>22 years</td>
</tr>
<tr>
<td>25 years</td>
</tr>
<tr>
<td>34 years</td>
</tr>
<tr>
<td>35 years</td>
</tr>
<tr>
<td>42 years</td>
</tr>
<tr>
<td>44 years</td>
</tr>
<tr>
<td>60 years</td>
</tr>
</tbody>
</table>

Total number of interview participants: 8

<table>
<thead>
<tr>
<th>Focus Group participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Group 1</td>
</tr>
<tr>
<td>7 participants</td>
</tr>
<tr>
<td>Grade 8</td>
</tr>
<tr>
<td>Focus Group 2</td>
</tr>
<tr>
<td>6 participants</td>
</tr>
<tr>
<td>Grade 12</td>
</tr>
</tbody>
</table>

Total number of focus group participants: 13

TOTAL NUMBER OF PARTICIPANTS IN THE STUDY = 21

Table 1. Summary of interview and focus group participants

On the use of racial categories in this study, it should be noted that the majority of South African researchers continue to define their sample in terms of racial/ethnic/population group categories. There are many diverse reasons for the continuation of this practice, and they will not be elaborated upon here. However, for the purposes of this study it was necessary to create a distinct and well defined sample that would inform the theoretical approach of the study. Thus, for the purposes of this study, racial categories are used as a descriptor of one of the characteristics of the sample.
It is acknowledged that the use of such descriptors has the effect of reinforcing the perception that racial categories (black/African/coloured/white and Indian) actually exist. In this study racial/ethnic group categories such as ‘black’ ‘white’ and ‘coloured’ are written in inverted commas in order to indicate that they are constructs, rather than groups that actually exist independently of the way in which they are observed.

3.3.2 Participant recruitment

The recruiting of participants was one of the first challenges encountered in the course of the research. While conducting pilot interviews it became clear that a number of potential participants who had been referred to the researcher did not feel comfortable in talking about their experiences. This was in no way indicative of all of the women who were approached to participate in the study, but it did nevertheless affect the recruitment process. As a result, a number of potential participants who were known to the researcher prior to the commencement of the research were approached and asked to participate in the study. Describing the relationship between the researcher and the some of the participants as ‘known,’ means that the researcher and the participant were acquainted although not closely acquainted, prior to the commencement of the study.

Participants who knew the researcher appeared to be less suspicious about the research and more relaxed about participating in it. The participants who knew the researcher prior to the commencement of the study were also more successful in identifying and recruiting other participants. Oakley (1981) advocates a research relationship that includes friendship and exchange. In this study familiarity, at least to some degree, facilitated a more equitable, trusting and comfortable environment for both the researcher and the participant and this helped to make talk easier. That said, it was possible that participants’ might have felt intimidated to talk to the researcher on the topic of sex, a very personal topic, precisely because they were acquainted. It is clear that risks were associated with both instances – interviewing individuals who were known, and interviewing individuals who were unknown to the researcher – but it was also an inevitable choice. In order to minimise these risks the participants were briefed on the ethical protocol of the study in terms of informed consent, confidentiality and anonymity. Participants were also assured that participation was entirely voluntary and that they reserved the right not to answer a question they did not want to answer. The researcher conducted the interviews personally and took cognisance of the
impact of both the similarity and the differences (e.g. age) between researcher and participants on the interview process.

All interview participants were recruited by referral, which is a form of snowball (network) sampling (Bloch, 2004). This was necessary (a) in order to access individuals who fitted in with the sample characteristics, (b) would provide a close-up, detailed view of the experiences of a particular group of women, and (c) as the topic of the research centred around sexuality it was necessary to identify participants who would be willing to share their experiences as they related to that topic.

One shortcoming of the snowball sampling method is that, because it relies on the recommendations made by a respondent, it is possible that the group of individuals who are accessed might share particular characteristics that could bias the study. For example, were a respondent to recommend women who were members of her church group, then the participants in the study would all share particular values that would reflect in the data and influence the findings of the study. In order to control for this three respondents (rather than one) who did not know one another were asked to identify additional participants for the study.

The Grade 12 focus group was arranged through the researcher’s acquaintance with a Grade 12 student. The researcher discussed details of the research with the student, and answered her questions about the research. The student then asked a group of her friends to participate in a focus group discussion, which they agreed to do. The Grade 8 focus group consisted of a group of students from the same school as the Grade 12 focus group participants, although the Grade 8 focus group was arranged through the school counsellor.

3.4 Data collection

Data was collected from interview and focus group discussions. In-depth discussions were the appropriate method for this study because they provided an opportunity for the researcher to access participants’ understandings of their experiences. In addition, as the discussions were instances of sexuality talk, they also constituted a process of data generation.
3.4.1 Oral history

Data for the study was generated from interview participants' oral accounts of significant sex related experiences in their lives. Interview participants were asked to tell a story about their first knowledge of sex and their first sex experiences, in a sense they were asked to reconstruct 'biographical episodes' of past experiences (Fontana & Frey, 2000). This provided access to participants' interpretations of their experiences as adolescents, as well as instances where contextual factors mediated individuals talk about those experiences. Data was produced by tape-recording the interviews and then transcribing the oral accounts.

One drawback of this type of data is that for many participants (excluding focus group participants), accounts were retrospective. This raises the possibility that important information might not be easily recalled, or might even be distorted in some way. Remembering, and providing an account from the past means that the account will be mediated by many additional factors. The researcher aimed to control for this by conducting serial interviews (Seidman, 1991) which provided more opportunity for participants to reflect on their experiences. In addition, the process of data collection - the interviews - were themselves instances of talk (inter)action on the topic of sexuality which meant that the process of data collection was also a process of data generation. In other words the interviews and focus groups served simultaneously as topic and resource (Byrne, 2004).

3.4.2 Personal interviews

Personal interviews were an appropriate means of gathering data because they provide a means to accessing peoples' lived experiences, and the meaning they attach to those experiences (Seale, 2004). In this study oral accounts were the object of investigation and the material to be analysed, and data collection took the form of face to face, in-depth interviews. The interviews were open-ended and modelled on a conversation as described by Taylor and Bogdan (1984). In interviews participants were asked to tell a story about their first knowledge of sex, and later, about their first sex experiences. The interviews were minimally structured (Taylor & Bogdan, 1984) as the researcher prepared a brief schedule of topics, or themes, to explore. These themes aimed to cover the study objectives, that is, to explore the way in which parents and adolescents communicate about
sex, as well as the participant's first sex experiences. They were also informed by the literature as it pertains to communicating about sex, as well as on the emergence of adolescent sexuality in the South African context. Each interview took between one hour and one and a half hours to complete.

3.4.3 Series interviews

Two interviews were conducted with each participant on separate occasions (except for focus group participants who participated in one group discussion). There were a number of important reasons for conducting series interviews in this study. Firstly, sex and sexuality are sensitive topics to talk about and conducting two separate interviews allowed more time to establish an intimate and supportive relationship with the participants, as well as a comfortable space for them to talk about their experiences. Secondly, series interviews provided an opportunity for the researcher to reflect on what was discussed in the first interview, and thus to clarify or follow up that information in the second interview. It also provided an opportunity for the participants to reflect on what they had said in the first interview and to clarify or add information that they felt they had omitted or not elaborated upon sufficiently. Finally, conducting series interviews made it possible to divide the interviews across two main themes (a) first knowledge of sex (see Appendix A for the interview schedule), and (b) first sex experiences (see Appendix B for the interview schedule).

Literature on series interviews (Seidman, 1991) suggests that the first interview should be used to establish the context of the participants' experience. In keeping with this, the topic of the first interview covered the way in which the participant first came to know about sex. For example, how the participant was informed, who informed the participant, the nature of the participant's relationship with that person as well as key features of that conversation.

The second interview allowed the participant to reconstruct the details of their first sex experiences. Questions posed in the second interview focused on the details of the participant's debut sexual experience such as details about the participants' partner, age at sexual debut, the place where it occurred, and the nature of their relationship. At the end of the second interview participants were also encouraged to reflect upon the meaning that experience held, or holds, for them. For example,
the participants were asked if they thought their first experiences had an effect on subsequent sexual experiences or relationships.

3.4.4 Focus group discussions

In addition to personal interviews with adult participants, focus group discussions were conducted with adolescents. Focus group discussions share some elements of personal interviews, but diverge from personal interviews in so far as they offer participants an environment where they can share ideas, beliefs, and attitudes with people of a similar background (Madriz, 2000), and this enabled an exploration of peer discussion on the topic of sexuality, an aspect that was critical to this study.

It was important to interview young people in order to compare contemporary social and cultural factors mediating adolescent sexuality talk against adult’s accounts, and focus groups are useful when conducting research with young people. Focus groups are an appropriate method for interviewing young people because, instead of focusing on a single individual’s experience as one does in a personal interview, focus groups are more shared and reflect group ideals and beliefs rather than deeply personal information (Stewart & Shamdasani, 1998). This made it a more appropriate method to use to engage young people in a discussion on sex. Topics covered in the focus group interviews focused on sexuality talk, rather than participants own experiences, and the questions that were posed were generated from the literature (see Appendix C for a copy of the focus group interview schedule). Focus group discussion were less intimidating and created an atmosphere more conducive for young people to discuss current issues relating to sex and sexuality. Nevertheless, one shortcoming of focus group discussions is that more outspoken individuals within the group tend to dominate the discussion. This issue was noted in both focus group discussions. The researcher tried to facilitate a more equitable discussion by encouraging quieter individuals to speak, for example by asking them directly for their opinion on issues raised in the group. The researcher also prompted the more outspoken individuals in the group to consider the views of the other people in the group.

The focus group participants were divided into two groups, a group representing young adolescents aged 14 to 15 years (Grade 8 focus group), and a group of slightly older adolescents between the ages of 17 and 18 years (Grade 12 focus group). Each focus group discussion took approximately two hours to complete.
3.5 Research procedure

3.5.1 Pilot interviews

Five pilot interviews were conducted with women aged between 18 and 60 years of age. The pilot interviews were an opportunity to test participant recruitment strategies and to test the interview schedule. Thus, material collected from the pilot interviews was not used as data, other than informing the formal data collection process, the ordering of questions for example. In the process of recruiting women for the pilot interviews, it became apparent that some women were discomforted by the idea of talking about events in their lives that related to sex. It also appeared that in comparison to women who were acquainted with the researcher prior to the interview, women who did not know the researcher were more hesitant to talk on that topic. As a result of these difficulties, it was decided that interview participants for the main part of the study should be women who were already acquainted with the researcher. Familiarity created a less intimidating context in which to conduct the interviews. Participants who knew the researcher prior to the study were more confident about participating in the study, and were also more willing to identify other potential participants who they thought would acquiesce.

It had initially been decided to conduct a series of three interviews divided up as follows: interview one would focus on participants first knowledge about sex; interview two would focus on participants first sex experience(s); and interview three would be used to facilitate some reflection. However, in the process of conducting the pilot interviews it appeared that the reflection process did not warrant a completely separate interview, and that it could be accommodated easily at the end of the second interview. It was also decided that as participants were volunteering their time, that it would not be prudent to take up any additional time unless it was absolutely necessary.

3.5.2 Collecting data

Once all of the pilot interviews had been conducted, and the appropriate changes to the interview schedule and interview process had been initiated, the main interviewing process began. Participants from different age categories were interviewed in no particular order. Interviews were arranged at a date and time that suited the participant. In all cases adult participants were interviewed at their
homes in order to facilitate their greater comfort. Interviews were arranged at a time when the participant would be at home alone, and where this was not possible, the interview was conducted in a private area within the home, out of earshot of the other members of the family.

The first focus group discussion (Grade 12 learners) was conducted in a private room on university property. Reflecting on the experience of conducting the focus group discussion at a location that was unfamiliar to the participants, it was decided that this might have impacted upon the participants' willingness to talk on a sensitive topic. It was decided to conduct the next focus group discussion (Grade 8 learners) at a venue that was familiar to the participants. The Grade 8 focus group discussion occurred after school hours in a private room at the participant school. The focus group discussions were conducted during the same period as the interviews, which took place between June and December 2004. This allowed the researcher to explore themes arising from interviews with adult participants in focus group discussions, and vice versa.

3.5.3 Data processing

In the data collection phase, interview and focus group discussions were tape recorded. It was necessary to record the discussions so that every word of the conversation could be captured — to enable rigorous analysis. After each interview or focus group the researcher transcribed the discussion verbatim using Silverman's (2000) transcription conventions (Appendix D). The researcher chose to transcribe the interviews herself because it provided an opportunity to refer back to the interview notes and to make additional comments. It was also an opportunity to reflect on occasions where talk had been more difficult, and to make a note of those instances. Through this process broad themes were identified that helped to inform not only what would be explored in subsequent interviews, but it helped to identify preliminary (thematic) codes for the open coding process. The first steps of data analysis thus began in the data collection process (a central aspect of the Grounded Theory approach).
3.6 Method of analysis

3.6.1 Information management

Once all the interviews had been conducted and data had been collected and transcribed, interview and focus group transcripts were read and re-read a number of times so that the researcher could become familiar with the contents of each interview transcript. When the transcripts had been read through a number of times the researcher began to identify broad themes around the topic of 'talk'. The researcher identified who 'talk' was with, for example, mothers and friends. The researcher identified topics related to 'talk' such as AIDS and contraception, as well as instances where participants described what it felt like to talk on a particular topic or with a particular person. Once some of the broad themes had been identified the researcher was ready to begin with the systematic coding of all data.

3.6.2 Analytic tool: Grounded Theory

Data, in the form of text transcribed from the interview tapes, was analysed using Grounded Theory. Grounded Theory was chosen as a tool for analysis of data because, given that this study followed an inductive theme of inquiry, it would not have been prudent to abstract the data from the context in which it occurred. Secondly, Grounded Theory is a flexible analytic procedure that allows the researcher to explore emerging relations in themes and concepts (Glazer & Strauss, 1967).

In answer to the question, "How do we do Grounded Theory?" Charmaz (2000, p.151) explains that grounded theorists code data, and this coding helps to define and categorise the data. This process enables the researcher to gain a perspective on the data, which in turn informs further data collection.

For the purposes of this study, Grounded Theory coding procedures provided by Strauss and Corbin (1998) informed the analysis procedure. These are:

- **Open coding**, is a process in which the researcher forms initial categories of information relating to the study (Strauss & Corbin, 1998). Strauss and Corbin (1998) suggest various techniques for open coding such as line-by-line coding (ibid.) which entails a close reading of the text line-by-line. Alternatively, the researcher can read through paragraphs or brief
sections of texts in order to identify themes. In addition, it is suggested that the researcher read through the entire transcript and ask “what is going on here?” (Strauss & Corbin, 1998, p.114).

In this study many of the open codes developed from themes identified by the researcher while reading through the transcripts and interview notes. Properties relating to each code were also identified. For example one code was ‘taboo topics’ and tied to this code were instances where participants said they could not talk on a particular topic. This was determined largely by the person to whom they were talking. The properties of ‘taboo topics’ thus included (i) the person at whom talk was directed, (ii) the topic of the conversation, and (iii) the consequences that were expected to follow from talk on that topic. In addition to identifying themes from the interview transcripts the researcher always asked the question “what is going on here?” The reason for asking this question was that the interview was itself an instance of talk about sex and thus not only an exercise in data collection, but of data generation. This meant that it was important to note which topics or issues were difficult for the participant to talk about in the process of the interview.

- **Axial coding**, once a central theme is identified, conditions are identified that help to explain the phenomenon and data is then re-assembled to reflect this (Strauss & Corbin, 1998). In this study conditions between and across subjects of different ages were contrasted and compared in order to explore the effects of different social and cultural norms and ideals over a period of time.

- **Selective coding**, a story emerges and the researcher writes the story by integrating the categories in the axial coding model (Strauss & Corbin, 1998).

