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**University of KwaZulu-Natal female students' perceptions of female
sexuality and influence on sexual behaviour and HIV and AIDS
prevention**

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Declaration

I Tamanda Chipo Masambuka (student number 218084049) hereby declare that the work presented in this dissertation is my original work. In instances where another person's work has been utilised, that has been appropriately referenced and acknowledged. This dissertation was submitted at the Centre for Communication, Media and Society, the University of KwaZulu-Natal under the supervision of Professor Eliza Govender. Other than that, this work has not been submitted to any other institution.

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ABSTRACT

Young women in South Africa are four times fold infected and predisposed to HIV and Aids as compared to young men as well as women of other age groups. An area that has been highlighted as crucial in understanding the disparities and possibly providing insights on addressing the impact of the pandemic on young women is female sexuality. An understanding on female sexuality specifically contextual definitions, expectations associated with it and behaviours thereof, provides insights on parameters in which young women make sexual choices and decisions and implications on sexual behaviour and HIV and AIDS prevention choices.

This paper explored how young women at the University of KwaZulu-Natal, located in what is recognised as the hotspot for HIV and AIDS in South Africa perceive and understand female sexuality within the university context however with a backdrop of their wider culture. The paper investigated the impact of the perceptions on young women's sexual behaviour and implication on choices and decisions young women make in line with HIV and AIDS prevention. To achieve its set objectives, the paper mobilised Culture –centred approach and empowerment theory to offer a theoretical lens from which the topic was grounded, approached and interrogated.

Using a qualitative approach to research, involving the use of a bodymapping exercise together with individual semi-structured interviews, data was collected involving eight female students of Zulu origin at Howard College campus, a constitute college of University of Kwazulu-Natal. Key findings of the study revealed that young women at the University of KwaZulu-Natal are faced with two main contrasting notions of female sexuality i.e. from the university and the community from where they draw perceptions on female sexuality. University notions of female sexuality were indicated to predominantly define sexuality in line with sexual freedom, independence while community notions were slanted towards sexual chastity, naivety and silence. The young women in the study suggested to be impacted by both contexts, choosing what to embrace or not based on personal reasons. In line with the impact of the perceptions on sexual choices, varying impacts were noted from one participant to another nevertheless, a majority of the participants exemplified being in control and empowered to make and enforce sexual choices and decisions in line with personal interests and agendas. In the same light, the participants exhibited an awareness and agency to make personal and empowered choices in relation to HIV and AIDS prevention for them and partners for instance condom use and HIV testing. Nevertheless, the study highlighted complacency as a stumbling block to making and enforcing HIV and AIDS prevention choices in the long run for instance continuous condom use, making them susceptible to HIV and AIDS infections. The study highlighted the need for narratives to normalise continuous condom usage as well as regular HIV testing for young women even in long term stable relationships to ensure protection for HIV and AIDS for young women.

Key words: young women, female sexuality, sexual behaviour, HIV and AIDS prevention, Culture.

ACRONYMS AND ABBREVIATIONS

AGYW	Adolescent Girls and Young Women
AIDS	Acquired Immunodeficiency Syndrome
CCA	Culture-Centred approach
CCMS	Centre for Communication, Media and Society
COVID-19	Corona Virus Disease
HIV	Human immune virus
HC	Howard College
IE	Individual Empowerment
PAR	Participatory Action Research
UKZN	University of KwaZulu-Natal
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
WHO	World Health Organization
UKZN	University of Kwazulu-Natal

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CHAPTER ONE: INTRODUCTION

Introduction and background

Four decades have passed since HIV/AIDS was first recognised as a key health problem in South Africa, yet the pandemic continues to be a major public health concern. Despite numerous efforts from the government and private sector to curb the pandemic, HIV and AIDS continue to be widespread in South Africa; destabilising individuals, families, communities and the nation at large. The number of persons living with HIV and AIDS increased from an estimated 4.25 in 2002 to 7.2 million in 2017, by far the highest jump globally (Stats SA, 2018). In 2017, up to 270,000 new infections were reported, accounting for a third of new infections in sub-Saharan Africa (UNAIDS, 2018). During the same year, an estimated 110,000 South African's died of AIDS related illnesses, one of the highest death rates triggered by the epidemic in the region (UNAIDS, 2018). Due to the increased number of deaths and infections, South Africa was declared the epicentre of HIV and AIDS pandemic in Sub-Saharan Africa and globally (UNAIDS, 2018).

Gender wise, women in South Africa bear the heaviest brunt of HIV and AIDS. Largely, women in South Africa are more affected and infected with HIV and AIDS ranking high in prevalence and new infections alike (Odhiambo, 2012; Abdool Karim Q, Baxter and Bix, 2017). As an example, women accounted for an estimated two-thirds of the 270,000 new HIV infections registered in 2016 in South Africa (Klaas, Thupayagale- Tshweneagae and Makua, 2018). Additionally, approximately 4.2 million women were living with HIV and AIDS in South Africa in 2017 compared to an estimated 3.0 million recorded among men the same year (UNAIDS 2018). The above staggering figures and discrepancies point at the burden and difficulties that HIV and AIDS inflict on the lives of women in South Africa.

An aspect further unsettling about HIV and AIDS infections and prevalence among women in South Africa is its disproportionate concentration in young women especially between the ages of 15 to 24 (Ramjee and Daniels, 2013; Dellar, Waxman and Abdool Karim, 2015). HIV and AIDS prevalence and incidences among young women in South Africa are four times greater than among male peers of the same age group (Harrison *et al.*, 2015; Abdool Karim, 2015; Klaas *et al.*, 2018). It has been pointed out that "Incidence of new HIV infections differs sharply by gender: 2.5% in 15–24-year-old women versus 0.6% in men of same age group" (Ranganathan *et al.*, 2016: 1). Additionally, this demographic group has been documented to contract HIV and AIDS 5 to 7 years earlier compared to young men of the same age group (Kharsany and Karim, 2016).

The situation is even more alarming among young women in the province of KwaZulu-Natal recognised as the epicentre of the HIV and AIDS epidemic in South Africa (KwaZulu-Natal Office of the Premier HIV/AIDS Directorate, 2017). In the year 2016, Kwazulu-Natal registered 64,600 new cases of HIV/AIDS infections, with young people accounting for 54% of the new infections. It was documented, young women between the ages 15 to 24 accounted for 70% of the new infections in young people (KwaZulu-Natal Office of the Premier HIV/AIDS Directorate, 2017). It should further be pointed out that many of the incidence rates are registered among young South African women of black origin compared to any other race (Maughan-Brown *et al.*, 2018).