### 3.6.3 Evidence

The interpretation of results in this study tells a story about people, social and cultural processes and situations, and constructing a story is not an objective activity. Charmaz (2000) argues that a story reflects the viewer as well as the viewed. For this reason, a criticism of Grounded Theory is that researchers can choose evidence selectively (ibid), and this poses a challenge to a researcher’s interpretation of her subjects’ experiences.
There are three responses to this criticism. Firstly, as Strauss and Corbin (1998) point out, data is always a (re)construction of experience rather than the original experience itself. Thus, in every study the reconstruction of data is an inevitable activity, and this risk is therefore not limited to analysis using Grounded Theory. Secondly, in this study every piece of data was analysed and the main themes arising from comprehensive data treatment (Silverman, 2000) formed the focus of the analysis. Finally, the findings can be assessed in terms of their plausibility (Seale, 2004). This entails assessing the plausibility of the findings of the current study in the light of what is already known on the subject.

3.6.4 Computer-assisted analysis of qualitative data

The interview and focus group transcripts were saved in Rich Text Format and assigned a Hermeneutic Unit in ATLAS.ti. ATLAS.ti is a qualitative analysis programme developed to assist in the analysis of large bodies of textual data (Buhr, 1997). ATLAS.ti is not the only available software for qualitative analysis. Other qualitative analysis programmes include programmes such as NUD*IST and NVivo. However, as many ATLAS.ti features are based on Grounded Theory principles (ibid.) and as Grounded Theory is the analytical method adopted in this study, ATLAS.ti seemed to be the obvious choice in analysis software. Qualitative analysis software such as ATLAS.ti enables the researcher to analyse textual data with more rigour. For example, it is possible to count the number of times a particular phenomenon occurs (e.g. a particular topic) as well as for searching for deviant cases (Silverman, 2000).

3.6.5 Activity systems

Each transcript was coded using the open coding technique described above. In the process of open-coding relations between themes and concepts were identified and theoretical relations between codes began to emerge – and the preliminary stages of axial coding begun. However, before further developing axial codes, the researcher mapped the open codes into activity systems. This was done in accordance with the framework provided by the second generation of Activity Theory. Diagrammatical representations aided in the identification of mediating factors within each system of activity. For example, the subject, the types of rules and conditions applicable in that system of activity, and the community - or as it is also known, and more aptly referred to as the 'presence of others'. Secondly, themes relating to talk within a particular activity system were identified. For
example, it became easier through diagrammatical representation to identify the relation between the community and the types of rules that applied in that communicative context. For example, a 'rule' identified in parent-adolescent talk is that adolescents are “too young to be doing it”. This rule served as a mediator in the topic and scope of sexuality talk between parents and adolescents because it meant that adolescents could not talk about their experience(s) without acceding to having broken the rule. This example elaborates on the way in which axial codes were developed through open coding and the mapping of open codes into activity systems.

Axial codes were further developed by grouping codes identified in the open-coding process into categories. This is done by identifying codes with a common theme, creating a code category with a name describing that theme, and assigning associated codes to that category. This process results in elaborate networks that illustrate how groups of codes are related to one another. Finally, the researcher was able to compare mediating elements across systems of activity, for example by comparing parent-adolescent talk with peer talk. This involved theorising about the inter-relatedness of code categories and this constituted the selective coding process.

3.6.6 Constant comparison

Constant comparison stems from the coding process (Silverman, 2000). Once data had been coded into categories and ideas about the properties of those categories began to emerge, the researcher attempted to integrate different categories and noted how they interacted. For example, in the process of generating a category of rules that applied to participants talk on the topic of sex it became apparent that different rules applied to different groups of people – people who are parents and adolescents – and that the rules that applied within and between groups were also often contradictory. Noting how particular rules applied in particular instances of talk and not in others was a process of constant comparison. This process aided in the analysis of data by making it possible to elucidate contradictions within the different systems of activity (communicative contexts). It also added to the validity of the findings of the study because constant comparison requires a continuous testing of emerging knowledge for alternate interpretation, and this also involves comprehensive data treatment (ibid.) as the researcher repeatedly moves back and forth between different parts of the data.
3.7 Ethical issues

3.7.1 Topic

The selection of a topic in feminist research is determined by its potential to help women's lives (Jayaratne & Stewart, 1991). In the process of accessing literature on talk and communication as it relates to adolescence and sexuality it became apparent that a gap existed between the way in which sex as an educational topic is talked about, and the context in which young women's sexuality emerges. The literature also indicated that pervasive gender inequality in South Africa is a significant risk factor in women's health. The decision to focus on women's narratives of their emerging sexuality was undertaken for the purposes of elucidating which social and cultural factors that mediate those experiences. The goal of this enquiry being to provide information that would be useful to women, and the methodology that was appropriated to do this was selected with the intention of defining women as knowers and the producers of knowledge (Jackson & Van Vlaenderen, 1994), rather than the passive recipients of knowledge generated by abstract and 'objective' science.

3.7.2 Informed consent

There were no aspects of the research about which the participants were not informed. Prior to conducting the interviews and focus group discussions, the researcher took time to explain to participants what the study was about. The researcher explained in a clear and simple way what would be expected of the participants in terms of time (length of time required to conduct the interview) and nature of their participation (a discussion). The researcher explained that the interview would be recorded, how and why it would be transcribed, and the process of eliminating all identifying information that was carried out in the process of transcription. The importance of participating in research was stressed and the participants were thanked for volunteering their time to participate in the study. Details of the research as well as details of the participants' participation in it, were clearly laid out in a covering letter that was handed to participants at the first interview. With this information at hand, participants were given time to ask the researcher any questions they had about the research or their participation in it. After this the participants were asked to sign their consent forms which were written in a language that was accessible to them (refer to Appendix H for
Where focus groups were conducted with young people, a verbal agreement to undertake the research was obtained from the counsellor and head teacher of the participating school. In addition, parents of the children who participated in the focus groups were informed about the study in a letter (refer to Appendix E for a copy of the Covering Letter to Parents), and consent for their children to participate in the study was obtained (refer to Appendix F for a copy of the focus group participants Parents Consent Form). At the start of each focus group discussion the researcher made it clear to the participant that they were not compelled to participate in the study, and that anyone who did not want to participate in the study, at any stage, was free to end their participation. Focus group participants were asked to sign their own consent forms (refer to Appendix G for a copy of the Focus Group Participants Consent Form). Asking adolescents to sign their own consent forms was intended to indicate to the adolescent participants that their authority in this regard was recognised.

3.7.3 Confidentiality

Each interview was tape recorded and transcribed. In the course of transcribing the tape recording participants names were replaced with pseudonyms and any other identifying information such as the names of people, places, institutions and so on was changed or omitted to ensure that the participants could not be identified. The tape recordings and hard copies of the interview transcripts were stored in a locked cabinet in the researcher’s study. Data collected in the course of this study was kept for research purposes.

3.7.4 Risks and benefits

It was acknowledged that sex and sexuality related issues can be a difficult topic for discussion. Given the sensitive nature of the topic the researcher was aware at the outset that it might be difficult for participants to talk about their experiences. For this reason it was clearly indicated to all participants that their participation in the research was entirely voluntary, that they reserved the right not to talk about anything that they did not want to talk about and that all information was highly confidential and anonymous.
The researcher was mindful that some participants may have had traumatic experiences, which they might not have had an opportunity to talk about prior to participating in the research. For this reason the researcher arranged with a professional person qualified to deal with such matters, to provide psychological counselling in such an event.

The risk of causing any harm in this research was low. Some risk of psychological or emotional stress was possible because of the sensitive nature of the research topic. For this reason the researcher endeavoured to establish rapport with the participants in the research process. Attention was paid to non-verbal messages such as body language that might indicate that the participant was experiencing excessive discomfort.

The researcher started the interview with non-directive questions and asked participants if there were any questions or concerns that they had about the research before commencing with the interview process. To minimise discomfort the researcher avoided asking unnecessary questions of an emotive nature, or dwelling on, or pursuing a line of questioning that might cause distress. One advantage of series interviewing is that it provides greater opportunity for a relationship of trust to develop between the interviewer and the participant, and this helped to make it easier and more comfortable to talk.

Some participants reported that they indirectly benefited from participating in the research, as one participant put it, “you kind of forget about it, it was like 20 years ago, if not more now, so I haven’t thought about it for ages and it was kind of like, oh!, remembering boyfriends and remembering things that, you know, you haven’t thought about for a long time, kind of wandering down memory lane, so that’s been quite nice”.

Participation in the research did not incur any cost for the participants and they were not paid for participating. Participation in this study was entirely voluntary.
RESULTS

Themes identified in the open-coding process were developed into axial codes. Axial codes consist of a number of interrelated open-codes which collectively represent a particular phenomenon (Strauss & Corbin, 1998). In this study axial codes identified central themes in both parent-adolescent and peer talk. In the first part of the results section, axial codes for participants' talk on the topic of sex are presented. They include participants' contextualisation of sexual initiation, the responsibility that women associate with becoming sexually active, and following from this, experiences of coercion in heterosexual relationships. Central themes arising in peer talk are identified and presented in this section.

The second part of the results chapter focuses on parent-adolescent sexuality talk. Axial codes developed from an analysis of parent-adolescent sexuality talk identified mothers' concerns to talk about the 'risks' associated with sexual initiation and the need for their daughters to avoid that, as well as their need to regulate their daughters' sexuality.

The presentation of central themes arising from the analysis of data will be illustrated with extracts from the interview and focus group discussions. They will be presented using Silverman's (2000) transcription guidelines, a copy of which is provided in Appendix D. All names appearing in the extracts are pseudonyms, and are being used to protect the identity of the participants. The presentation of results is organised around the central themes described above, and represent the end-point of the analysis.
1. Contextualizing sex

This section deals with the way in which participants framed the context in which the initiation of sex occurs. Interview and focus group participants of all ages most often spoke about sex in the context of a relationship, indicating a normative expectation about the context in which sex is expected to occur. Relationships were also spoken about in terms of love and marriage, indicating values and ideals that are associated with romantic relationships. From participants’ accounts it emerged that historically, marriage has been the preferred context in which to enter into a sexual relationship.

1.1 Relationships

The results of this study indicated that social and cultural attitudes toward sexual relationships outside the bounds of marriage have become more permissible. However, the change in permissiveness relating to sexual behaviour is far from settled, and from participants’ accounts it is the basis of much current debate.

Extract 1: Grade 8 Focus Group

Res: so what age do you think it’s ok to have sex?
ALL: WHEN YOU’RE MARRIED
Lisa NO sex before you’re married
Cathy when your parents
Tracy when you’re engaged bru
Beth I don’t think so I think it’s anytime it just suits you
Janet ja
Tracy when you’re ready

In extract 1, participants were asked at what “age” they thought it was permissible to initiate sex. The initial response from the participants was to reply “when you’re married” acknowledging an awareness of the historically preferred scenario. However in the utterances that follow, individuals within the group challenge this ideal, for example by saying “anytime it suits you”. This illustrates how talk provides a platform within the peer group both to present and to challenge social and cultural ideals.
A number of issues pertaining to participants’ framing of the initiation of sex within the context of a relationship emerge in Extract 2. Firstly, in this extract Beth refers to sex within marriage as a “rule” acknowledging that normative expectation, but argues that many people choose not to wait until they’re married to initiate sexual relationships. In other words, people do not always follow the rules, perhaps also indicating that it is now more permissible to challenge that ideal.

**Extract 2: Grade 8 Focus Group**

Beth and I seriously think that being married [sex after marriage
Lisa getting married
Beth having sex after you are married because I mean if you think about it how many people actually really stick to that rule? Just think about it out of 10 out of 10 how many people ok out of 100 how many people will actually keep their virginity until marriage
Lisa but I mean look here if you are Christian then you like and you believe like us that you are Christian and you are brought up the way we are brought up sex before marriage is a big no no
Beth [but you guys you don’t know yet
Lisa [yes yes
Beth [because you haven’t come to a serious
Lisa [but wait
Beth but once you get into a serious relationship you are going to do exactly that
Janet my best friend is a person that’s highly Christian she is still highly Christian and then when she got into her first like real relationship like the guy (...) cool ok (...) working (...) after about 9 or 10 months they did have sex [and she did not look back
Beth because you know they get closer because you guys
Lisa but you are supposed to feel bad because the bible says so
Cathy and then when you’re like married if you’re getting married how’d it going to be if all your parents friends arrive and you don’t wear a veil because that means [you’ve like had sex
Lisa you can’t wear a white dress
Tracy but excuse me if I loose my virginity I will still wear a veil and a white dress
Cathy oh my
Ruby they can’t stop you how can they
Tracy I’ll ask my mom if my mom [wants me to wear it

Secondly, many expectations about gender appropriate behaviour within this community emerge from the participants’ discussion. For example, women are expected to be virgins when they marry. In addition, as Cathy and Lisa argue, women are also expected to indicate that they are virgins by wearing a white dress and a veil at their wedding. While the participants disagree about whether or not a woman who is not a virgin should still wear a white dress and a veil, and along with that the sort of message that would be communicated by not keeping with that practice, they seem not to be concerned with the underlying inequality of that practice. After all, it is not mentioned that men are not expected to wear any garment to symbolise their virginity and correspondingly one might argue,
that within this community, men are not really expected to be virgins when they marry. This illustrates how a seemingly obvious sexual double standard, goes completely unnoticed in this discussion. This issue raises questions about the opportunity (or more appropriately, the lack of opportunity) for young women to critically reflect on the way in which taken for granted practices discriminate against them.

Tied up with relationships is the idea of love. Relationships are idealised as the context in which people who are in love express that love – similar to marriage, but with fewer social and cultural rules and normative expectations. In Extract 3, the participants’ comments seem to indicate another normative expectation – that sex ought to occur only after a period of time “if it hasn’t lasted over a certain month”, indicating that it is not acceptable in this community to have sex with someone the moment you first meet.

**Extract 3: Grade 8 Focus group**

Janet no no he’s not like that (. ) all his relationships he’s been in (. ) if it hasn’t lasted over a certain month he hasn’t had sex with them (. ) he only has sex with the people that he like really really loves

Romance was an ideal that was reflected in narratives of other interview participants, indicating that sex within the context of a romantic relationship is normative within this community.

**Extract 4: Interview participant aged 25**

Joan um ja there was curiosity (. ) I mean you fooled around before then but um (. ) no there was no pressure or any thing like that it was a mutual decision (. ) I’m sure that he would have liked to have it sooner but there was no pressure um (. ) ja and I just think I loved him (. )

In Extract 4 Joan describes the progression of her relationship to a point where sex happened in a way that makes it appear as if that progression is normatively scripted. In other words, as the relationship becomes more serious women feel the need to show how they feel about their partner by having sex with him. Even though the participant asserts that having sex was “a mutual decision” and that “there was no pressure”, it seems that what’s missing from this account is the motivation of her own desire. The absence of her own desire in her account of sexual initiation can be contrasted with her acknowledgement of his desire (“he would have liked to have it sooner”).

Some explanation for the absence of talk about desire or pleasure in participants’ narratives (all participants in this study were female) is indicated in Extract 5.
In Extract 5 Ann describes how social and cultural norms that favoured a more permissive attitude towards male sexuality, simultaneously prohibited women's sexually and labelled women who "slept around". It also illustrates how normative discrimination against female sexuality meant that women were not supposed to like sex ("incapable of enjoying a sexual relationship"). In addition, where it did occur normative conditions stipulated that it should be within the bounds of a romantic ("always in love") heterosexual ("with a guy") relationship. However, the crux of what Ann seems to be saying is that modern women have more freedom to enjoy sex and that was not the case when she was adolescent. Despite Ann's argument for the greater acceptability of women's sexuality in contemporary society, it is worth bearing in mind that she might have felt intimidated to talk about her own experiences of desire in the interview – particularly when one considers her comments in Extract 5, about the limited acceptability of female sexuality in the era she grew up in.

In addition to framing sex within the context of a committed relationship, participants also described sex as something that occurs between consenting adults.

Extract 6: Interview participant aged 35

Res: what were the kind of values (.) what was your understanding of sex (.) initially (.)
Rene: um:: that it was um (.) something that needs to be done between two consenting adults who care about each other (.) and that it was a way of confirming the closeness rather than um (.) just an act between two people just because you know (.) because you felt like it (.) it was something that was enjoyable (.) and I think that (.) and I still have the same views now that it is something that (.) you know is a way of confirming closeness and it should be done with someone that you have close feelings for (.) not because you need to be supported (.) or because you need emotional support because you are lonely or something ((laughs))
Res: so it's about romantic love?
Rene: yea
In Extract 6 Rene supports Janet and Joan’s conceptualisations (extracts 3 & 4) of sex as something that occurs within a romantic relationship, but also describes sex in terms of what the law prescribes ("between two consenting adults"). Normative prescriptions illustrated in this extract include: sex as consensual, sex as an adult activity, sex within the context of a romantic relationship, and following from this, as a means to show someone how you feel about them.

1.2 Abstinence and monogamy

Relating to sex within the context of a committed relationship, some participants argued that individuals ought to abstain from having sex outside of a committed relationship.

**Extract 7: Grade 12 focus group**

Jane: ja (.) abstain
Zoe: that’s the big one
Res: how do you feel about that message?

Jane: I think it’s a very good message (.) I think (.) I think (.) a condom is an easy way out (.) um (.) I say that because (.) um (.) people say "no (.) it’s fine you can have sex as much as (.) have sex as much as you like (.) and you can have it with different partners (.) as long as you use a condom" (.) the fact is that having sex with different partners is wrong (.) that’s why abstinence is the better thing to do (.) and so they you know (.) waiting for marriage and waiting for someone to trust to (.) you know (.) share that bond with (.) so I think that abstinence is the right way to go (.) also (.) a condom is not 100% safe (.) you can still get AIDS if you are wearing a condom (.) so Ja.

In Extract 7 Jane argues that having multiple partners is “wrong”, in other words that such behaviour is not permitted within this community. There is also an awareness of the threat of contracting HIV through sexual intercourse, and that condoms are not believed to be completely effective in protecting people from contracting the HIV virus. In addition, Jane does not appear to be arguing that abstinence should last forever, only until marriage or a suitable relationship with “someone you trust”. This supports previous statements that within this community, sex is normatively accepted as something that occurs within the context of a relationship. However, it also represents a shift away from the 'traditional' view of sex as something that occurs exclusively within the bounds of marriage, illustrated here by an older interview participant:

**Extract 8: Interview participant aged 44**

Delia: I went through High school being quite committed religiously (.) and I think that the concept that sex was for marriage was quite well drilled into us (.) not that my folks were religious at all (.) I used to teach Sunday School and ran the Christian
In line with the contemporary view of sex within a committed relationship rather than solely within the institution of marriage, young people who participated in this study argued for abstinence as a measure of protection against HIV/AIDS rather than a social and cultural ideal. However, an interesting assumption pertaining to committed relationships of any form appears in a statement in the last sentence of Extract 7, in which the participant assumes that individuals in a committed relationship will not be at risk for HIV/AIDS. This implies that sexual relationships are, or ought to be, exclusive. Monogamy thus appeared to be another normative value regulating relationships within this community. It also demonstrates how condoms can be associated with ‘casual’ sex, in other words, with multiple partners and with people one does not know well enough to trust.

1.3 The heterosexual ideal

An implicit assumption underlying participants’ talk on the topic of sex is that sex is an activity which people of the opposite sex engage in, and this assumption can be identified in the extracts presented so far. Participants framing of sex as a heterosexual activity, indicates that in this community heterosex is considered to be the norm. Consistent with this finding, talk about homosexuality emerged as a marginalised topic in peer talk. The extract from a focus group discussion presented below (extract 9) represents the only instance across all interviews and focus group discussions where a participant mentions receiving information about homosexuality.

Mention of a magazine article about lesbians in this focus group discussion had the effect of prompting some talk among participants about homosexuality, and lesbianism in particular. Talk on this topic took two forms: (a) overt homophobia (extract 9) and (b) lesbianism as a heterosexual male fantasy, illustrated below (extract 10)

**Extract 9: Grade 8 Focus Group discussion**

Beth: how can lesbians be attractive?
Janet: exactly
Tracy: I don’t know it says in the cosmopolitan
Lisa: yes ja
Janet: ok well please get it because I want to know how can (.) how can lesbians
Beth: some guys hate lesbians (.) some guys think it’s unnatural
Janet: chicks and chicks (.) two chicks that like the same
Tracy: can you imagine like watching two guys getting into each other
Group: EEWW
Janet: no but you see
Lisa but the I think that’s wrong too because
Janet say you’re attracted to her ()
Group YUK
Janet she’s got the same as you why are you attracted to her?
Beth but people say it’s because a chick knows exactly what a chick wants
Tracy the only thing you’re going to get out of her is kissing (2) or touching her
Janet ja it makes me puke and stuff

Extract 10: Grade 8 Focus Group discussion

Beth like some guys will be like so::
Janet JA
Beth like, “so when is your friend coming around?” and I’m like “why are you so interested, what are you on about?”
Janet and he’s like (.) you know (.) he asks about her (.) when is she coming around
Tracy ja
Janet he said to me and my friend, “oh, please kiss her” (.) and like HELLO (.) NO::
Ruby I actually hate it I think that it’s disgusting

The way in which homosexuality is talked about in these instances creates, within the group, a particular context for talking on the topic that simultaneously allows some conceptualisations of the phenomenon (e.g. homophobic/male fantasy) while prohibiting others. It is arguable that these conceptualisations merely mirror larger social and cultural attitudes about gay and lesbian people, particularly when one considers that this discussion was prompted by the portrayal of lesbianism in the media. In contrast to the stereotyped attitudes towards homosexuality expressed above, toward the end of the same discussion some participants mentioned that they valued friendships with gay men.

Extract 11: Grade 8 Focus Group discussion

Beth I also have gay friends
Janet they are so much better
Beth yes I would I would do anything (.) I would rather have gay friends than have all these hectic heavy
Janet = gay friends are cool because you go out to clubs and that and they always like holding you (.) if a guy looks at you they come (.) they hold you
Beth = we check out the guys
Janet and they like stick up for you when you’re in that situation (.) he can have like the hottest 6 pack and everything but he will be gay and they just help you out of being a good friend (.) that’s all
Beth yes I know
Ruby and you can talk to him and
Beth I said “don’t you think that guy is hot?” and he’s like “ja” and then I like hit on the guy and
Janet like when you’re at a party and you have friends that are like (.) when a guy comes at you (.) and you’re like “man don’t you think that guy is hot?” and you look at him and he’s like looking too
Beth I love gay friends they’re cool (.) they’re the best ones to go out with
Ambivalent attitudes illustrated in these extracts may reflect how young people’s own experiences of homosexual friends interface (contrast, conflict, and at times converge) with portrayals of homosexuality in popular culture that has the effect of mediating discussion on the topic differently at different times. This also reflects the difficulty in seeking to establish typical attitudes for this group because their attitudes are not fixed. Instead they are fluid and at times contradictory, allowing for mediation by social and cultural factors such as stereotypes (which are an indication of norms), as well as their own experiences. Perhaps what is ‘normative’ among adolescents is more dynamic than within other systems, and this could be related to their transitional status which may accommodate contradiction more easily than other systems do.

2. Responsibility normatively associated with engaging in sexual activity

2.1 Avoiding pregnancy

One of the most noticeable differences between older and younger participants in this study related to talk about the responsibility associated with sexual behaviour. For example, in the extract below focus group participants mentioned responsibility as a normative expectation associated with becoming sexually active. An assumption shared by the participants is that ‘responsibility’ refers to the prevention of pregnancy.

Extract 12: Grade 8 Focus Group discussion

Lisa = there’s responsibility
Cathy yes you have to take responsibility
Ruby yes
Janet ja
Tracy you can’t just say lets have a baby because [what happens
Ruby [no no you can’t just have sex

This can be contrasted with accounts from older participants who were adolescents at the time when oral contraceptives first became available. The impact of oral contraceptives on young peoples’ sexual behaviour at that time, was that women became primarily responsible for taking precaution against pregnancy, as a participant explains:

Extract 13: Interview participant aged 60

Ann (. . ) ja when the pill came along I think it was a good revolution because you didn’t have to worry about being pregnant (. . ) then the woman had to be the one who was careful not the guy (. . ) I mean when I was growing up it was always the man

56
who had to be (.) you know wear French Letters as they were called (.) um (.) to protect the woman from pregnancy but once the pill came along the men thought yay you know the women can sort themselves out and when the women did fall pregnant the guys were horrified and said well you were supposed to be taking the pill (.) which was a bit unfair of them (.) I don’t know what they do now days.

In Extract 13 it is illustrated how, with the introduction of oral contraceptives, responsibility for the prevention of pregnancy became the sole responsibility of women, where men had traditionally been involved. Ann also describes how the pill, for the first time, allowed women to experiment sexually without having to worry about getting pregnant – having to bear the consequences. This is echoed in an account given by another participant of the same age:

**Extract 14: Interview participant aged 60**

Jill ...I'm talking about the late fifties and sixties (.) ‘the pill’ had just been designed giving women sexual freedom.

Res when did the pill come out?

Jill the pill came out around about the early sixties (.) and it really changed the whole scenario.

Res how?

Jill because (.) um (.) the worst thing a girl could do in those days was fall pregnant. so (.) the pill was the kind of thing that was going to stop girls from falling pregnant (.) and therefore they could experiment with sex (.) quite freely.

3. Coercive sex

Talk about adolescent pregnancy and the normative imperative for female adolescents to “take responsibility” for the outcome of sexual activity, led some focus group participants to argue that there are instances where young women are forced into situations they would rather not be in. The question this raises although not explicitly stated is that, if a woman is raped can she still be held responsible for the consequences? This next extract follows on directly from Extract 10.

**Extract 15: Grade 8 Focus Group discussion**

Tracy but what if it wasn’t your choice?

Ruby what if you were raped?

Lisa if you were raped then you have to tell someone

Janet people don’t tell other people that they were raped

Tracy I’ll tell my dad

Beth people think it’s a slutty thing

Janet yes

Beth obviously if you’re going to be if (.) if a guy is going to rape you then he’s going to have to have a reason like when you are walking around with a short tiny skirt on

Lisa CAN I TELL YOU SOMETHING there was an incident at the mall recently were a girl was attacked (.) raped (.) for no apparent reason (.) yes so you don’t ask for that
Beth: well what about down the road from here (.) there was a girl who was wearing a mini skirt and a bikini top and she was raped
Lisa: [that's when you ask for it
Cathy: [that's when you ask for it
Tracy: ja that's asking for it
Cathy: when you're trying to get a boys attention
Janet: people get raped =
Ruby: = all the time
Janet: but say they're just wearing just longs and a T-shirt even though you are wearing baggy longs you can still get raped
Res: you're talking about rape and stuff (.) what is that (.) is that fear stuff?
Cathy: forcing
Lisa: forcing
Beth: peer [pressure
Tracy: [peer pressure
Lisa: it's not peer pressure
Beth: like your boyfriend persuades you
Lisa: no it's force
Cathy: force ja
Beth: NO like, 'come on everybody is doing it why wont you?'
Janet: ja
Lisa: that's different
Beth: ['everyone else is doing it let's do it']
Res: [that sounds like you are talking about a different kind of force (.) that's peer pressure that's not rape really
Beth: [NO no the force of him]
Janet: no but we're saying it's like (.) rapes like (4) force ok
Lisa: ja (2) it's something that you don't really want to do

A number of contradictory social and cultural factors are implicit in this extract. Firstly, that rape is unlawful. In other words that not only is it socially and morally reprehensible, but there are laws against it that make it a reportable offence ("if you were raped then you have to tell someone about it"). Rape within this social and cultural context is normatively understood as occurring when an individual is forced to have sexual intercourse against his/her will. This seems to underlie the argument that rape (sex against one’s will) ought to exonerate the victim from the consequences of engaging in sexual activity, that she would otherwise have been expected to bear. The counter­argument initiated by Beth reflects another discourse within this social and cultural realm, that a woman who has been raped must somehow be responsible for it. Although this point is contested by Lisa who gives an example of a girl who was raped “for no apparent reason”, she ultimately agrees that under certain conditions ("she was wearing a mini skirt and a bikini top") women look to be raped (“that’s when you ask for it”). This illustrates that young people within this community continue to assume that (a) there has to be a reason to get raped, or that (b) and that women look to be raped. In other words, normative values still position women as being ultimately responsible for what happens, even when they’re raped.
What is particularly surprising about this extract is the change in tack that is initiated by Beth in the second half of the extract. Beth appears to shift from rape to the topic of peer pressure which, in this instance, seems to refer more specifically to coercion from young men to enter into sexual activity ("the force of him") with rape ("no but we're saying its like, rapes like, force ok"). Although the participants appear, at first, to have moved onto another issue, and it is noticeable how the researcher tries to clarify those issues as two separate issues ("that sounds like you are talking about a different kind of force (. that's peer pressure (. that's not rape really") coercion/peer pressure on the one hand and rape on the other, this attempt to clarify the issues as separate and distinct from one another is counter-acted by Beth and Lisa who insist that in both instances (rape and coercion) the "force of him" is a common element. Thus, for some of these young women sexual initiation within heterosexual relationships involves "doing something you don’t really want to do". Indicating a normative ("all the time") expectation that female adolescents associate with sexual initiation as reflected in their talk on the topic.

The contradictory construction of rape/force as simultaneously prohibited and allowed within this community, was illustrated in Extract 15 where adolescents' narratives testify to 'normal' coercion within heterosexual relationships. The coercive nature of heterosex within this community was also identified in older participants' narratives of sexual debut.

Extract 16: Interview participant aged 60

Res  how old were you?
Jill  13
Res  the first time that you had sex?
Jill  yes
Res  how did it come about?
Jill  um (. it actually was very sad because (. um (. it was almost forced (. I didn't really know what was going on (. and (. so that was my first time (20)
Res  how old was the boy?
Jill  well (. 17 (. so I (. you know (. I think that it was just one of those things (20)
Res  how did you know him?
Jill  how did I know him?
Res  ja
Jill  (15) well (. we went to school together (. and (. um (. we were just (. I would go to a friend of his house and um (. I set myself up (. and um
Res  why do you say you set yourself up?
Jill  how can I say (. um (10) I didn't think I would (. I didn't think about being safe or anything like that (. anyway (. couldn't get back home (. Ja (. It was one of those things.
In line with the focus group participants argument that women “look for it”, both Jill and Sue’s narratives testify to a belief in the part they played in the turn of events. Jill blames herself because she did not “think about being safe”, and Sue blames herself for her own “inability to say no” even though she was ten years old at the time. This illustrates how a normative belief that women are in some way responsible for being raped, is something that is carried over from one generation to the next.

Reflecting on their understanding of those experiences at the time, both Jill and Sue explained that they had initially misinterpreted the event.

Given that sex within this community is constructed as something that occurs within a romantic relationship (see extracts 3, 4 & 5) it is not difficult to see why it was, and arguably still is, difficult for Jill and Sue to make sense of their experiences.
In the process of conducting the interviews it became apparent that the structure of the interviews—the topics covered in the first and second interviews—imposed a temporal order on participants' accounts. It became obvious that this temporal order was inconsistent with the experiences of some of the participants. In other words for a number of participants their first sexual experience constituted their first knowledge of sex.

One young interview participant described how she read a story about child abuse in a women's magazine, and because the story mirrored her own experience she realised for the first time what had happened to her. The participant described this as her first knowledge of sex as well as her first realisation of the significance of her own experience.