The disparity among others suggests lack of adequate knowledge and understanding on the context and parameters within which young black South African women make sexual decisions and behaviours specifically in line with HIV and AIDS prevention leading to failure

to implement appropriate interventions to meet and address young women sexual and reproductive needs (Reddy and Frantz, 2012; Dellar *et al.*, 2015; Abdool Karim *et al.*, 2017; Klaas *et al.*, 2018; Maughan-Brown *et al.*, 2018). There is therefore an urgent need for increased research on various spheres of young women's life specifically those bearing direct implications on sexual lives, experiences and behaviours (Kharsany and Karim, 2016). HIV and AIDS being largely a sexually transmitted infection, an area that has been highlighted as crucial, requiring more interrogation and context-based research is sexuality among young South African women, specifically black women, who are the most infected (Gibbs, 2010; Parker and Aggleton, 2018).

Sexuality, according to the World Health Organisation (WHO) refers to

A central aspect of being human throughout life which encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. (WHO, 2006: 5).

A critical look at the definition provided by World Health Organisation reveals an emphasis on the generic nature of sexuality without providing specifications for instance in relation to actual beliefs or behaviours encompassed. That is by design and not error as sexuality is a complex aspect of life, multifaceted and heterogeneous (DeLameter and Hyde, 1998; Tolman and Diamond, 2001; Uwah and Wright, 2011). Sexuality varies from one group of people to another, and even within a group variation may occur from one person to another (Moore and Rosenthal, 1997; MacPhail and Catherine, 2001; Arnfred, 2004). The above definition further caters for the extensiveness of sexuality recognising not only apparent aspects of sexuality for instance sex but also intricate complex aspects such as beliefs, attitudes and values (Parker, 2001; Tamale, 2011). It is important to explore and interrogate intricate aspects of sexuality like attitudes and beliefs as they are the core of one's sexuality, feeding into sexual behaviours and relationships. The multidimensional, heterogeneous and complexity nature of sexuality as defined by WHO, highlights the urgent need for more research on sexuality to foster the generation of knowledge and further the understanding of the phenomena. New knowledge and understanding of sexuality among young women are fundamental in addressing sexually oriented societal ills for instance high HIV and AIDS incidences among young women in South Africa (Parker and Aggleton, 1999; Rao Gupta, 2000; Shefer and foster, 2001).

Research on sexuality normally tilts towards two major approaches in theorisation and inquiry namely biological and Social. The biological standpoint is tilted towards the pre-eminence and central role of natural forces i.e. genes, hormones etc in determining sexuality (Tolman and Desmond, 2001). Sexuality including sexual beliefs, values and behaviour is assumed to be a result of individual attributes residing in one's core (Vance, 1989; DeLameter and Hyde, 1998). Among others, a biological conceptualisation of sexuality suggests one sexual beliefs, values and behaviours are more likely to be constant throughout life, unless in cases of natural changes (Tolman and Desmond, 2001).

The social point of view holds divergent assumptions. The social approach conceptualises sexuality as predominantly a product of external factors in one's immediate surroundings most importantly culture (Parker and Aggleton, 1999; Rao Gupta, 2000; Shefer and foster, 2001). It argues sexuality is a result of beliefs, values and practices pertaining to sexuality dominant in one's culture (Uwah and Wright, 2011). An individual is not necessarily born with beliefs or attitudes on sex, who to have sex with, how and for what purposes etc (MacPhail and Catherine, 2001; Weiss, Whelan and Rao Gupta: 2000). That is rather determined by a negotiation with discourses on sexuality in one's context presented during the socialisation process (MacPhail and Catherine, 2001). It entails sexuality is fluid, subject to changes over time and varies from group to group (Tamale; 2011). It is within the Social standpoint of sexuality specifically leaning towards the predominance of culture as a

socialisation agent, this paper is located. The paper argues that a thorough understanding of sexuality of an individual or group of people and implications on sexually health related ills, demands an engagement and examination of the people in consideration of values, customs, beliefs and practices in line with culture and overall context (Parker, 2001; Tamale, 2011) The paper henceforth leans towards a cultural lens on sexuality within the social standpoint on sexuality.

Factors contributing to young women's vulnerability to HIV and AIDS in South Africa

Studies on young women in South Africa highlights four factors namely biological, economical, gender and cultural as key in exacerbating high incidences of HIV and AIDS among young women (Harrison *et al.*, 2015; Dellar *et al.*, 2015; Abdool Karim *et al.*, 2017). Biologically, research highlights women's anatomy and histology as culprits in heightened HIV and AIDS incidences among women in general, contributing to two times the likelihood of infection at a single sexual encounter (Abdool Karim, 2015; Dellar *et al.*, 2015). A woman's vagina has a larger mucosal exposed surface area compared to a man's penis. Young women's anatomy is even more complex. Dellar *et al.*, (2015) postulates an immature cervix, more prevalent in adolescent girls and young women, makes a greater proportion of mucus prone to HIV and AIDS infections. Additionally, young women's genital parts are prone to inflammation upon early sexual debut, increasing chances of infections (Abdool Karim *et al.*, 2017).

Economically, research documents young women especially from poor social economic backgrounds as more vulnerable to HIV and AIDS infections (Dellar *et al.*, 2015). Young women from economically deprived communities and backgrounds, a prevalent situation in South Africa, are more likely to have less access to formal education, leading to decreased levels of knowledge in relation to HIV and AIDS transmission and prevention thereby increasing their vulnerability. Secondly, studies document that young women from poor backgrounds are more likely to be driven to engage in risky sexual behaviours in exchange of money or gifts for survival purposes or simply to elevate social status (Dellar *et al.*, 2015; Nota, 2016; Ranganathan *et al.*, 2016). More often young women engage in sexual relationships with older men who have money to support them and finance their lifestyles (Ranganathan *et al.*, 2016; Khazan, 2018). Evidence suggests a high HIV and AIDS prevalence in older men than in adolescent boys, making young women in such relationships susceptible to HIV and AIDS infections (Ranganathan *et al.*, 2015).