**Extract 20: Interview Participant aged 22**

Mandy: I think that I was about 5 (.) and my mom used to buy magazines like Essentials and that kind of magazine it must have been one of those (.) I don't remember what magazine it was (.) and it was a strange story it didn't (.) it was weird to read a story like that in a magazine (.) do you know what I actually think it was (5) I think it was a letter (5) of (5) you see it's so difficult to remember because it was so long ago but I think that it was a letter to the editor (.) you know one of those advice columns?

Res: not the advice (.) but in the beginning of the magazine (.) where you write letters

Mandy: can you remember what your confusion was about this article? What was it about this article that triggered something for you?

Res: um:: (5) well I was actually abused myself when I was younger (.) when I was that age and the story was like me (indicates to herself) my step-father (.)

Talking about the experience in the interview, Mandy found it difficult to order events around the experience and to articulate and express an understanding of that experience. Talk on this topic was not pursued in the interview because it was obviously causing a great deal of discomfort for the participant. It is mentioned here to illustrate a number of issues. Firstly, it illustrates how the researcher's own expectations about the ordering of events, was based upon normative expectations that people learn about sex before they engage in sexual activity. It was not expected that a participant would have sexual experiences before they had any knowledge of sex, particularly not as a child, because within the social and cultural context of this study—that is, the social and cultural world of the participants and the researcher—sexual relations between adults and children are prohibited. They are prohibited by the laws of the country and by the commonly held moral and religious attitudes of its citizens. Despite this, incidents of adults engaging in sexual activity with children do occur and are often reported in the media. However, the researcher did not adequately take this into account when designing the interview schedules. One reason for this is that the
researcher does not view such acts – when they involve children – as sexual acts. (Participants were asked to describe their first sex experiences). Within the social and cultural world of both the interviewer and the participant, sex is commonly understood as something that occurs between consenting individuals (see extract 5). A shared social and cultural understanding, supported by empirical evidence, is that very young children cannot consent to sexual relations because their reasoning is insufficiently developed to make those sorts of decisions. Thus the inherent power differential between adult and child means that sexual relations within that context are always coercive and arguably more reprehensible than sexual relations between individuals of the same age – even when they are both young children.

Social and cultural sanctions about who may have sex with whom, as well the way in which we define what sex is (or more accurately, the confusion in defining that activity), make talk on such issues difficult, and that constitutes the second reason for including Extract 20 here. It should be noted that when asking participants to describe their first sex experiences, the researcher did not allude to which experiences participants should talk about. ‘First sexual experience’ was left to the participant to interpret in her own way. One reason that the participant may have chosen to draw on this experience is that within this social and cultural context, sex is also constructed as something that occurs between a male and a female and involves penetration, and those factors might have been sufficient for the participant to interpret this as a sexual experience. No doubt, the many ways in which sex may be construed and, in related to that, which conditions are prohibited or allowed, makes sex a controversial topic for discussion.

Finally, some of Mandy’s statements appeared not to ‘add up’. For example, it seemed unlikely that a five year old child would be reading a women’s magazine. Perhaps not impossible but the sophistication of the language in such a magazine (compared with a child’s) makes it an unlikely event. Although it is possible that, in the trauma of remembering the event, the participant made an error in recalling her age. Research protocol suggests that, faced with an ambiguous situation, an interviewer ought to ask the participant to clarify what she is saying. However, given that this was an extremely sensitive topic to talk about and the participant was already discomforted by it, not to mention the many challenges women who choose to speak of their experiences face – disbelief being one – the researcher declined to ask the participant to clarify her statement. This instance thus illustrates how the social and cultural taboo around sexual abuse of children mediates talk in this instant.
Mandy was also confused about the appropriateness of speaking about the experience. In a follow up interview she remarked, “I did feel a bit odd, I thought, ‘why did I do that?’”, and “I shouldn’t have done it, I actually wish I had not done it, um, because I don’t think, I don’t feel that it was the right thing to talk about that”. This illustrates how individuals who experience events in their lives, which are generally considered to be forbidden, are silenced by the stigma associated with such an event. It also illustrates how individuals evaluate the context in which talk occurs, and the way in which the context is evaluated mediates the topic and scope of talk within that context. This suggests that there are contexts within which talk on a particular topic may occur, for example in Extract 14 Lisa states that in the case of rape “you have to tell someone”, but that such topics are however not considered to be appropriate outside of those contexts. In Mandy’s case, she spoke about her experience because the interview was for research purposes, but not without reservations.

4. Taboo issues identified in peer talk

Analysis of focus groups participants talk revealed that adolescents in this study were centrally concerned with sharing information about what they had seen and heard. In Extract 21, participants discuss various forms of sex information that they access through the mass media, and talk moved on to the topic of pornography.

Extract 21: Grade 8 Focus Group discussion

Tracy yes cosmopolitan tells you everything
Beth it tells you like how to what styles to
Ruby positions and it says
Beth and you can learn from playboy
Res: what would you call this [sort of information?]
Beth and porn movies
Janet porn porn
Tracy porn bru
Beth information on porn
Res: you get this from?
Ruby from tv from books
Lisa from tv
Janet tv videos
Lyn magazines
Ruby you must be joking?
Beth I watched a movie the other day and it was gross
Janet we’re being recorded ((laugh))
Res: was it on tv?
Janet no it was a video rented from an adult shop
Pornographic film as a source of information about sex and sexuality was only mentioned in the Grade 8 focus group discussion. (Participants in this group discussion aged between 14 and 15 years). However, pornography was mentioned 21 times in 4 separate instances within that discussion illustrating that the participants were absorbed by the discussions on the topic.

Extract 21 is noteworthy because (a) it appears as if there had already been some discussion among members of the group about the movie to which Beth refers. This is evident in the warning issued by Janet that “we’re being recorded” implying that she knows to which movie Beth refers, and (b) Janet’s uncertainty about whether it should be mentioned in the context of a discussion that was being conducted for research purposes, and in the presence of an older female interviewer.

In the participants’ social and cultural world pornography is not traditionally considered an appropriate tool for educating young people about sex. This is evident in the numerous restrictions that apply to pornographic material such as where the material is sold and age restrictions that apply to whom may view that material (Film and Publications Act, 1996). Despite the restrictions on accessing pornographic material it is apparent from these extracts that adolescents not only access the material but that they consider it to be a useful tool to learn about sex.

**Extract 22: Grade 8 Focus Group discussion**

Janet: it at least gives you an animation of what is reported on =
Ruby: = it just shows you =
Tracy: = it's just like a visual thing
Janet: you are watching other people do it like instead of doing it you are watching them
Ruby: cos think about it (=) we never saw it in our lives

The speakers argue that pornography is a useful means to learn about sex because it depicts – visually – what can otherwise only be reported on. This argument is significant because it illustrates how, within this community, sex is constructed as a private activity and therefore as something that is not public, or seen. The implication for the participants is that learning about sex is different to learning about other things, baking a cake for example, which are not private and thus more easily demonstrated.
In addition, it is arguable that the cultural taboo pertaining to pornography impacts on the communicative context (in this case the research interview), illustrated in Beth’s warning to Janet that “we’re being recorded” in the preceding extract (extract 22). In fact, both extracts (22 and 23) illustrate that social and cultural prohibitions on adolescents’ access to sexually explicit material seems not so much to prevent young people from accessing it, as it does diminish the opportunity for them to talk about it.

Despite the young participants’ initial caution in introducing talk on the topic of pornography, as the discussion progressed participants began to talk about sexual practices that are generally considered to be taboo, beyond the bounds of what is considered ‘normal’ sexual activity. Extract 23 is included here to demonstrate the sort of practices that are considered taboo within this community and to illustrate how young people learn about them by sharing information – naming and describing what they entail.

Extract 23: Grade 8 focus group discussion

Ruby we heard about this position fruit salad and tea-bagging that’s gone the whole way around where we live
Res: what’s that?
Janet and the village bicycle
Tracy what is that?
Ruby you know what a fruit salad is
Tracy what is it?
Beth it’s apparently more than 10 people doing it all at once
Tracy isn’t that uncomfortable?
Beth they’re like all [in a row]
Janet [in a row] you stand in a row
Beth and the one guy will be here and then the next person like that and then the tea bag is just gross
Janet who does that?
Res: [what is that]?
Tracy [what is that]?
Beth the tea bag is like when the guy dips these like two little round thingies in the chick’s mouth and then the golden shower
Janet what?
Beth she told me about it and um
Group (((laugh)))
Tracy what is a golden shower?
Lyn she’s telling you now
Beth it’s when a guy
Janet sho:
Beth would urinate all over each other it’s all pretty much disgusting

As illustrated above, participants in the focus group discussion appeared to be quite bold in discussing taboo aspects related to sex, although it emerged that peer talk on taboo subjects such as sex and other sex related issues was not limited to contemporary adolescents.
In Extract 24 an older participant, Jill, describes a game called ‘consequences’ which she remembered playing with her friends at school.

**Extract 24: Interview participant aged 60**

Jill ... and consequences was a great game.
Res consequences ?
Jill yes (.) um (.) you would have a piece of paper and it would start off with (.) um (.) your favourite singer and what you would do with him
Res sexually?
Jill yes (.) it was all anonymous (.) and it was great fun because you (.) you write (.) say I liked Cliff Richard (.) and I fold the paper and then I pass it to you (.) and you would say what you would do to Cliff Richard (.) but you didn't know it was Cliff Richard (.) and you would fold it and then you would pass it around (.) and you can imagine what it came out at the end (.) having being passed around ten or fifteen girls
Res did you read the whole paper at the end?
Jill yes (.) and nobody knew who had written what (.) unless you knew the handwriting (.) you could have a good laugh you know.

It is interesting that the game (“consequences”) is anonymous because it indicates a taboo about talking about sex publicly, and in an explicit way. Jill explained that when she was an adolescent, people did not talk about sex as openly as they do today.

**Extract 25: Interview participant aged 60**

Jill ... nobody spoke about it (.) it wasn't open like it is today (.) it was all under-handed (.) it was all very quiet (.) and very very hush hush.

Thus, despite social and cultural prohibitions on talking about sex, or talk on taboo aspects of sex, analysis of peer talk in this study revealed that those prohibitions appear to play less of a role within the context of peer talk. This finding is however rather tentative, given that in this study data from adolescents was collected in focus group discussions which facilitated interactions between members of the group, which the researcher had direct access to. In comparison, the researcher did not have direct access to parent-adolescent discussions about sex, and relied on participants’ accounts of those interactions. This aspect might have been addressed by interviewing mothers and daughters together, although there is no doubt that other factors would have to have been taken into account.

5. Adolescents preference for peer talk

In numerous extracts across all interview and focus group discussions, participants testified that, as adolescents, sexuality talk occurred more often among peers, and on a wider range of issues.
In Extract 26 focus group participants agree that talk with peers as most comfortable, and that they feel that they can talk about “everything” with peers. Mia and Ruth describe peer talk about experiences (“what each other have done”) as a way of learning. This is echoed in comments by Mel in Extract 27 (below).

On the subject of peer talk, the most significant difference between the focus group participants’ accounts of peer talk and interview participants’ accounts of peer talk appears to be the greater openness of contemporary adolescents to talk about their own sex experiences. Jill reflects on this as it pertains to a comment which her daughter made to her.

Jill’s last comment in Extract 28 about peer talk and the way in which “girls give other girls a bad name”, indicates an association of risk with talk about sex, and particularly when it pertains to talk on one’s own experiences. It indicates a restrictive social and cultural attitude towards female sexuality, and it appears that contemporary adolescents are aware of this. In Extract 29 Beth questions the disparity that exists between permissive social and cultural norms pertaining to male sexuality, and the limited social and cultural acceptance of female sexuality.
In Extract 29 female adolescents argue that young men have more opportunity to talk about their sexual experiences because social and cultural norms within this community that validate male sexuality. This double standard allows men the authority to speak (“the guy always goes “yea, I got it last night””) since male sexual prowess is a normative ideal within this community (ja, but dah), while female sexuality is constantly at risk of being denigrated (“you’re a slut”).

The first part of the results chapter dealt with the way in which adolescents talk about sex amongst peers. The second part of this chapter will deal with parent-adolescent sexuality talk.

6. Too young for sex

In contrast to peer talk, participants’ descriptions of parent-adolescent sexuality talk reflected a very limited acceptance of adolescent sexuality within this social and cultural context. Parental framing of the context in which sexual initiation ought to occur centred primarily on age, and the normative expectation to initiate sex within the bounds of marriage.

In Extract 30 participants talk about why they think their parents are more worried about pregnancy than AIDS.
In response to the researcher’s question about parental concerns relating to sex, Tracy responds by saying “we’re too young to be doing it” indicating that, aside from those risks, her parents do not condone her becoming sexually active at her age (14 years). A little further along in the conversation the researcher returns to the question and asks at what age the participants think that it is appropriate initiate sex.

**Extract 31: Grade 8 focus group discussion**

Res: so what age do you think it’s ok to have sex - when do YOU think?
Group WHEN YOU’RE MARRIED
Lisa NO sex before you’re married
Cathy when your parents
Tracy when you’re engaged bru
Beth I don’t think so I think it’s anytime it just suits you
Janet ja
Tracy when you’re ready
Res: but what are your parents telling you?
Group when you’re married

Although the researcher stressed that she was asking the group at what age they thought it was appropriate to initiate sex (“when do YOU think”), the group unanimously responded by shouting “when you’re married” indicating a normative expectation within the participants’ community. However, not all participants agree with this and Beth initiates a statement of resistance to this norm which is supported by Tracy indicating that, contrary to their initial response, not all participants support this normative expectation — although they are apparently all well aware of it. Having established that not everyone in the group prescribes to this norm, the researcher attempted to clarify how the participants viewed their parents position on this (“but what are your parents telling you?”), at which point the group unanimously agreed that their parents ascribed to this norm.

7. Silencing talk about experiences

As a result of parental prohibition on adolescent sexual activity, participants’ argued that they could not talk to their parents about their first sexual encounters.

**Extract 32: Interview participant aged 25**

Res um (30) you were 16 why (.) what stopped you from talking about it with your parents?
Joan um (5) a very specific event actually (.) my sister who was 3 years older than me (.) she slept with a guy for the first time when she was 15 (.) and my parents found out about it and actually arrested the guy for statutory rape because he was in his 30's
Extract 34: Interview participant aged 60

Res what were the kinds of rules around sexuality=
Ann =don't get pregnant (.2) was the only one (.2) because that was the biggest disaster
and shame in the entire world (.) for family (.) because they would kinda kick them
out of home (.) so you just did not fall pregnant

The most significant difference in these accounts is that older participants, when they were
adolescents, understood an unintended pregnancy to be something that would, primarily, bring
shame upon their family. In contrast, parents of contemporary adolescents talk about the ‘risk’ of an
unintended pregnancy in terms of its impact on future prospects (“you are going to have to drop out
of school” and “you won’t get a nice job”). This indicates that women’s careers (and
correspondingly, their independence) constitute contemporary values within this community
resulting in an emphasis on the negative impact of an unintended pregnancy in terms of future
prospects, rather than as a potential risk to the status of the family.

9. Sex was never discussed

Comparing and contrasting participants’ accounts of sexuality talk revealed that while contemporary
adolescents are familiar with parent-adolescent talk on the topic of sex, that this was not the case for
adolescents in the 1950’s.

Extract 35: Interview participant aged 60

Ann ok (.) well firstly (.) I’m 60 now (.) so this was in the 50’s (.) my parents were British
and never spoke about anything to do with sex (.) ever (.) it was not a subject my
mother ever really referred to (.) not directly (.) I never knew (.) I was not told
anything about it.

Extract 36: Interview Participant aged 60

Jill you know when you were talking (.) when you were just explaining about what it was
all about (.) I was trying to think (.) and I thought (.) I honestly can’t remember the
first time (.) um (.) that I heard about sex (.5) I wasn’t a very observant child (.) and
my mother was pregnant with my sister (.) but I can’t actually remember her being
pregnant (.2) I can’t remember her tummy growing (.) or anything (.) or any remark
that anyone passed about it (.10) it was my grandmother who told me that I had a
sister (.) and I was very thrilled about this because I had been an only child (.) but
they all omitted to tell me that it was a baby (.) I thought that I was going to have a
sister about two years younger than myself (.) it was quite a shock (.2) and it never
occurred to me to think where this child had come from (.) what were the events
leading up to it (.) and that was about age nine (.) so I definitely was a little bit
immature (.) I certainly didn’t know about sex or anything like that
This indicates a change in trends, in comparison to the dearth of sexuality talk among parents and adolescents in the 1950’s, the next generation described parent-adolescent sexuality talk as a much more common event.

**Extract 37: Interview participant aged 35**

Rene: my mum is a very straight-forward person and I think that um she (.) she (.) I remember her having a conversation with us but it wasn't really explained so much about what sex was about (.) but more about the risks involved (.) you know like diseases and falling pregnant and my mother always said to us that if we were to have a child um from any sexual relationship with a boyfriend then she mustn't be expected to look after the child ((laughs)) and she was telling us now that she was going to have nothing to do with it (.) so it was our responsibility (.) and I think that she probably had a conversation with me when I had my first serious boyfriend ... my mom would have done it because she would have thought that she would need to educate us so it wouldn't have been a fun joking kind of manner (.) my mom's not a fun joking type of person so it would have been more 'so like this is what happens' 'these are the consequences' type of conversation

The approximate age difference between Rene and the focus group participants is 22 years, which means that she is old enough to be in the same age group as the parents of the focus group participants. It is therefore interesting that their extracts (compare with Extract 30) reflect a common concern over the (primary) risk of unintended pregnancy. In Extract 37 Rene explains how this concern was raised when she had her first “serious boyfriend” and it is not surprising since it is within this context (a relationship) that participants most often understood sex to occur.

In addition, it appeared that the availability of oral contraceptives for Rene’s generation resulted in a need for parents to talk to their adolescent daughters about the need to take responsibility for engaging in sexual activity (this issue relates to extracts comments in extracts 12 and 13). For example, Rene explains that her mother didn’t really explain “so much about what sex was about” as she did about “the risks involved”. Rene also explains that, to her understanding, her mother her did this out of a need for her fulfil her duty as a mother, indicating a new trend and normative expectation for parents to assume responsibility for educating their children.

Although Rene’s memory of talking to her mother reflects a primary concern with pregnancy (and this is reflected in other discussions with participants), some reference is made to the risk of sexually transmitted disease. In a focus group with Grade 12 learners (17-18 years old), one participant mentioned talking with her parents on the topic of HIV/AIDS, this is illustrated in the extract that follows:
Extract 38: Grade 12 Focus Group discussion

Jane  I think at home we discuss (.) my parents know that my sister and I know about AIDS and that you have got to be careful and that kind of thing (.) but we (.) we chat more about the medical side of it (.) like how it affects your body(.) and that kind of thing. Like what cells it attacks, and um, like what you have got to do like about antiretrovirals. We discuss those kinds of things like especially now more often because my Dad's got someone on his staff who has been diagnosed with AIDS, it's not HIV anymore, it's gone to like full blown stuff. And he almost died and now he has gone onto the antiretrovirals and his count, I don't know, the white blood cell count has gone up and he is getting better. So we chat about that all the time.

Mention of HIV/AIDS in this instance was noteworthy because it represents the only occasion across all interview and focus group discussions where a participant recalled having conversations with her parents about HIV/AIDS. Jane is the daughter of a medical doctor and in this extract she refers to a personal experience her family has with a person living with AIDS, which appears to have had the effect of prompting discussion within the family on that issue.

Another marginalised issue in contemporary parent-adolescent sexuality talk was talk on the topic of sexual abuse. Below is an extract from the only instance across all interviews and focus group discussions where a participant refers to talk with a parent on the topic of sexual abuse.

Extract 39: Grade 8 Focus Group discussion

Ruby   anyway (.) even now we know about AIDS and we know about rape (.) my mom didn't know about rape when this guy (.) ok she was pregnant because of rape (.) she had my brother because of rape(;) ... so when she told me I was like why didn't you call Childline what about (.) and she like we didn't have that
Beth   but you know there are so many things that we know that they don't
Janet  but you see they didn't talk about it and even if you got raped they would still think that you were a ho in those days

It is significant that the participants reflect on the silence associated with a ‘taboo’ issue (“but you see they didn’t talk about it”), although they do this with the assumption that people nowadays talk about those issues (“we know about rape” and “there are so many things we know that they don’t”). While that may be the case, from participants’ accounts of discussions with their parents, this was the only instance of talk about sexual abuse with a parent. Thus, while talk about sexual abuse may constitute a topic for discussion in other contexts, and in this study participants did share their stories of abusive sex experiences, results from this research indicate that the topic does not feature in parent-adolescent talk.
In Extract 39 Janet remarks, “if you got raped they would still think that you were a ho (whore) in those days” indicating the presence of social and cultural norms in the day when her mother was an adolescent that discriminated against women who had been raped, and which had the effect of silencing those experiences. This reflects her earlier remarks in Extract 15 highlighting an awareness of a tradition of discriminatory values. However, given her peers lack of critical engagement with their currently held beliefs (in extract 15 some members of the group agreed that there are instances were a women looks to be raped) this reflection stops just short of making a connection between the groups currently held beliefs and discriminatory attitudes in the past.

10. Parental regulation of adolescent sexuality

It appeared that as a result of the ‘risks’ associated with adolescent sexuality, mothers’ attempted to regulate their daughters’ activities in order to keep them from situations that mothers’ associated with the likelihood of engaging in sexual activity. In Extract 40 a participant describes the ‘rules’ her mother communicated to her, as they pertain to her activities with her boyfriend.

Extract 40: Grade 8 Focus Group discussion

Ruby: ok there’s reason why my mom won’t let me like go my boyfriend’s house (.) she won’t let me go to his house like everyday (.) and I’m not allowed like sleeping over there and I’m not allowed staying over there for too long because my mom was pregnant when she was 16 with my brother and she doesn’t want the same thing to happen to me.

In Extract 40 Ruby explains that her mother’s regulations about where and when and for how long Ruby can spend time with her boyfriend are tied up with the ‘risk’ of becoming pregnant which her mother associates with that relationship. It is illustrative of parent-adolescent talk as a means for mothers to communicate their values and expectations about their adolescent daughter’s behaviour.

In line with this, although an adolescent in the Grade 12 focus group discussion mentioned engaging in sexuality talk with her parents on the topic of pregnancy and HIV/AIDS, when they were asked if they felt they could ask their mothers for contraceptives, the group generally agreed they could not.

Extract 41: Grade 12 focus group discussion

Res: If you wanted contraception could you tell your mother that?
Zoe: yes
Group: ((laugh))
Ruth: no ways
Cara if you go and ask your parents for that they immediately think the worst (.) and so it's like (.) you refrain from doing that
Jane well I would discuss it with my Mom first (.) and then I wouldn't like (.) land it on her
Group ((laugh))
Jane I would try to work on it
Zoë that's it (.) ja
Cara if you were working on it with my mother she would go straight to the point “what are you doing?”
Zoë hey no (.) you bring home all the facts (.) and you know (.) what good things it does for you your skin (.)
Ruth Ja ja
Cara I don't have to bring them home (.) she knows them
Jane shame you are at a disadvantage
Sian you are
Res so that would be a bit difficult?
Cara Ja
Zoë there's a way to do it (.) I think
Res but you have spoken about contraceptives?
Zoë sort of discussed it (.) but not really suggested it.
Cara ja ja

This indicates inconsistency in parent-adolescent talk in which mothers talk about risks and protection, but where talk on the topic stops short of adolescents being able to ask for (or being given) contraceptives. While the reason for this is not clearly articulated, it is alluded to. The problem with asking for contraceptives is that it indicates an individual’s intention to engage in sexual activity which, because they are adolescents, is not yet sanctioned within this community, leading parents to (“immediately think the worst”). Thus, while adolescents may have access to information about the prevention of risks associated with sexual activity there is little opportunity within this context for them to put that knowledge into practice (“sort of discussed it but not really suggested it”).

In addition to female adolescents’ problems in talking with mothers about contraceptives, it appeared that the female adolescents in this study were also aware of a sexual double standard in parent-adolescent sexuality talk on the topic of sex.

Extract 42: Grade 8 focus group discussion
Janet but why are mothers so straight with their sons like my mom says to my brother you can go and have sex but when you come home and tell me that you made a chick pregnant you're dead
Group ((giggles))
Ruby yis
Janet why is it like that but your mom tells you when it comes to you your mom says you have sex you're dead you do this you're dead
Res I don't know why do you think?
Janet I don't know I asked my mom the same thing and she walked away
Ruby cos girls
Tracy yis bru:
Ruby girls can get pregnant and guys can't

This extract reflects a sexual double standard in which sex is constructed as more dangerous for females because they bear the consequences unequally (“cos girls can get pregnant and guys can’t”) in comparison with their male counterparts. For this reason parents appear to be primarily concerned with communicating those risks to female adolescents and regulating their behaviour. The topic of sexuality talk (risk) is thus mediated by unequal gender relations in a community in which women rather than men are expected to bear the consequences of unintended pregnancy (“you are going to have to drop out of school and you won't be able to go overseas and get a nice job and you'll always have this little person tagging along with you”). Janet addresses this double standard in a conversation with her mother, and reflects on the silence that took the place of an answer (“I asked my mom the same thing and she walked away”). This also illustrates how normative and discriminatory values within society have the effect of silencing young women. Within this community parent and adolescent scripts for talk on the topic of sex are orientated towards maintaining traditional practices. These practices mediate the sorts of topics that are spoken about as well as the scope of that talk.

11. Summary of results

In summary, the results of this study reveal that the participants, who were all women, overwhelmingly framed sexual initiation within the context of a relationship. The type of relationship in which the initiation of sex was framed ranged from the more conservative expectation for sex to occur within the bounds of marriage, to a more liberal attitude condoning sex within the context of a romantic relationship. For older participants (those aged between 45 and 60 years), the traditional ideal of sex within the institution of marriage was strongly enforced when they were adolescents, and they described far-reaching consequences for young women who fell pregnant outside of the institution of marriage. In contrast, while the normative expectation for sex to occur within the bounds of marriage was identified by some younger participants, it certainly appeared to be less prevalent, with young people arguing that it is now acceptable to initiate sex within the context of a romantic relationship. However, from adolescents’ accounts of discussions with their parents, and with mothers in particular, it appeared that parents still favour a more traditional
approach. The tendency for parents to favour sexual initiation within the context of marriage puts them out of sync with adolescents' attitudes towards sexual initiation.

Other issues pertaining to the framing of sex within the context of a relationship emerged in the findings. These included traditional values such as monogamy and abstinence. These values were prevalent across all generations of interview participants. However, it appears that the motivation for holding those values has changed slightly from the past. For example, young participants argued for abstinence as measure to reduce the risk of contracting HIV, rather than for purely ideological reasons.

Across all interview and focus group discussions heterosexuality also emerged as a dominant social and cultural ideal within this community. In nearly every account sex was framed as an exclusively heterosexual activity, indicating that this normative ideal is strongly entrenched across generations. However, the ambivalent attitudes toward homosexuality which appeared in the Grade 8 focus group discussion, indicates that young peoples' attitudes towards homosexuality may be shifting. This relates to a central feature of peer talk identified in this study, which is that peer talk presents an opportunity to young people to talk on issues that are otherwise considered to be out of bounds. This is often done with the aim of sharing information that they have and to learn about new things. For young people in this study, a more equitable relationship among peers -- illustrated by participants willingness to talk more openly -- meant that controversial issues such as homosexuality or pornography could be brought up more easily for discussion, as well as providing space for young people to talk about their own and others' experiences.

On the topic of the first sex experiences, results of this study reveal that in stark contrast to the way in which participants spoke about sex, narratives of participants' first sex experiences exposed some heterosexual activity as coercive and violent. This issue was identified across all generations of participants. From participants' accounts of those experiences two themes emerged, these were self-blame, in other words, women look to be raped, and the normalisation of coercive sex. Self-blame was identified in the accounts of older as well as younger participants. However, the normalisation of coercive sex was an issue raised among younger participants who appeared to be resigned to the idea that coercion is a 'normal' part of a relationship with a man. None of the participants in this study, regardless of their age, talked about their experiences of violent or coercive sex with a parent.
On the issue of parent-adolescent talk, the results revealed that in the past parents were not expected to educate their adolescent children about sex and sexuality related issues, but that with the advent of the contraceptive pill and the opportunity it presented to young women to take responsibility for avoiding unintended pregnancy, meant that parents were increasingly expected to offer that information to their daughters. However, results also show that many contemporary parents still do not condone their adolescent daughters becoming sexually active, and this mediates the way in which they engage with their daughters on the subject of sex. Thus, while there may be a trend toward greater parent-adolescent sexuality talk it appears that talk on that topic is primarily focused on risks and the need to avoid those risks through abstinence. The finding that contemporary parents' are primarily concerned about the risk of pregnancy and the need to regulate their adolescent daughters' activity in order to control for that, is out of line with the some of the 'real' issues young women are faced with.

A central feature of the results of this study was that participants talk on the topic of sex was framed by normative ideals – social and cultural values and beliefs about doing and appropriate doing. In Activity Theory normative ideals can be thought of as the 'rules' within an activity system. The discussion of the results will therefore be framed in terms of the rules mediating sexuality talk among adolescents, their parents and peers, within this community.
Discussion

In this study, social and cultural factors mediating sexuality talk were explored with a view to arguing that talk is mediated by the context in which it occurs. This was undertaken with a view to problematising simplistic forms of sexual health information dissemination. In this study the following questions were explored: which social and cultural factors mediate talk among peers; which social and cultural factors mediate talk between parents and adolescents; and do social and cultural factors mediating talk change over time?

The results of this study indicate that normative ideals mediating individuals’ behaviour in this community, also framed their talk on that topic. Normative ideals identified in the previous chapter include the framing of sex within the context of a relationship and values pertaining to relationships in this community which include heterosexuality, monogamy, and abstinence. Other normative ideals identified in the results include the expectation for parents to talk to their adolescent children about sex. In the process of that talk, it emerged that parents hold more ‘traditional’ and conservative attitudes towards sex, compared with the attitudes of their adolescent children. Further to this, issues identified in peer talk highlighted an historical and limited acceptance of adolescent sexuality, and female sexuality in particular. As a result of the limited acceptance of adolescent sexuality, it emerged that peer talk has historically been, and remains, the primary opportunity for young people to learn about sex, and to talk about their own sex experiences. These issues are discussed in detail in this section.

In this discussion I intend to argue that parent-adolescent sexuality talk and peer sexuality talk are two different systems of activity. I will also be arguing that parents’ and adolescents’ competing motives for engaging in sexuality talk has the effect of silencing adolescents’ talk about their experiences in the parent-adolescent communicative context. To facilitate this discussion, diagrammatical representations of systems of talk based on Engeström’s (1987) model of the activity system for parents and adolescents will be presented. Each element within these systems will be discussed in order to elucidate what part it plays in mediating talk within that context, although
emphasis is placed on the rules of the system because that was the primary focus of the analysis. Finally, themes arising in peer talk will be discussed as they relate to broader issues in contemporary South African research.

1. Rules and the activity of talk

It has already been mentioned that Activity Theory provides a very broad theoretical framework against which to analyse the results, and the decision to focus on rules in the form of social and cultural ideals was informed by a dominant theme emerging from the results of the study that identified rules as a central factor mediating participants’ talk. In Activity Theory rules refer to laws, conditions, or normative expectations (Daniels, 2001; Engeström, 1987) about doing and appropriate doing within a system of activity.