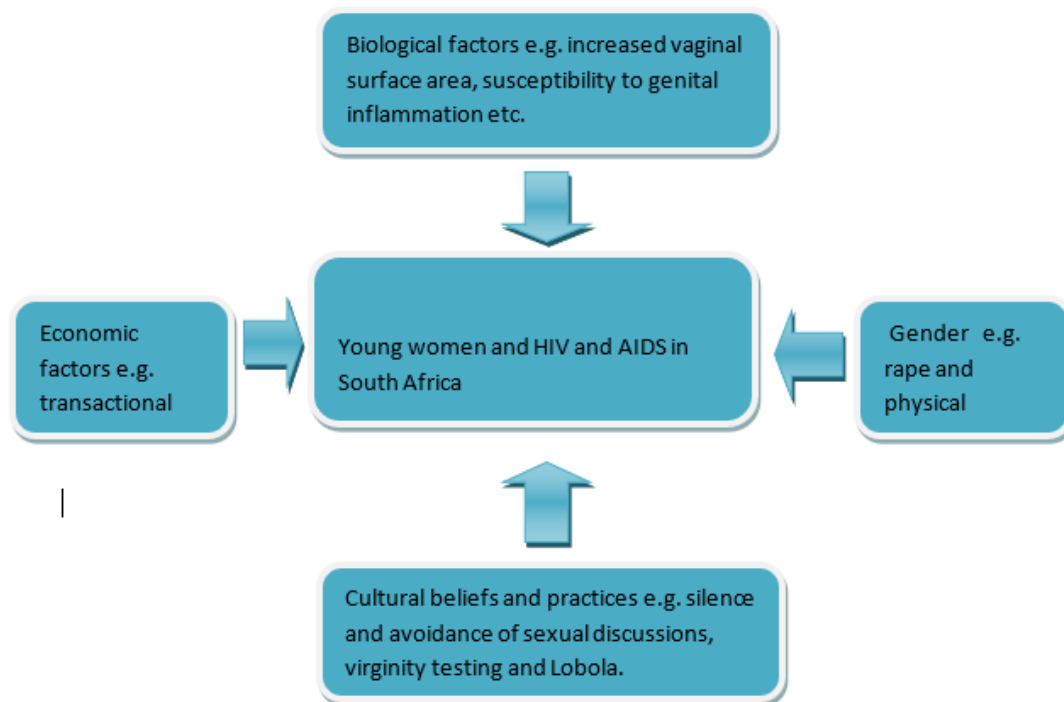
Though the above two factors have provided insights on young women's vulnerability, they have been found inadequate in pinpointing unique aspects specific to South Africa (Kharsany and Karim, 2015). The severity of HIV and AIDS pandemic among young women in South Africa has led to the conclusion that though biological and economic factors play a role, there is another aspect at play more dominant and to some extent the root cause to the disproportionate nature of the pandemic (Mswela, 2009; Jewkes and Morell, 2010). Research in South Africa has drawn attention on the centrality and role of culture in determining sexuality leading to increased vulnerability of young women to HIV and AIDS (Rao Gupta, 2000; Shefer and Foster, 2001; Weiss, Whelan and Rao Gupta: 2000). Among others, results from several studies indicates that culture shapes and instructs young women's attitudes and perceptions on sex (Rao Gupta, 2000; Shefer and Foster, 2001; Weiss, Whelan and Rao Gupta: 2000). Culture determines one's sexual beliefs, preferences, behaviour and sexual experiences (Parker, 2009; Jewkes and Morell, 2010). Culture is

responsible in the construction of sexuality, an aspect of one's life with direct implications on sexually transmitted ills like HIV and AIDS.

Research on culture and young women in South Africa further highlights the detrimental impact of some dominant cultural values and norms among South African black communities on femininity and female sexuality (Leclerc-Madlala, 2001; Shefer and Foster, 2001; O'Sullivan *et al.*, 2006; Maluleke, 2012). Two key observations have been made in line with that. Key cultural norms for instance virginity testing have been identified to advance notions of an ideal female sexuality as equivalent to sexual naivety, passivity and silence (Mkhwanazi 2010; LeClerc-Madlala, 2012; Chisale, 2016). As a result, young women have been denied access to comprehensive information on sex, its implications and how to protect themselves from sexual ills resulting in behaviours that increase susceptibility to HIV and AIDS (Hlubangane, 2004; Dellar *et al.*, 2015; Abdool Karim *et al.*, 2017; Klaas *et al.*, 2018; Maughan-Brown *et al.*, 2017).

A second key observation made, has been the predominance of highly gendered sexual socialisation beliefs, values, norms and practices for instance Lobola (Leclerc-Madlala, Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016; Mazibuko, 2016). The framing of cultural values, norms and practices like Lobola has been indicated to perpetrate notions of women as commodities for exchange, bearing connotations that women are inferior and subordinates to men. (Mswela, 2009; Nkosi, 2016; Hlabangane, 2014; Mazibuko, 2016). It has been argued young women socialised in such context, are more likely to subscribe to such ideologies which may result in young women perceiving themselves as powerless as well as objects for men's pleasure (Harrison, 2008; Dellar *et al.*, 2015; Leclerc-Madlala, 2001). As per literature this has been highlighted as a huge contributing factor in increasing young women's susceptibility to HIV/AIDS in heterosexual relationships, as it leads to risky sexual behaviours and incapacitates women's ability in regards to HIV and AIDS prevention choices for instance demanding for a condom use (O'Sullivan, *et al.*, 2006; Maluleke, 2012; Dellar *et al.*, 2015).

Figure 1.1: Factors contributing to young women's vulnerability to HIV and AIDS



Rationale and significance of study

Despite the above stated situation, as already highlighted this study is located within a cultural stance on sexuality. A central argument advanced is that sexuality is fluid and not static just as culture (Parker, 2009). South Africa, as a nation has undergone tremendous changes over the past decade impacting the cultural terrain. As an example, literature point at how practices like virginity testing have been challenged and even abolished in some communities (Rankhotha, 2004; Mantell, Needham, Smit, Hoffman, Cebukhulu, Adams-Skinner, Exner, Mabude, Beksinska, Stein and Milford, 2009). It is henceforth imperative for more studies on young women and sexuality, for fresh and new insights on implications of changes in cultural terrain on young women's sexual beliefs, attitudes and behaviours. Regular studies on female sexuality are crucial in understanding and possibly addressing sexually oriented societal ills for instance HIV and AIDS, which continue to impede the lives of young women.

Another key important argument advanced by a cultural perspective of sexuality on which this study is grounded is the complexity and heterogeneous nature of sexuality (Parker and Aggleton, 1999; Rao Gupta, 2000; Shefer and foster, 2001). MacPhail and Catherine (2001:1) argues that "young people do not always constitute a homogenous grouping, and that there will always be a range of variations in the extent to which young peoples' behaviour serves to reproduce or resist dominant social norms on sexuality." It entails in the case of young women in South Africa, variations exist on how they perceive and experience sexuality despite belonging to one demographic grouping and similar culture. In addition to that by the virtue of sexuality being a phenomenon arrived at through constant negotiation with one's context, variations are bound to occur from one individual to another (Aggleton & Campbell, 2000, Arnfred, 2004). A dearth of literature currently exists in South Africa that narrows in to interrogate female sexuality among a specific grouping of young women in specific context, as a majority of the studies tend to address young women in a stereotypical

manner, mostly as a homogenous grouping (MacPhail and Catherine, 2001). Henceforth, it is paramount to conduct more contextual based studies on sexuality on all groups of young women in South Africa, to develop a comprehensive as well as unbiased understanding of young women's sexual beliefs, attitudes and behaviours and influence on HIV and AIDS prevention.

This study henceforth explores how female students at the University of KwaZulu-Natal, Howard college campus, specifically of Zulu origin perceive and understand female sexuality in the university setting and its influence on sexual behaviour and HIV and AIDS prevention choices. Several reasons guided and justified the choice of this demographic group as well as topic. Firstly, the University of KwaZulu-Natal, Howard college campus, is located in the province of KwaZulu-Natal, the epicentre of HIV and AIDS in South Africa, with more incidences registered among young women between the ages 15 to 25 (KwaZulu-Natal Office of the Premier HIV/AIDS Directorate, 2017). Though the researcher cannot necessary point at any statistics that isolate female students at UKZN, Howard college campus, as the most hit, by the virtue of belonging to a demographic group and location worst hit by HIV and AIDS it can be argued that by default they fall within the vulnerable group. Also in general, studies indicate University students as more prone to HIV and AIDS, as they engage in exploratory and sometimes risky behaviours as a result of unlimited freedom found at universities (Staden and Bodenhorst, 2009; Reddy and Frantz, 2011; Levin, Ward and Neilson, 2012). In attempts to avoid generalisation this study focuses on Howard college campus, the largest of the five campuses under UKZN, with the largest number of residential students (UKZN, 2019). Reference shall henceforth be made to Howard College (HC), as the study site throughout this study.

As for the choice of Zulu female students, it should firstly be pointed out that statistics reveal black young women as the most infected with HIV and AIDS in South Africa (Maughan-Brown *et al.*, 2018). Black people in South Africa however comprise a heterogeneous grouping, with different cultures, as such different values, norms and practices on female sexuality. Nevertheless, the province of KwaZulu-Natal is predominantly home to the Zulu people of South Africa (Zondi, 2015). Howard College is therefore more likely to have more Zulu students as opposed to other tribes. It is on that basis together with the consideration of the cultural nature of female sexuality; the paper opted to focus on Zulu female students.

Lastly, the choice of female students and the topic of sexuality was triggered by the researcher's curiosity on how the transition from one context to another, impact young women's perceptions of female sexuality, sexual behaviour as well as HIV and AIDS prevention choices. University female students undergo a transition from being in a community more likely under parental surveillance to being in a university space more often guaranteeing immerse freedom (Levin, Ward and Neilson, 2012; Ngubane, 2017). The changes are not limited to space but also notions and experiences on various spheres of life, sexuality inclusive (Reddy and Frantz, 2011; Ngunane, 2017). The researcher, an African though from another country, Malawi, recalls how the transition from the community to the university was interesting and at the same time daunting due to the differences on notions on female sexuality. The researcher wondered if at all that is the case for female students at UKZN and if yes, how it influences perceptions on female sexuality, sexual behaviour and HIV and AIDS prevention choices.

Research Questions

In line with the study problem as highlighted in the background as well as the study rationale as discussed in the above section, the study seeks to address the following research questions.

- 1) How do Zulu female students at the University of KwaZulu-Natal, Howard College, understand female sexuality?
 - a) What are the key influences on Zulu female students' perceptions of female sexuality at the University of KwaZulu-Natal, Howard College?
 - b) How does the University context impact Zulu female students' perceptions of female sexuality?
- 2) How do the perceptions of female sexuality influence sexual behaviour?
- 3) How do perceptions of female sexuality influence UKZN's, Howard college, Zulu female student's sexual agency for HIV and AIDS prevention in heterosexual relationships?

Aims and objectives of the study

This study seeks to explore how female students of Zulu origin at Howard College perceive female sexuality and how that in turn influence sexual behaviour and HIV and AIDS prevention choices. The study acknowledges that the University context present a different space mostly infiltrated with liberal ideas on sexuality for instance sexual exploration normally different from traditional notions presented in most communities. It also provides space for sexual exploration and adventures away from parents/ guardian surveillance. Henceforth, the study seeks to understand if at all such transition and changes impact young women perceptions of female sexuality and in turn sexual behaviour.

Firstly, the study aims to understand how young women studying at Howard College especially of Zulu origin define, perceive and understand female sexuality. In this regard, the study explores sources and key influences in young women's definitions and perceptions on female sexuality. Furthermore, it zeroes in on the influence, if any, of Howard College on the female students' perceptions. It is worth noting that this study explores and confines the term female sexuality to sexual beliefs, attitudes and sexual behaviours specifically among young women in heterosexual relationships.

Secondly, the study explores how young women's perceptions of female sexuality influence sexual behaviour. Specifically, it aims to investigate the correlation between young women's perception on female sexuality and actual behaviours. Following that, it explores how perceptions influence purposes for pursuing relationship, highlighting the purposes and the nature of such relationship i.e. sexual or non-sexual etc. Fundamentally, on this juncture, the paper further explores whether the behaviours exhibit agency or passivity.