2. Normative ideals framing talk

In this study rules most often took the form of normative ideals framing participants’ talk on sex, and normative ideals identified in participants’ narratives were illustrated in the results section. These ideals included the context in which sex ought to be initiated, such as within the institution of marriage (extracts 1, 2, 8) or within the context of a romantic relationship (extracts 3 and 5). Sex was described as a way of demonstrating love (extract 4), which explains why participants believed it ought to be initiated within the context of marriage or romantic relationship. Sex was also described in terms of taking place in a particular legal framework, such as having to be consensual (extract 6), and as something that adults engage in (extract 6). In addition, sex was framed in terms of cultural values such as monogamy, in the case of a committed relationship (extract 7), and abstinence in the absence of a committed relationship, meaning that ideally people ought not to engage in casual sex (extract 7). Finally, sex was framed predominantly within heterosexual terms (extract 9).

Sometimes these ideals were only implied, for example, most participants automatically spoke about sex in heterosexual terms. At other times normative ideals were explicitly stated, for example,
participants framed talk on the initiation of sexual activity within the context of a relationship. In focus group discussions young participants debated whether marriage — the traditional, and often preferred, context in which to initiate sex — or a committed relationship, was more appropriate (extracts 1 and 2).

Many of the ideals identified in the results of this study pertain in some degree to relationships, and particularly to participants’ understanding of the context in which sex occurs. The significance of relationships in participants’ contextualisation of sexual initiation is interesting when one takes into account that relationships do not feature as a significant topic in the literature on parent-adolescent sexuality talk. In the literature review it was mentioned that pregnancy, birth control, HIV/AIDS and other STD’s, collectively referred to as the ‘risks’, have been identified as the major topics in parent-adolescent sexuality talk (Aldous, 1983; DiLorio et al., 1999; Dittus et al., 1999; Helpren, 1983; Nolin & Petersen, 1992; Ntlabati et al., 2001; Young-Pistella & Bonati, 1998). However, the lack of focus on relationships in the literature on parent-adolescent sexuality talk can be explained. From the results of this study it appears that this seeming omission in the literature simply reflects a disjuncture that exists between the context in which adolescent sexuality emerges and the way in which parents and adolescents talk on that issue. To illustrate this disjuncture, factors mediating parent-adolescent sexuality talk will be presented and contrasted with a discussion of participants’ descriptions of their first sex experiences.

3. Factors mediating mother’s talk

The first system that is presented is a representation of the factors mediating mothers’ talk (figure 5). In this study all of the participants were female and overwhelmingly identified their mothers as the primary source of sexuality information within their families. This was to be expected because previous research in the area of parent-adolescent sexuality talk has shown that mothers more often than fathers engage in talk on the topic of sex with their adolescent children, and on a broader range of issues (DiLorio et al., 1999; Dittus et al., 1999; Guzman et al., 2003; Jaccard et al., 1996; Nolin & Petersen, 1992; Ntlabati et al., 2001). This points to a division of labour in the activity of sexuality talk within the home, and the subject(s) within this system (parent-adolescent) are therefore the mothers of female adolescents (Figure 5, on page 85).
Within this activity system mothers belong to a community of other mothers, which is also a community of parents. Contemporary expectations within this community, reflected in international research on the topic, are that parents should be involved in the sexuality education of their children (DiClemente, 1990; DiLorio et al., 1999; Dittus et al., 1999; Fox & Inazu, 1980; Guzman et al., 2003; Miller et al., 1998; Nolin & Petersen, 1992; Young-Pistella & Bonati, 1998). However, results of this study indicate that this has not always been the case. From participants' accounts it appeared that for older participants such as Ann and Jill who are currently in their 60's, parent-adolescent talk on the topic of sex was not a normative requirement when they were adolescents. Ann and Jill explained that people did not talk openly about sex when they were young. In the 1950's women were expected to learn about sex from their husbands after they were married, and for parents to initiate talk on the topic of sex before their daughters were married would have been deemed inappropriate.

In the methodology section it was explained that women in different age categories were interviewed in order to study social and cultural factors mediating sexuality talk, and to investigate how this changed over time. As illustrated above, participants' descriptions of parent-adolescent sexuality talk revealed that very little talk occurred between mothers and daughters for participants aged 45 to 60 years (see extracts 35 and 36). However, by comparing participants' accounts of mother-daughter sexuality talk it became apparent that, compared with older participants, those participants aged 35 years and younger reported more frequent talks with mothers on issues pertaining to sex (see extracts 33 and 37).

An explanation for the trend toward parent-adolescent sexuality talk is provided in older participants' accounts of the 'sexual revolution' that occurred in the 1960's, and along with that the introduction of oral contraceptives (see extracts 13 and 14). Both Ann and Jill describe the sexual revolution as an event that impacted significantly on traditional sex practices. For example, they explain how the availability of oral contraceptives meant that women were able to experiment sexually for the first time without the risk of falling pregnant, and they also explained how this had the effect of shifting responsibility for the avoidance of pregnancy from men to women. Similar findings on the shift of contraceptive responsibility mediated by the availability of female contraceptives was found in research conducted by Ntlabati et al. (2001) in a deep rural area in the Eastern Cape, indicating that the introduction of female contraceptives impacted broadly in society and were not limited to one specific context.
The results also indicate that the sexual revolution and the introduction of oral contraceptives (a tool mediating sexual activity) had a significant impact not only on traditional sex practices, but it also changed the way in which people talked about sex. Participants born a generation later in the late 1960's and early 1970's (currently aged in their mid-thirties), reported talking more frequently with their mothers on the topic of sex. Participants described those discussions as being prompted when they started dating (see extract 35). This can be read as an acknowledgement of the context in which sex is initiated, but it also illustrates an acknowledgement of the trend in this generation to initiate sex outside of the institution of marriage. It is arguable that such factors necessitate greater parental involvement in young people's sexual socialisation and may account for the trend towards parent-adolescent sexuality talk. On the scope of those discussions the results of this study reveal that the risk of pregnancy features prominently, with participants describing their mothers as being primarily concerned with talk on the avoidance of pregnancy (extracts 31, 35, 38, 39). This is consistent with a large body of research in the area of mother-daughter sexuality talk (DiLorio et al., 1999; Dittus et al., 1999; Helpren, 1983; Nolin & Petersen, 1992; Nlabati et al., 2001; Young-Pistella & Bonati, 1998).

Contemporary adolescents' descriptions of mother-daughter sexuality talk indicate that mothers in this community are still primarily concerned with the need for female adolescents to be responsible for avoiding unintended pregnancy, which participants' mothers associate with adolescent sexual activity. Within this group, additional concerns in mother-daughter sexuality talk included HIV/AIDS (extract 36) and child sexual abuse (extract 37). However, these issues were marginalised in comparison with the risk of unintended pregnancy and the need to avoid that. Young participants explained that their mothers' concerns about pregnancy stemmed from their own experiences of early parenthood (extract 38) and a desire to protect their daughters from consequences that would impact negatively on their future (extract 31).

The continued focus of mother-daughter sexuality talk on the risk of unintended pregnancy appears to be out of sync with contemporary South African research which focuses overwhelmingly on the risk of HIV/AIDS (e.g. Abdool Karim et al., 1991; Akukuwe, 1999; Campbell et al., 1998; Kelly, 2000; Kelly & Parker, 2000; Kelly et al., 2001; Leclerc-Madlala, 2002; MacPhail & Campbell, 2000; Makiwane, 1998; Varga & Makubalo, 1996; Vundule et al., 2001; Wood & Jewkes, 1997; Wood et al., 1998). One explanation for this disparity is that, given the demographics of this
sample, individuals in this community do not recognise themselves as being particularly vulnerable to HIV/AIDS. After all, HIV/AIDS research in South Africa focuses overwhelmingly on poor and non-white communities.

Nevertheless, parents now more than ever before are expected to talk to their adolescent children about sex. However, the expectation for parents to act as primary sexuality educators is problematic because it appears from participants’ descriptions of sexuality talk that mothers do not condone their adolescent daughters becoming sexually active. This is indicated by a central theme emerging from mother-daughter sexuality talk which is that while mothers undertake to talk to their adolescent daughters about sex, talk predominantly focuses on the ‘risks’ associated with sexual activity (extracts 33, 34, 37, 38). In other words, mothers do not talk about sex per se – there was no mention of the process of the activity or talk pertaining to desire or pleasure in sex. This points to talk on the process of sex as a taboo subject within this community, as well as indicating the limited acceptance of adolescent sexuality. These findings indicate that for mothers the object of the activity of mother-daughter talk on the topic of sex is to focus on the risks associated with becoming sexuality active, and the desired outcome of this talk is sexual abstinence rather than an education on sex.

Maternal restraint in sexuality talk indicated in the results of the study is partly accounted for by Kelly et al. (2001) who suggest that a primary function of parental engagement in sexuality talk with adolescent children is to uphold social and cultural values. The problem is that in so doing, mothers are forced to navigate their way through contradictory ideals. Mothers are expected simultaneously to provide their daughters with information that will protect them from the negative outcomes associated with adolescent sexuality, which arguably requires that they acknowledge their daughters as potentially sexual beings, while upholding social and cultural ideals that prohibit adolescent sexuality, as well as their own attitudes and values. Mothers’ focus on risks and abstinence as a means to avoid those risks appears therefore to be a strategy developed in response to the contradictions in this system. It also appears from the literature that this strategy is not limited to this social and cultural context. The avoidance of sexual initiation as a central theme in mother-daughter sexuality talk has been highlighted elsewhere (DiLorio et al., 1999; Dittus et al., 1999; Miller et al., 1998; Murray, 1994; Tucker, 1989; Young-Pistella & Bonati, 1998). A number of international researchers have gone so far as to argue that mothers utilize sexuality talk as a means to orientate their daughters to normative values and ideals, rather than as an opportunity to share
to share information that is really useful to sexually active adolescents, such as where to obtain contraceptives (Dittus et al., 1999; Jaccard et al., 1996; Nolin & Petersen, 1992; Rogers, 1999; Tucker, 1989). Results from this study certainly indicate that mothers' 'management' of contradictions in this system are skewed in the direction of communicating values and ideals, thereby supporting the suggestion made by those researchers.

Analysis of mother-daughter sexuality talk using Engeström's (1999) model of the activity system reveals tensions and contradictions mediating talk in that context. This is illustrated in Figure 5.

Figure 5. Factors mediating mothers' talk

In contemporary mother-daughter sexuality talk tensions and contradictions mediating mothers' talk occurred most notably between the various rules mediating activity in the system. These rules were related to inherent power differentials in parent-adolescent relationships, and the object and outcome of the activity, motivating the nature and scope of talk within the system.

As identified in the results of the study, a normative expectation of modern parents is to educate their adolescent children on issues pertaining to sex and sexuality. However, underlying this is an assumption that adolescents are potentially sexual beings, and it is indicated in the results of this study that parents are hesitant to acknowledge that. One reason why adolescent sexuality is
problematic for parents is that within this community sex is not normatively permitted to occur at a young age. In addition, protectionist discourses arise from the ‘problematisation’ of adolescent sexuality in the literature on the topic. In other words, parents have a duty to protect their adolescent daughters from the potentially harmful outcomes of engaging in sexual activity. While ‘protection’ could take various forms, participants in this study argued that their parents’ preference was for them to abstain from sexual activity until they were married. This highlights a tension between the object and the outcome of mother-daughter sexuality talk. While abstinence is not the only means to secure protection in sexual activity, in mother-daughter sexuality talk it is the preferred scenario and this may point to an ideological motive in mothers’ engagement in sexuality talk with their daughters, rather than a purely protectionist one.

4. Factors mediating daughters’ talk

Figure 6 (below) is a representation of the factors mediating adolescents’ talk about sex with mothers, from the perspective of contemporary adolescents. Compared with the active role played by mothers, participants’ descriptions of talk with their mothers revealed that female adolescents play a passive role within this communicative context, and this can be accounted for in the positioning of adolescents in the context of parent-adolescent sexuality talk.

![Diagram showing factors mediating daughters' talk](image)

Figure 6. Factors mediating daughters’ talk
In the literature review it was mentioned that adolescence is conceptualised as a transitional period from childhood to adulthood (Burman, 1994) and that this transitional phase often has the effect of confounding the type of behaviour that is considered to be appropriate for adolescents to engage in.

The results of this study indicate that this ambivalent positioning played a significant role in mediating mother-daughter sexuality talk. This is because within the context of mother-daughter sexuality talk adolescents are positioned simultaneously as adolescent, daughter, and child, and this arguably confounds the way in which mothers engage with their daughters on the issue of sex. For example, mothers’ acknowledgement of their adolescent child’s transition to adulthood is indicated by the fact that they engage in discussion on sex and sexuality issues – a domain that within this social and cultural context is normatively reserved for adulthood. It also indicates a concern to fulfil the parental role of sexuality educator that is expected of contemporary parents. However, participants accounts of their mothers’ agenda to focus on the negative outcomes of engaging in sexual activity also indicates that in many respects they still view their daughters as children who ought not to be engaging in sexual activity.

A number of consequences were associated with the positioning of adolescent as child in sexuality talk. Firstly, despite their mothers’ focus on the risk of unintended pregnancy and the need to avoid that, a number of adolescent participants said that they could not ask their mothers for contraceptives (extract 42). Adolescent participants explained that the problem with asking for contraceptives is that it indicates an intention to engage in sexual activity, and being positioned as a child within this communicative context means that the restriction of adolescents being “too young to be doing it” (extract 28) would apply to them. In Extract 28 participants referred directly to this rule pertaining to youth and sexuality.

Ambivalent positioning has the effect of confounding the sorts of rules associated with adolescence and sexuality. Contradictory rules within this communicative context simultaneously demanding that adolescents take responsibility for engaging in sexual activity while also denying them the opportunity to do so, was illustrated by an adolescent participant who summed up a discussion on contraception by saying that her mother had “discussed it but not really suggested it” (extract 42). Thus, from the results of this study it emerged that age is a significant factor mediating sexuality talk, although this dimension of youth and sexuality appears to be relatively neglected in the
literature. Some research on the affective component of parent-adolescent sexuality talk has sought to explore how the age of a child determines the sorts of sexuality related topics parents are comfortable to discuss (DiLorio et al., 1999; Geasler et al., 1995; Jaccard et al., 2000), but research in this area has not explicited the tensions around youth and sexuality per se.

Generally speaking, research investigating issues pertaining to adolescent sexuality, does so without problematising the age dimension of youth and sexuality – although it is alluded to in that adolescent sexuality tends to be problematised regardless of the outcomes associated with it, thereby indicating its limited acceptability – and critical engagement on this issue is required. As indicated in the results, information alone provides insufficient opportunity for adolescents to ‘protect’ themselves from the ‘risks’ associated with sexual activity when the context in which that behaviour occurs, does not enable them to practice particular forms of prevention, i.e. condom use.

Secondly, results of this study also indicate that constraints on parent-adolescent sexuality talk are not limited to talk on contraception. Participants of all ages said that they refrained from talking to their parents on issues that pertained to their own sexual experiences (32, 41), and none of the participants in this study spoke to a parent about their first sex experience at the time that it occurred. At one level this indicates that young women are aware of the limited acceptability of their sexuality which deters them from talking about their experiences. At another level however, it also serves to conceal the context in which some sexual initiation occurs.