Lastly, the study embarks on understanding the impact of young women's perceptions of female sexuality on sexual agency, specifically in line with HIV and AIDS prevention. The study explores how perceptions feed into young women's capacity to influence decisions in a relationship: decisions whether to have sex or not and in cases of sexual encounters the ability to negotiate terms and conditions for instance condom use and HIV and AIDS testing. This will offer insights and add on knowledge on how perception of female sexuality among

young women at the University of UKZN feeds into and impact HIV and AIDS prevention choices.

Brief summary of methodology

To address the above set questions and achieve the study objectives, the study employs a qualitative approach methodology to inquiry. Qualitative research entails a deeper exploration and examination of an issue or phenomena by engaging with its intricate aspects facilitating depth, detail and openness (Mason, 2002). A qualitative approach methodology is ideal for examining and addressing highly complex issues like perceptions of female sexuality and implications on behaviour and HIV and AIDS choices, deeming it relevant for the study.

In regard to the research design, the study utilises participatory action research. Participatory action research involves the use of data collection means that ensures participants optimal engagement, facilitating the generation of robust data as well as inducing action or social change among study participants (Baum, MacDougall, Smith, 2006; Macdonald, 2012). Participatory action research is designed in a manner that ensures that as participants go through data collection exercise, they undergo processes of self-reflection and retrospection, becoming more aware of their beliefs and actions and how that impacts their lives (McGarvey, 2007). The researcher deemed this approach appropriate to the study, based on the study demographic group vulnerability to HIV and AIDS, highlighting the agency for action. It is on this basis that that this study employs bodymapping exercise, an art based interactive methodology in data collection, followed by individual semi-structured interviews to provide for further engagement.

Data collected by the aid of the above-mentioned approaches is analysed using a thematic approach to data analysis. Thematic data analysis involves “identifying, analysing and reporting patterns (themes) within data” (Bruan and Clarke, 2006:80). Thematic analysis highlights differences and similarities in data, useful in interrogating different views and perspectives from different research participants. Thematic analysis also guarantees a rich account of data through facilitating the emergence of unanticipated ideas, facilitating fresh insights and interpretations of an issue (Nowell *et al.*, 2017:3). This study is interested in individual perceptions on female sexuality in view of one’s context and implications thereof regarding sexual behaviour and HIV and AIDS prevention choices, making thematic analysis as an appropriate tool to achieve desirable results. Regarding the population, the study solicits views from eight black female students of Zulu origin from the University of KwaZulu-Natal, specifically Howard College campus.

Structure of dissertation

Chapter one: Introduction

Chapter one discusses the background of the study highlighting HIV and AIDS disproportionate infections and prevalence among young women in South Africa, specifically in the province of Kwazulu-Natal. The chapter highlights cultural factors as a unique, central factor contributing to increased vulnerability to HIV and AIDS among young women in South Africa. Evidenced by literature, the chapter demonstrates how some dominant cultural norms and practices in South Africa override biological factors in defining and dictating sexuality determining predisposition to infections. The chapter contextualises sexuality in the cultural realm validating the relevance of contextual studies on perceptions of female sexuality to gain more insight on young women’s sexual behaviour and HIV and AIDS prevention

choices. Towards the end, the chapter introduces the research aims and objectives, drawing attention to the significance of the study.

Chapter two: Literature review

Chapter two presents and engages with relevant literature on the research topic. On the onset, the chapter offers the definition of sexuality in relation to the study. The section thereafter discusses two theoretical perspectives i.e. essentialist and social constructionism that predominantly influence the definition as well as research on sexuality. In discussing the two theoretical strands, the paper explicitly highlights its allegiance to social-constructionism mainly due to its recognition of the complexity, contextual and cultural nature of sexuality. In this regard, the paper locates and contextualises the study within the cultural perspective of female sexuality. The chapter thereafter discuss and define female sexuality specifically among young women in the context of South Africa. A discussion of female sexuality is confined to cultural values and norms among a particular group of people in this case the Zulu, a grouping predominant in the province of KwaZulu-Natal and UKZN, the study focus. The chapter presents studies documenting the impact of some dominant notions of female sexuality on young women's perception and implications on sexual behaviour with a focus on HIV and AIDS prevention mostly in traditional societies. Having presented the landscape of female sexuality in traditional societies, the study highlights key changes that have occurred in South Africa leading to a multiplicity of discourses on female sexuality in contemporary South Africa. The final part of the chapter highlights a paucity of contextual research on perceptions of female sexuality and implication on sexual behaviour and HIV and AIDS prevention in contemporary South Africa, specifically among young women among them female students at the University of KwaZulu Natal.

Chapter three: Theoretical framework

This chapter presents the theoretical underpinnings that guided the study. The study was grounded on the culture-centred approach (CCA) and empowerment theory. CCA champions acknowledging contextual settings in the understanding of health and any other related issue impacting marginalised groups. CCA henceforth offered an appropriate lens in this study's quest to examine the impact of contextual meanings, norms and practices of female sexuality on young women's sexual behaviours and implications on HIV and AIDS prevention. CCA also highlights the urgent need for accommodating the voices of marginalised groups in discursive spaces to enable agency, informing the study methodological approach. Empowerment theory elucidates on processes necessary for individual empowerment to occur. Empowerment theory is grounded on three key constructs: perceived control, social-political environment and experiences to exert control. Empowerment theory was relevant to the study as it provided constructs necessary in answering some of the research questions in the study. Fundamentally, empowerment theory offered insights on whether changes in culture triggering changes in the female sexuality terrain in South Africa are translating to young women able to exert control over their sexuality in relation to perceptions, sexual behaviour and HIV and AIDS prevention choices or not.

Chapter four: Methodology

This chapter elucidates on the methodological map for the study, providing insights on the study theoretical foundations, data collection methods and data collection procedures. In summary, social constructivism paradigm, qualitative research design and participatory action approach to research, offered theoretical foundations on which this study was

executed. A bodymapping exercise followed by semi-structured individual interviews were utilised for data collection. Purposive sampling and snowball sampling, aided in the process of sampling and recruitment of study participants, eight female students in total. Another key aspect explored in this chapter is ethical considerations observed in the processes of data collection in attempts to protect the privacy of research participants. Among others, study participants were recruited on voluntary basis and certified by the signing of consent forms. In addition, study participants were given the provision to withdraw from participating in the study, at any time they deemed necessary.