It was stated that participants most often framed sexual initiation within the context of a relationship. However, from participants’ accounts of their debut experiences it emerged that half (n=4) of the interview participants’ first sex experiences involved forced or coercive sex. Participants explained that those experiences were very confusing for them. Some of the confusion confounding participants’ ability to interpret their experiences included the fact that in all cases the perpetrator was known to them, and for three of the four participants, the perpetrator was a boy of the same or similar age. These factors arguably make their experiences different from traditional conceptions of rape as something that is perpetrated by a stranger. The definition of normative rape provided by Russo et al. (2000) is identified in these accounts, as it appears that participants’ experiences of forced and coercive sex fit into this description of rape.
From participants’ accounts of their experiences it appeared that those experiences were very confusing for them. For example, in some instances participants said that they had initially interpreted the event to mean that they shared some kind of ‘connection’ with that person (refer to extracts 18 and 19). This interpretation can be explained against the backdrop of a traditional social and cultural framing of sex within this community as something that occurs within the context of a relationship. In line with this some participants said that they interpreted the experience as an indication of romantic intentions and thought that a relationship would follow from it.

However, sex is also normatively construed as consensual and it was this element that most confused the participants’ interpretations of the event. The issue of consent has been problematised in previous research conducted in South Africa (Varga & Makabalo, 1996; Wood & Jewkes, 1997; Wood et al., 1998). As mentioned in the literature review, among university students in the Western Cape, Shefer et al. (1998) found that non-consensual sexual intercourse within a relationship was not considered to be rape. This factor is illustrative of the way in which social and cultural constructs of sex mediate individuals’ abilities to articulate their experiences.

The most significant point pertaining to the finding that a large proportion of participants in this study had experienced forced or coercive sex is that, while those participants said that they would have liked to have been able to talk to a parent about the experience, none of them did. Participants said that they did not talk to a parent about their experience because they blamed themselves for what had transpired (extracts 16 and 17) and expected that their parents would do the same.

It is arguable that participants self-blame as well as fear of blame by others, is as a result of a myth within this community that victims provoke the assault (extract 15). The outcome of this is that it had the effect of silencing participants’ talk on those experiences.

In line with the forced or coercive first sex experiences of some of the interview participants, adolescent participants talked about their own experiences of coercion within ‘normal’ heterosexual relationships. In the process of talking about the normative expectation for young women to take responsibility for engaging in sexual activity in this community, focus group participants moved on to the issue of forced sex. In extract 15 participants explicitly compare the force of rape with the force of coercive sex within heterosexual relationships. Furthermore, it appeared from participants’ utterances (“come on everybody’s doing it why won’t you?”) that they were talking from personal experience, and that this was an experience with which a number of participants in the group could
readily identify. In contrast to the experiences of older participants, adolescents in one focus group discussion described forced/coercive sex as something they were experiencing as a normal part of their relationships. For this reason the researcher attempted to clarify the participants’ talk, as talk on two separate issues, rape on one hand and coercion on the other. In response to the researcher’s attempt to clarify these issues, a participant emphatically links coercion and rape ("we’re saying it’s like rape, rape’s like force") by explaining how rape and coercive sex are similar in that they both entail force. This raises the issue of negotiation at sexual debut, which has been highlighted in other South African studies exploring the context in which sexual initiation occurs (Jewkes et al., 2002; Jewkes et al., 2003; Kelly et al., 2001; Leclerc-Madlala, 2002; Ntabati et al., 2001; Shefer et al., 1998; Varga & Makabalo, 1996; Wood & Jewkes, 1997; Wood et al., 1998).

The issues of consent and negotiation arising from the results of this study brought into view additional contradictions in the activity of talk. On the one hand young women are being told to take responsibility for engaging in sexual activity, and yet the participants’ descriptions of those experiences reveal how gendered violence and coercion within some heterosexual relationships hinders young women’s ability to negotiate sex on their terms ("it’s something that you don’t really want to do"). This finding is consistent with the findings of a growing body of South African research pointing to gender inequality and violent or coercive sex as common elements of ‘normal’ heterosexual relationships (e.g. Dunkle et al., 2004; Jewkes et al., 2000; Leclerc-Madlala, 2002; Lesch & Kruger, 2004; loveLife, 2001; Varga & Makabalo, 1996; Wood & Foster, 1995; Wood & Jewkes, 1997; Wood et al., 1998).

Given the narratives of force and coercion in participants’ descriptions of their first sex experiences and contemporary adolescents’ experiences of coercion in their relationships, it is unfortunate that this issue does not feature in parent-adolescent sexuality talk. As mentioned earlier, the absence of discussion on sexual experiences is as a result of adolescents being positioned as children within the context of sexuality talk with parents. This has the effect of silencing the adolescents voicing of their own experiences, thereby negating any opportunity for them to access the support they need. Thus, within this context, it is argued that ‘risk’ could be conceptualised as the limited acceptance of adolescent sexuality because it has the effect of silencing adolescents talk about their experiences, which arguably plays a role in perpetuating the cycle of abuse.
5. Factors mediating peer talk

Analysis of different generations of peer sexuality talk revealed that the object of that talk was to share information, the outcome of which was to gain knowledge about sex. Participants who were adolescents in the late 1950’s and early 1960’s said that as a result of social and cultural sanctions on sexuality talk at that time, there was very limited opportunity to obtain any information on the topic. Within this context, the only opportunity to engage on the topic of sex was presented by peer interactions. An example of the way in which peer interaction facilitated information sharing was described by Ann in a game called ‘consequences’, which she recalled playing with friends at school (extract 24). It appears from Ann’s description of the game, that it facilitated information sharing about sex practices in a way that kept the identity of the writer anonymous. The fact that anonymity was a central tenet of the game indicates the limited acceptability of sexuality talk at that time.

In comparison, contemporary adolescents appeared to be more willing to share stories about their own sex experiences, indicating a trend in peer talk to include information about personal experiences (extract 28). It is arguable that this trend was facilitated by changing social and cultural attitudes towards sexuality stemming from the sexual revolution (extract 28).

However, in the process of conducting the focus group discussions it was observed that peer norms mediated peer talk, depending on the topic of discussion and the dominant attitudes of the members of the group. For example, a dominant opinion among participants in the Grade 12 focus group discussion was that young people should abstain from sexual activity. One effect of this was that a participant within the group who indicated that she had a sexual relationship with her boyfriend did not engage much in the conversation. The interviewer’s attempts to involve the participant in the discussion, was often met with short single word answers. In comparison, in the Grade 8 focus group discussion participants who were sexually active were more vocal than the other participants. This had the effect of positioning them as the dominant voices and participants who were sexually inexperienced were silenced. This points to a division of labour (Figure 7, over the page) in peer talk determined by dominant ideals or group norms. This finding is consistent with previous local and international research on peer influence, indicating the central role peers play in orientating adolescents to group norms (Forehand & Wierson, 1993; Kinsman et al., 1997; Ntlabati et al., 2001).
Participants in all age categories recalled engaging in some form of peer talk on the topic of sex, but a comparison of accounts revealed that in contrast to previous generations, contemporary adolescents access information about sex from a broad range of sources that include television, magazines, books, and school-based sexuality education (social and cultural artefacts).

The results indicate that adolescents' access to a broader range of sex related information is reflected in the scope of contemporary peer talk. Young adolescent participants, more than any of the other participants in this study, pushed the bounds of what was spoken about. For example, in the process of a focus group discussion 14 year old adolescents talked with peers about pornographic material that they had viewed, and about the sorts of sexual practices that are generally considered to be taboo -- beyond what is traditionally understood as 'normal' sexual conduct (see extract 23). A number of interesting factors about peer talk emerged from their discussion on pornography. Firstly, individuals in the group named and described various sexual practices to the other members of the group illustrating how young people use peer talk to learn about sex. Secondly, it appeared that in the context of peer talk adolescents were comfortable enough not only to talk about sex, but to talk about taboo themes pertaining to sex and sexuality. This adds weight to the suggestion of Ntlabati et al. (2001) that a lot of what adolescents learn prior to becoming sexually active comes from peers, and Rozema's (1986) finding that the communication climate among peers is less defensive than it is between parents and adolescents. Although as stated earlier, the latter may be mediated by the issues at hand and peers' attitudes pertaining to those issues.
Following from this, taboo themes in peer talk were not limited to talk on pornography or graphic descriptions of sexual practices. In one focus group discussion adolescents discussed issues pertaining to homosexuality (extracts 9 and 10). Participants' comments on homosexuality and lesbianism in particular in this discussion indicated that discriminatory attitudes towards homosexuals in broader South African society (Human Rights Watch, 2003), were reflected in peer talk. The group's discussion on the topic of homosexuality was initially very stereotyped and, given the significant impact of peer beliefs on young people's attitudes and behaviour (Forehand & Wierson, 1993), it is arguable that this might have had the effect of silencing individuals within the group who did not agree with the discriminatory views presented by the majority in the group, or those individuals who had had homosexual experiences themselves. From this it appears that peer talk is mediated by the dominant attitudes of the peer group.

In the literature review it was mentioned that homosexuality has been an historically marginalised area of research. In South Africa, perspectives on homosexuality in early psychological literature were extremely discriminatory in that homosexuality was initially conceptualised as pathological (Potgieter, 2003). For this reason it offers very little relevant insight for contemporary research, other than providing a critical reflection on the politics of knowledge production. Research conducted on adolescence and homosexuality in the U.S.A is undertaken within the context of HIV/AIDS, given that HIV/AIDS in the U.S.A is most prevalent among marginalised groups, and this includes male homosexuals. In South Africa HIV/AIDS has been conceptualised as a predominantly heterosexual disease, and along with the limited acceptance of homosexuality in South African society (Human Rights Watch, 2003), has resulted in a complete absence of research focus on sexuality issues as they pertain to gay and lesbian youth in South Africa. Following from this, it was not surprising that homosexuality was not identified as a topic in parent-adolescent talk among participants in this study. It is however interesting that homosexuality emerged as an issue in peer talk because it indicates a greater flexibility in this activity system to assimilate change and the challenges presented by contemporary issues that, to some degree, usurp the status quo.

Discussion of homosexuality in the focus group was prompted by an article on lesbianism that featured in a women's magazine, which illustrates how contemporary adolescents' access to a broad range of media mediates the topic and scope of peer talk. In the light of this it is arguable that peer talk provides a platform for adolescents to talk about issues pertaining to sex and sexuality that they are exposed to through the media.
Adolescents’ discussion on homosexuality yielded additional results for this study. Firstly, in contrast to stereotypical attitudes initially espoused by individuals in the group, at a later stage of the focus group discussion those same individuals spoke about how they value their friendships with gay friends. This change in tack was interesting because it made it appear as if contradictions within the activity of peer talk are accommodated more easily than in parent-adolescent talk. In other words, among peers, talk on homosexuality was not completely silenced, and in addition, young people appeared to be able to incorporate knowledge from their own experiences with gay men, even when they simultaneously held homophobic views. This indicates that young peoples’ internalisation of dominant cultural stereotypes is not straightforward, but, on the contrary, is characterised by resistance and contestation. Resistance and contestation are central features of activity theory, which Engeström argues are necessary for the activity to develop and change. This feature highlights the dynamics of peer talk.

Secondly, apart from being an irrational bias toward gay and lesbian people, homophobia brings into view critical issues pertaining to masculinity and heterosexuality, and some of those issues relate to the findings of this study. In most societies gender is rigidly defined as male and female, and an underlying assumption of this belief is that binary gender identities are ‘natural’ – men are masculine and women are feminine. Homosexuality disrupts this conceptualisation of gender, as indicated by the stereotypical depictions of homosexual women as masculine and homosexual men as feminine (homosexuals who do not fit these stereotypes are often assumed to be heterosexual). This usurps sexual orientation hegemony – for a man to be called gay is insulting, arguably because gay men are stereotypically conceived of as being ‘feminine’ and, given the lower status afforded to women in society, for a man to be associated with feminine attributes, is degrading.

Following from this, in order to understand why female participants should feel threatened by the idea of homosexuality, it is arguable that an account of women’s investment and role in the reproduction of hegemonic masculinity is required. In the literature review it was stated that heterosex, and correspondingly, male domination and female submission is an important feature of hegemonic masculinity. Within this context, queer theorists (e.g. Blumenfield, 1992) suggest that homophobia is a means by which rigidly defined gender roles can be maintained. This supports a heterosexual ideal and, in turn, hegemonic masculinity.
From the findings of this study, homophobia and the normalisation of coercive heterosexual relations in participants' narratives indicate that women do play a role in perpetuating hegemonic masculinity. However, while the costs to women are apparent, in terms of their experiences of coercive/violent sex as well as the challenges it presents to women who want to negotiate safer sex practices, it is not clear from the results of this study what benefit women derive from it. The issue of women's participation in the perpetuation of hegemonic masculinity has been identified in the findings of other South African research (Shefer et al., 1998), although the issue remains under-explored. There is however, mounting evidence from South African research which increasingly problematises heterosex as a risk factor in women's health indicates that this is an area of inquiry that deserves more attention (Campbell et al., 1998; Human Rights Watch, 1995; Jewkes et al., 2003; Jewkes et al., 2000; Shefer et al., 1998; Varga & Makabalo, 1996; Wood & Foster, 1995; Wood & Jewkes, 1997; Wood et al., 1998). Insight into women's investments in the perpetuation of their own subordination may also shed some light on the silences around coercive and forced sex experiences as well as the lack of parental, and indeed, broader social and cultural engagement on that issue.

6. Parent and peer talk: different activities

In Activity Theory a community is defined as a group of people who share the same point of view, and whose actions are directed toward the same goal(s) (Engeström, 1987). However, a comparison of parent and peer talk reveals that the object of those activity systems, and thus the motive for peers and parents to engage in sexuality talk, differs.

The results show that, in parent-adolescent sexuality talk, parents aim to uphold social and cultural ideals, and are centrally concerned with regulating adolescents' sexual activity, rather than imparting information that is really useful to sexually active adolescents. Within this context, adolescent sexuality receives limited social acceptance and this diminishes adolescents' authority to speak on the topic, particularly when it involves talking to a parent about personal sexual experiences. Thus, in contrast to the finding of Ntlabati et al (2001), while the topic of sex may not be considered completely taboo in this social and cultural context, adolescent sexuality certainly enjoys very little social and cultural acceptance, and this reflects in the nature and scope of parent-adolescent sexuality talk.
In contrast, peer talk involves the exchange of information as a means to learn about sex. Peer talk provides a platform upon which information is presented, and very often contested. Unlike parent-adolescent sexuality talk, peer talk can be more equitable because peers enjoy similar status compared with the power differential inherent in parent-adolescent relationship. This is supported by the results of this study which identified peer talk as being more amenable to contradiction and contestation.

While the finding that parent and peer talk on the topic of sex are two different and distinct activities is fairly obvious, it does problematise parent-adolescent discussions about sex. Within the context of parent-adolescent sexuality talk parents and adolescents belong to two separate and distinct communities with divergent views, and therefore do not share the same motivation for engaging in sexuality talk, nor in the outcome of that talk.

Figure 7 (below) represents parent-adolescent and peer talk as two separate systems of activity on the basis that their objects are not shared.

This does not mean that peer talk and parent-adolescent talk do not share common elements. Normative values and ideals espoused in parent-adolescent sexuality talk such as the framing of sex within the context of marriage, also featured in peer talk. Cultural artefacts such as the media featured significantly in both systems of activity, and at times the object in both systems of activity was abstinence. In addition, power differentials were not limited to parent-adolescent sexuality talk. Normative orientations established during peer discussions had the effect of silencing individuals within the group who did not conform to those ideals. However, despite these similarities, peer talk was the context in which participants felt most comfortable to discuss their own and others experiences, and the object of engaging in that activity was to learn more about the practice of sex rather than the negation of their sexuality.
7. Summary

A brief summary of the main themes arising from results are:

1. While participants overwhelmingly framed the initiation of sex with the context of a relationship, analysis of adolescents’ discussions with parents revealed that adolescents do not discuss issues pertaining to relationships and their emerging sexuality with their parents.

2. The limited acceptance of adolescent sexuality within this community was identified as a central factor preventing young people from engaging with parents on issues pertaining to their own sexual experiences.

3. Analysis of peer talk reveals that adolescents engage in talk on the topic of sex with a view to learning more about the practice of sex, and that more equitable peer relations facilitate talk within this context.

4. Parents and adolescents engage in sexuality talk for different reasons and this presents a problem in the context of parent-adolescent sexuality talk where parents and adolescents are expected to value the same outcome.

5. Analysis of parent-adolescent talk on the topic of sex reveals that those discussions are orchestrated by mothers with a view to regulating their daughters’ behaviour.

6. Across all age groups, participants’ descriptions of their debut experiences often included narratives of coercive/violent sex.
CHAPTER FIVE

1. Concluding remarks

The gap between knowledge and behaviour was illustrated by participants' mothers' continued focus on the reproductive paradigm (the risk of pregnancy and the need to avoid that). An underlying assumption of the reproductive paradigm is that pregnancy is the only real risk associated with unprotected sex, and that safe sex means using contraceptives or abstaining from sex (the preferred measure). In relation to this, some young participants believed that it was unnecessary to use a condom in a trusting relationship. This is based on the assumption that within the context of a relationship, individuals' would abandon condoms in favour or oral contraceptives as a means to avoid pregnancy. This undoubtedly puts individuals at risk for sexually transmitted diseases such as HIV.

In addition, in a community where adolescent sexuality is afforded little acceptance, sexuality talk with adults and parents in particular, is difficult. The results showed that where mother-daughter sexuality talk did occur (indicated most often by participants aged 35 years and younger), female adolescents spoke to their mothers on issues such as pregnancy and contraception. Issues that young women said they could not discuss with their mothers pertained to their own sexual experiences – which often included incidences of violence and coercion.

It is therefore argued, that mother-daughter sexuality talk lacks relevance. This is as a result of mothers' emphasis on reproduction and the narrow interpretation of 'safe' sex, to the exclusion of discussion on issues pertaining to intimate relationships, such as feelings, or of women's own sexual pleasure. It is further argued that the continued focus on reproduction negates gendered power and decision making in heterosexual relationships.
2. Recommendations

The issues mentioned here point to a need in psychological research to acknowledge female desire as a normative aspect of female adolescent development. In other words, female adolescent sexuality ought not to be constructed as necessarily problematic. In participants' narratives of their debut experiences, participants did not talk about their experiences as being prompted by their own desire. It is argued that an acknowledgement of sexual desire, as a normal part of female adolescent development, is especially important in South African communities so that women can develop a sense of entitlement and empowerment in intimate relationships.

Heterosexuality also needs to be redefined in a way that makes the practices associated with it more equitable, and which will allow women a platform to negotiate sex on their terms. Instead of focusing on abstinence and safe sex alone, parents should aim to facilitate the development of healthy sexuality among young women. This would require a shift in attitude in this community towards a more accepting attitude towards adolescent sexuality, and female sexuality in particular.

In closing, young women need more opportunity to talk about sex and sexuality, and on issues that concern them most, namely, intimate relationships. While the absence of discussion on these issues is largely attributed to the reproductive paradigm, others factors which make talk about sex problematic include the precarious status of youth (particularly in relation to sexuality) as well as dominant constructs of heterosexuality. This undoubtedly requires a critical analysis of broader social and cultural practices and beliefs that perpetuate gendered inequality.

3. Limitations of the study

Context

This study was conducted within a particular social and cultural context with a small number of participants (n=21), and used qualitative methodologies to elucidate which social and cultural factors mediate talk within this context. As a result, findings from this study are not generalizable to the broader population. However, the findings may highlight issues that are relevant in similar social
and cultural contexts. Transferability of results would require further investigation in similar communities.

On the issue of transferability, it was noted in the methodology section that the ethnicity of two participants in the Grade 8 focus group discussion was ‘coloured’, and not ‘white’. From those individuals comments in the focus group discussion it appeared that they held more conservative attitudes towards sex than their ‘white’ peers. While this observation does not provide sufficient evidence upon which to draw any conclusions, it does indicate the limitations of transferring results across contexts.

Participants

This study was conducted with female participants, which means that various issues pertaining to men were not taken into account. Reasons for not including men in this study were elaborated upon in chapter two, and relate to the feminist approach to the topic, as well as issues pertaining to gender dynamics in interviewing.

Methodology

Focus group discussions conducted with adolescent participants yielded rich data on the dynamics in peer talk by facilitating access to the way in which young people talked about sex. In contrast, personal interviews were conducted with adult participants and while they facilitated in-depth discussions on very personal topics, they did not facilitate an observation of the dynamics of talking about sex in the same way as the focus group discussions did. Interviews with adult participants involved reminiscing about past experiences and were therefore not conducive to explicating the dynamics of talk interaction between individuals, and on particular issues.
Focus

The focus on adolescent sexuality talk with parents and peers was informed by literature on the topic of adolescence and sexuality which overwhelmingly identified peers and parents as the primarily agents in adolescents' sexual socialisation, and the people with whom adolescent most often engage on the topic of sex. This means that the study did not take into account communication with other individuals. In addition, as the study was concerned with talk interaction, the influence of mass media was not taken into account, yet the results of this study do indicate that the mass media exposes young people to a broad range of issues that they might otherwise not be exposed to in interpersonal discussions about sex. One example of this was the way in which the article on lesbianism prompted talk on the issue of homosexuality in the Grade 8 focus group discussion. This indicates an area of research in South Africa that requires more attention.

The limitations notwithstanding, Wyatt (1994) argues that research which seeks to contextualise human sexual behaviour is important because it helps us to understand how race, culture, poverty or gender are linked to decision making that continues to compromise the sex related health of particular populations. In line with this, my study sought to contextualise talk on the topic of sex, and in the process to elucidate social and cultural factors mediating that talk. This facilitated engagement on contemporary issues pertaining to women’s health, and a response to the call for public debate on issues pertaining to sex and sexuality. The urgency for public debate on these issues was mentioned in the opening address of the 13th International AIDS conference held in Durban, South Africa:

There has been a definite shift in the international public and political rhetoric on HIV/AIDS over the last two years. The dominant discourse now reflects an increased acknowledgement of the role that gender plays in fuelling the epidemic. Unfortunately, aside from a few exceptions, such public discourse on sex and sexuality is still invisible. There is an urgent need to break that silence because we know that talking openly about sex is the first step to reducing denial and bringing about acceptance of our collective vulnerability.


XIIIth International AIDS Conference

101
REFERENCES


Leclerc-Madlala, S. (2002). *Youth, HIV/ADS and the importance of sexual culture and context* (No.9, CSSR working paper). Cape Town: University of Cape Town, Centre for Social Science Research, Aids and Society Research Unit.


APPENDIX A: INTERVIEW SCHEDULE 1
(for Participants aged 18-60 years)

Interview One

➤ Introductions

➤ Scope of the project: adolescents / sexuality talk / knowledge of sex / first sex experience

➤ Ethics protocol: anonymous, confidential, informed consent.
  *Participation is voluntary, names and all identifying information is withheld, sensitive nature of the research i.e. very personal questions, importance of participating in the research (giving voice to these experiences)*

➤ Research methodology: explanation about the interview
  *Series interviewing, time/length of interview, what an open-ended interview is, no right or wrong answers, modelled on a conversation, the need to record the interview, transcription process and use of codes.*

➤ Any questions / concerns?
  *Opportunity for participant to raise concerns about any aspect of the interview / research aim or to ask for additional information*

➤ Sign consent form

Opening question: I would like you to tell me a story about your first knowledge of sex...

Areas to explore:

1. What prompted the discussion?
2. Who prompted the discussion?
3. Where did the discussion take place?
4. How old were you?
5. Who did you talk to?
6. What information were you given?
7. How comfortable was it for you to discuss sex with this person?

Closing question: *Is there anything that you think needs to be mentioned that was not covered in this discussion?*
APPENDIX B: INTERVIEW SCHEDULE 2
(for Participants aged 18-60 years)

Interview Two

- Ask if the participant has any questions she’d like to ask about the research.
- Ask if there was anything she thought about after the first interview that she would like to mention now.
- Remind participant that the research is anonymous & confidential.
- Research methodology: remind the participant that the second interview is like the first interview in so far as they should tell me a story about their experiences, and that we can talk about it as in conversation like the first interview.

Opening question: I would like you to tell me a story about your first sexual experience ...

Areas to explore:

1. Age
2. Relationship to partner
3. Partner’s age
4. Where this took place
5. Was it arranged – did it involve any planning?
6. What did this experience mean to the participant, at that time/now?
7. Did the relationship continue after that?
8. Did this experience any affect on subsequent relationships?
9. Did she tell anyone about this experience – why/why not
   - Who
   - Why this person
   - What was the experience of talking to this person

10. Would you have wanted it to be any different, if so how?

11. Reflection: What does it feel like to be talking about intimate experiences in this interview?
   - What makes it easier/more difficult to talk?

12. Closing question: Is there anything that you think needs to be mentioned that was not covered in this discussion?
APPENDIX C: SCHEDULE FOR FOCUS GROUP DISCUSSION
(for Participants aged 14-18 years)

➢ Introductions
➢ Scope of the project: adolescents / sexuality talk / knowledge of sex
➢ Ethics protocol: anonymous, confidential, informed consent.

*Participation is voluntary, names and all identifying information is withheld. Sensitive nature of the research topic, do not have to talk about anything they do not want to talk about*

➢ Research methodology: explanation about the interview

*Series interviewing, time/length of interview, what an open-ended interview is, no right or wrong answers, modelled on a conversation, the need to record the interview, transcription process and use of codes.*

➢ Any questions / concerns?

*Opportunity for participant to raise concerns about any aspect of the interview / research aim or to ask for additional information*

➢ Sign consent form

---

1. Opening question, who do you live with?
2. What are the important things that your parents have taught you?
3. When it comes to talk about sex, who at home do you talk to the most – why this person?
4. On the topic of sex, what kinds of things are (a) easiest to talk with parents about? (b) more difficult to talk to parents about?
5. Describe an incident/issues/experience that was difficult to talk with parents about?
6. Who would you prefer to discuss these issues with? – why this person?
APPENDIX D: Transcript Conventions (Silverman, 2000)

[ ] Left brackets indicate the point at which a current speakers talk is overlapped by another’s talk

= An equal sign at the end of the line and one at the beginning of the next indicate no gap or pause in conversation between the two speakers

(.2) The number in brackets indicates elapsed time in silence in tenths of seconds

(.) Indicates tiny gap in conversation, no more that one tenth of a second

–– Underlining indicates stress via pitch or tone

: Indicate prolongation of the immediately prior sound, number of colons is indicative of the length of the prolongation

CAP Caps lock indicates especially loud sounds in relation to the other talk

.hh Indicates out breath, number of h’s are indicative of the length

(word) Possible hearings

( ) Transcribers inability to hear the word that was said

((italics)) Indicates participants displayed emotion
Dear parents,

UNIVERSITY OF KWAZULU-NATAL SCHOOL OF PSYCHOLOGY RESEARCH

Your daughter has expressed a willingness to participate in a focus group discussion being carried out by Jacqueline Marx, a Masters Student in the School of Psychology at the University of KwaZulu-Natal.

The topic of the research is adolescents' everyday talk on sexuality. It is hoped that research of this nature will assist in the future development of relevant Life Skills programmes in our schools.

Information will be kept confidential and girls will not be identified in any way. Should you agree to sign the consent form, a date and time will be arranged at school.

Please contact me if you wish to discuss this matter. Alternatively you may contact Ms Marx at the number supplied on the consent form.

Thank you

Yours sincerely

______________________________  ________________________________
School Counsellor               Acting Principal
APPENDIX F: PARENT CONSENT FORM

I give consent for my daughter _______________ to participate in this research.

I understand that participation is entirely voluntary and that I can withdraw my consent at any time.

The following points have been explained to me:

1. The topic of the research is talk on the subject of sex.

2. Participation is limited to one focus group discussion. The discussion will take approximately forty-five minutes to complete.

3. No discomfort or stress is foreseen in the participation process however, as sex can be a sensitive topic to talk about, the participant reserves the right not to answer any question she does not want to answer.

4. Participation in this research will be completely confidential, and will not be released in any identifiable form.

5. The researcher will answer any further questions about this research now or at any time during the course of the project.

______________________________  ________________________________
Signature of parent or guardian   Date

______________________________  ________________________________
Signature of Researcher          Date
APPENDIX G: FOCUS GROUP PARTICIPANTS CONSENT FORM

I, ________________________________, agree to participate in this research. My parent(s)/guardian have given their consent for you to talk to me. However, I can choose not to talk with you.

I understand that you want to know how young people talk about sex with different people such as their family and friends.

I understand that I will be taking part in a discussion with other young people, and that the discussion will take about 45 minutes.

I understand that I do not have to talk to you if I don’t want to and I don’t have to answer any questions you ask me if I don’t want to. It is also OK to stop talking whenever I want. If I want to stop taking part in the discussion, or just not answer a question, I’ll tell you. I won’t get into any trouble for choosing not to answer a question or finish the discussion.

By taking part in the discussion I will be teaching you more about the way in which young people talk about sex with their families and friends. If anything we talk about today upsets me, I will let you know.

I understand that you will be using number codes instead of names for this project, so that my answers are confidential. That means that no one will know where this specific information came from - they won’t be able to connect it to me. That way, I can tell you whatever I want, and no one will know it came from me.

No one should know who the other group members are. I will keep the names of the other group members a secret. I promise not to tell people outside the group what people in the group said.

If I have any questions about this study the researcher can answer my questions now, or during the course of the project.

Signature of Participant  Date

Signature of Researcher  Date

Jacqueline Marx, Telephone 0734345385, or contact me via e-mail jacquimarx@yahoo.co.uk
Dear Participant,

Your participation is invited for the purpose of research. The topic of this research focuses on talk on the subject of sex and sex related issues. This research is being conducted by Jacqueline Marx who is a student at the University of KwaZulu-Natal (PMB).

Your participation in this research is entirely voluntary.

Participation is limited to a series of three interviews which will be conducted over a period of time (approximately six weeks). Each interview will take approximately thirty minutes to complete. The interviews will take the form of a conversation between you and the researcher.

Although no discomfort or stress is foreseen in the participation process, sex can be a sensitive subject to talk about. In the light of this, you reserve the right not to answer any question that you not want to answer. In addition, you can stop participating at any time.

You will not be remunerated. Indirect benefits can be obtained from personal reflection that occurs in the process of participation.

Your participation will be kept anonymous. While it is necessary to tape record the interviews for the purposes of analysis, personal information such as your name and any other identifying information will be omitted (or changed) from the transcript. The interview tapes will be destroyed once they have been transcribed. The transcripts will be kept on record in a secure file. The data will be open to the perusal of the research supervisor, and the completed dissertation will be examined by two other persons who are nominated by the university.

The researcher will answer any further questions about the research, now or at any time during the course of the project.

________________________________________  ______________________________
Signature of researcher                          Date

Jacqueline Marx, Telephone: 0734345385, or contact me via e-mail jacquimarx@yahoo.co.uk

PLEASE KEEP THIS FORM
APPENDIX I: INTERVIEW PARTICIPANTS CONSENT FORM

I, ______________________________________, agree to participate in this research. I understand that my participation is entirely voluntary and that I can withdraw my consent at any time.

The following points have been explained to me:

1. The topic of the research is sexuality discourse.

2. Participation is limited to a series of three interviews which will be conducted over a period of time (approximately six weeks). Each interview will take approximately thirty minutes to complete.

3. No discomfort or stress is foreseen in the participation process, however, as sex can be a sensitive subject to talk about, the participant reserves the right not to answer any question that she does not want to answer.

4. Participation in this research will be completely confidential, and will not be released in any individually identifiable form, unless required by law.

5. The researcher will answer any further questions about the research, now or during the course of the project.

_________________________________________              ______________
Signature of Research Participant                      Date

_________________________________________              ______________
Signature of Researcher                               Date

Jacqueline Marx, Telephone: 0734345385, or contact me via e-mail jacquimarx@yahoo.co.uk