Chapter five: Data presentation and analysis

Chapter five presents an analysis of qualitative data collected through bodymapping exercises followed by semi-structured individual interviews. The data was analysed by the aid of thematic analysis, which involves careful ordering and generation of meanings from data based on emerging themes or patterns. Data is presented in line with generated themes, informed by the study objectives and theoretical underpinnings. Furthermore, data presentation is supported by extracts from research participants' bodymapping exercise and interviews, for validity purposes. Overall, data is presented in a way that elucidates on UKZN female students' perceptions of female sexuality, their sexual behaviours and HIV and AIDS prevention choices specifically in the context of Howard College nevertheless in acknowledgement of the communities they come from. This chapter forms the basis, for the next chapter, discussion of findings.

Chapter six: Discussion of findings

Chapter six provides a detailed in-depth discussion of the study findings. The discussion is guided by the objectives of the study together with the study theoretical framework. This chapter provides conclusions made by the study mostly in response to the research questions. It further provides limitations, recommendations of the study and possible areas for further research.

CHAPTER TWO: LITERATURE REVIEW

Introduction

Young women in South Africa are among key vulnerable groups most predisposed to HIV and AIDS, compared to their male counterparts and other young women worldwide (Harrison and O'Sullivan, 2010). Consequently, the past decade has witnessed a surge of research on young women and HIV and AIDS in South Africa, in bids of developing a better understanding of the situation to develop ways to mitigate the predicament. Among others, an area that has received considerable although not enough focus is female sexuality among young women and implications on HIV and AIDS prevention behaviours and choices.

This chapter engages with relevant literature pertaining to the topic. The first section of the chapter presents the definition of sexuality together with the theoretical perspective to sexuality research within which this study is located. This study is informed by a social constructionism perspective to sexuality. Social constructionism emphasizes the importance of human interactions in the development of knowledge informing the understanding of the world (Burr, 2015). Among others, social constructionism highlights culture within a context as a key agent in the construction of reality. In this study sexuality is studied as a socially constructed phenomenon informed and governed by norms, values, practices etc within a culture. This study is henceforth located within a cultural realm of female sexuality under social constructionism.

Other than delineating key terms as well as locating the study, the chapter explores and presents the landscape of female sexuality in South Africa especially among Zulu women predominant in the region of Kwazulu-Natal as well as the University of KwaZulu-Natal, the location for this study. A discussion on the latter will first highlight cultural norms and practices dominant in traditional Zulu societies that shaped and impacted the definition of female sexuality. The chapter presents literature from the field of sexuality, documenting the role of some of the cultural values and norms in young women's perceptions of female sexuality and linkage to HIV and AIDS vulnerability. The final section of the literature review acknowledges and presents changes in the cultural terrain in contemporary South Africa facilitated by democracy, modernisation more pronounced in urban settings. A discussion of the latter will highlight paucity of research, in relation to how young Zulu women perceive female sexuality in contemporary South Africa specifically in the University context and impacts on sexual behaviour and HIV and AIDS prevention, providing a premise for the study.

Sexuality

Sexuality has been described as one of the most controversial terms to define riddled with debates, variations and at times opposition from one discipline, one scholar and one historical period to another (Weeks, 2002; Wanrooij, 2004). Sexuality has also been described as a concept that has greatly evolved and expanded over time (Weeks, 2003). Wanrooij, (2004) highlights that one of the earliest definitions of sexuality was by the Encyclopedia Treccani in 1936. Sexuality was defined as "childbirth, embryology, fecundation, genital apparatus, reproduction and sex" (Wanrooij, 2004:30). This definition was however later critiqued to be inadequate by a number of scholars (Tolman and Diamond, 2001; Jones and Bartlett, 2014). A key observation cited was that the definition limited sexuality to biological aspects of the human body specifically related to the reproductive system (Weeks, 2002). It was argued there is more to sexuality than what is

visibly detected and determined by biology and even in biology sexuality serves more purposes than procreation (Tolman and Diamond, 2001; Jones and Bartlett, 2014).

Scholars henceforth attempted to redefine sexuality in different ways focusing on other aspects. Halperin (1989) thereof defined sexuality as "positive, distinct, and constitutive feature of the human personality, to the characterological seat within the individual of sexual acts, desires, and pleasures, the determinate source from which all sexual expression proceeds". Though definitions in this line catered for and encompassed other aspects of sexuality other than reproduction for instance desire and pleasure it was observed to be too individualistic (Arnfeld, 2004; Tamale, 2011). It was argued the definition suggested sexuality as mostly impacted by psychological attributes residing in one's core without considering the social and interpersonal nature of human beings impacting sexuality (Weeks, 2002; Wanrooij, 2004).

The World Health Organisation (WHO) (2006:5) henceforth defined sexually as

A central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships.

The definition provided by WHO is broad and extensive catering for all facets of sexuality. The definition of sexuality as per World health organisation embodies the biological aspect i.e. sex and reproduction, psychological e.g. thoughts, attitudes, behaviour, social i.e. gender identities and roles of sexuality (Fletcher, *et al.*, 2016). A number of scholars support conceptualisation of sexuality in this line outlining that it demonstrates the complexity nature of sexuality, a product of both natural and manmade forces (Weeks, 2002; Ilkkaracan and Jolly, 2007; Jones and Barlett, 2014; Willoughby, 2017). Whilst this study acknowledges and appreciates the multidimensional and extensive nature of sexuality as per the above definition, it is rather too broad hence lacks focus for the purposes of this study. After all, "specialization is endemic to intensive and productive research" (2001; 34). Macphail and Campbell (2006) provide a contextual focused definition of sexuality that resonates more and which this study subscribes to. Macphail and Campbell (2006:4) state:

By sexuality we mean not only sexual practices, but also what people know and believe about sex, particularly what they think is natural, proper and desirable. Sexuality also includes people's sexual identities in all their cultural and historical variety. This assumes that while sexuality cannot be divorced from the body, it is also socially constructed.

Two factors make this definition ideal for this study. As with the definition provided by World Health Organisation, this definition recognizes the multidimensional nature of society i.e. its connection to bodies and social aspect. Nevertheless, it deliberately predominantly associates sexuality with knowledge, attitudes and practices on sexual activities as per culture and one's context. This study is of the view that "nothing is sexual..... but naming makes it so" (Weeks, 1986: 19) meaning though biology contributes to sexuality, it is predominantly a socially defined phenomena hugely dictated and governed by norms, values and practices within a particular culture, hence need for more focus on the social-cultural aspects (Fletcher, 2015).

Sexuality perspectives in the context of HIV and AIDS

Two theoretical strands i.e. essentialism and social constructionism, inform the understanding as well as research on sexuality. In general, essentialism implies “a belief that certain phenomena are natural, inevitable, universal and biologically determined” (DeLamater and Hyde, 1998:10). It translates that phenomenon in human beings can be understood in reference to their intrinsic nature or indispensable quality (Tolman and Diamond, 2001; DeLamater & Hyde, 1998). Human behaviour “is perceived as mostly 'natural', predetermined by genetic, biological, or physiological mechanisms and thus not subject to change; or the notion that human behaviours which show some similarity in form are the same, an expression of an underlying human drive or tendency” (Szesnat, 1999:337).

Social constructionism on the other hand postulates “reality is socially constructed” (DeLamater & Janet Shibley Hyde, 2017:14). Social constructionism argues that the world is not a blank canvas but rather an organized space comprised of systems, events and individuals designated to operate in a distinct orderly way (Tolman and Diamond, 2001; Jones, 2014). Through language and other socialization mechanism, people are introduced, make sense and interpret the world, for personal reference and experiences (Burr, 2015). Peoples’ view and experiences of the world is henceforth not a result of inborn traits but rather a shared reality, shaped and highly regulated by social and external forces such as religion, politics and culture (Nierkirk and Meer, 1989; Szesnat 1999; DeLamater & Janet Shibley Hyde, 2017).

Essentialist approach to sexuality

Early research on sexuality was predominantly influenced by essentialist perspectives, accredited to the work of early philosophers like Plato (Parker, 2009). Sexuality was approached as “a biological force where the sexual identities of individuals were considered as cognitive realisation of genuine underlying differences” (Szesnat, 1999:336). Sexuality was postulated to be obtained at birth and not subject to change throughout life, unless if induced by genetic or other biological factors (DeLamater & Hyde, 1998). Based on the perspectives of the essentialist researchers, precedence was given to internal forces in the understanding and explanation of an individual sexual life and experiences (Tolman and Diamond, 2001). Also, research on sexuality zeroed in on an individual, believed to be endowed with the ability to make rational choices (DeLamater & Hyde, 1998).

This paradigm and conceptualisation informed a majority of sexuality research worldwide, South Africa inclusive (Arnfred, 2004; Tamale, 2011). This perspective however attracted critique from scholars and experts from around the late 19th century, especially from African scholars (Weeks, 1985; Nierkirk and Meer; 1989; Weeks; Weeks, 2002; Ilkcaracan and Jolly, 2007; Jones and Barlett, 2014; Willoughby, 2017). One of the key arguments predominant among African scholars was that, essentialist perspectives of sexuality did not consider contextual factors impacting the individual prevalent in African societies. It was argued that human beings are by nature social beings as such are in constant interaction and negotiation with other human beings and the larger context (Spencer-Oatley, 2012). Reference was made to many African societies, where collectiveness was/is core to development of identities which influences an individual’s attitudes, perceptions and behaviour (Arnfred, 2004). The failure to consider the impact of contextual settings in which human beings make decisions on whom, how and why they engage in sexual relations and activities was highlighted to render the study of sexuality incomplete (Arnfred, 2004; Tamale,

2011). Overall, conceptualization of sexuality from an essentialist perspective was critiqued for often advancing European colonialism agenda by creating binaries hence 'othering' African sexualities (Tamale, 2011).

Another development that called for the questioning of the essentialist approach to sexuality was the advent and prevalence of HIV and AIDS in Africa (Tamale, 2011; Uwah and Wright, 2011). Despite originating in the United States of America, HIV and AIDS rampantly spread in Africa than any other continent (Nweze, Emmanuel and Nweze, 2017). For example, high prevalence of HIV and AIDS pandemic in Sub-Saharan Africa, especially South Africa, which is recognized as the global epicentre (UNAIDS, 2018). The disparities invoked questions on the effectiveness of an essentialist approach to research in understanding factors influencing the spread of the epidemic. Increasingly it was noted, studying and understanding sexuality with emphasis on behavioural and biomedical perspectives sidelined social factors imperative to individual sexual decisions and choices (Fletcher *et al.*, 2016). Uwah and Wright (2011) further notes essentialist approaches to sexuality research resulted in implementation of individual behaviour-based HIV and AIDS interventions. Individual interventions addressed sexuality issues based on the rationale that sexual values, beliefs, behaviours and identities are located in one's rationality. Uwah and Wright (2011) stipulates that individual oriented strategies contributed to failure in addressing the spread of HIV and AIDS in the African context, as the interventions left little or no impact in enhancing individual sexuality.

The failure of most biomedical and behavioural approaches to sexuality in bids to address HIV and AIDS in Africa was a wakeup call leading to a rise in human sexuality research in Africa (Arnfred, 2004; Tamale, 2011). Increasingly, more interrogations and research in the field led to insights and understanding of sexual health and sexuality in general as a complex phenomenon not simply residing in a rational individual conscious. It was observed that an individual's sexual behaviour, choices and identity are results of beliefs and attitudes more often shaped by societal values, norms and practices (Fletcher *et al.*, 2016). For instance, the family and community provide a lens through which an individual acquires knowledge and understanding of sexuality, values, roles and expectations regarding sexual relations and conduct (Ilkharacan and Jolly; 2014). It was observed, though the individual may have liberty to choose, such choices are hugely impacted and dictated by contextual factors such as cultural norms and values, social interactions etc (Uwah and Wright, 2011; Burr, 2015).

This school of thought was further reinforced by increased HIV and AIDS prevalence rates among women especially young women in sub Saharan Africa and South Africa as compared to other women in other parts of the world (Harrison et al, 2015; Abdool Karim, 2017; Klaas et al, 2018). It became quite apparent that there are deeper, social explanations to such discrepancies other than biological and behavioural. Indeed, more research in South Africa underlined the centrality of social factors especially culture together with gender in defining and confining sexuality in ways that predisposed young women to the HIV and AIDS epidemic. That led to the predominance of social constructionism perspective to the study and research on sexuality.

Social constructionism approach to sexuality

Social constructionism postulates sexuality as "a product of the cultural and psychosocial processes through which men and women are socialized into gender-specific constructions of sexuality prescribing appropriate male and female sexual feelings and behaviours"

(Tolman and Diamond, 2001; Burr, 2015). Social constructionism advances three key assumptions on sexuality. Firstly, sexual beliefs, attitudes and behaviours are predominantly human made aided by social systems and interactions highly organized and regulated to an extent that they appear natural (Weeks, 1985; Ilkharacan and Jolly; 2014). Secondly, sexuality is fluid and changeable, subjected to political, cultural, religious and any other socially agreed upon changes (Weeks, 2002; Jones and Barlett, 2014). Thirdly, there is nothing as homogenous sexuality, as its social constructed nature suggest variations from one group, one nation, one gender and even one family to another (Arnfred, 2004; Tamale, 2011).

The assumptions advanced by social constructionism in line with sexuality were deemed more relevant and plausible in understanding sexuality dilemmas like HIV and AIDS in South Africa and indeed any other context (Arnfred, 2004; Tamale, 2011; Uwah and Wright, 2011). Through highlighting the contextual constructed nature of sexuality, social constructionism provided sensible insights on discrepancies in HIV and AIDS infections and prevalence from one group of people to another (Tamale, 2011). In the case of South Africa, social constructionism further provided insights on possibilities of high infections and prevalence among one particular gender and age group, in this case young women, as compared to the young men (Harrison *et al.*, 2015; Abdool Karim, 2017; Klaas *et al.*, 2018).

Increasingly social constructionism was adopted by many scholars as a perspective to guide contextual based research on sexuality (Arnfred, 2004; Tamale, 2011; Uwah and Wright, 2011). As an approach Social constructionism highlight several social dimensions as significant in the construction of sexuality namely culture, politics and religion (Weeks, 2002; Jones and Barlett, 2014, Fletcher, 2015). Culture is nevertheless by far considered as one of the most dominant social factors in the construction of sexuality, leading to a cultural approach to sexuality within social constructionism. The paper is specifically located within the cultural approach to sexuality for reasons to be discussed in the following section.

A cultural approach to sexuality

A discussion on a cultural approach to sexuality first requires an engagement with the concept of culture. Various scholars have defined the concept differently in line with the historical context and distinct objectives. This study presents two definitions of culture relevant to its purposes, proposed by Garuba and Raditlhalo: 2008). The first definition states that culture refers to the “meanings, values, ways of life shared by particular nations, groups, classes etc” (Garuba and Raditlhalo, 2008:38). This definition highlights the collective and interactive nature of culture. In order for a behaviour or practice to be considered as cultural, it depends on the extent to which it is shared among a group of people. Spencer- Oatley (2012:8) indicates “if a solitary individual thinks and behaves in a certain way, that thought or action is idiosyncratic, not cultural”. It is henceforth the collectiveness of an act or item that makes it cultural. That being said, culture is both a social as well as an individual construct (Garuba and Raditlhalo, 2008). Though each society constitutes values, beliefs and practices that they embrace as a people, the individual is at liberty to adopt, resist or modify such values, beliefs and practices. That is why culture is said to be, a learned and not a natural phenomenon, among others. Additionally, it points at the fluidity of culture as its people changes or with the passage of time (Spencer- Oatley 2012).

The second definition that this study engages with refers to culture as “the practices which produce meaning: signifying practices” (Garuba and Raditlhalo, 2008: 38). This second definition transcends what is encompassed in the first definition by emphasising what culture does and not merely what it is. Garuba and Raditlhalo (2008:39) argue that “the above definition sees culture as a social process and not a thing.” Culture is recognized as a social institution that produces and exchanges meanings pertaining to all aspects of life among a grouping of people (Johnson, 2013). Concepts, phenomenon, things etc are in themselves vague, until meanings are agreed upon and assigned by members of the society impacting individual attitudes, perceptions and behaviours, and providing a framework for experiences for a group of people. Spencer-Oatey (2012:4) elucidates that “although certain aspects of culture are physically visible, their meaning is invisible: ‘their cultural meaning ... lies precisely and only in the way these practices are interpreted by the insiders’”. For instance, looking at a person in the eye when speaking to them may mean respect, symbolizing one is paying attention in one culture. In another culture, the very same gesture of looking at a person straight in the eye when talking to them, especially if they are older can be considered disrespectful. It entails nothing has meaning except that assigned and agreed upon by people (Johnson, 2013). Culture therefore creates and offers a lens through which human beings see, understand and experience various aspects of life, sexuality inclusive (Weeks, 2002; Jones and Barlett, 2014).

A cultural approach to sexuality henceforth champions an understanding and research on sexuality in consideration of the culture of research participants. Among others it elucidates, sexuality, that is, its meanings and fundamentally how it is experienced is predominantly defined and dictated by codes and conventions in a culture (Goebel, 2017). Members of the society based on cultural values, norms and practices decide and describe what to label as sexual and, in that realm, what to label as acceptable and taboo. Members of the society based on beliefs, values and practices also dictate who one has sex with, why, with what outcomes and how such activities should be conducted (Jewkes and Morell, 2010). Members of every society are introduced and socialized in line with the agreed upon meanings of sexuality which impacts on their beliefs, attitudes and practices from a tender age (Parker, 2003).

Sexuality is therefore in general “seen as largely intentional, yet its ‘intentionality’ is always shaped within the specific contexts of socially and culturally structured interactions” (Parker, 2003:256). In other words, an individual social context often determines how they construct, negotiate and perceive their sexual lives impacting sexual experiences. While it is essential to be aware and recognize intrinsic aspects, the pinnacle of sexuality processes lies in interactions among its peoples (Uwah and Wright, 2011). An understanding of how young women perceive and understand female sexuality requires an interrogation of young women’s values, beliefs and practices in line with the culture within their immediate environment.

Furthermore, a cultural approach to sexuality argues for the recognition of the heterogeneous nature of sexualities (Macphail and Campbell, 2006). Sexuality cannot be generalized as variation occurs from one group of people to another. Moreover, this perspective of sexuality recognizes sexuality as an aspect bound to evolve and change as a society undergoes transitions while creating new meanings (Parker, 2003). It is based on the above elucidated reasons that this study adopts a cultural approach to researching sexuality which also offers a premise for this study. High HIV and AIDS prevalence rates among

young women demands urgent research on young women and sexuality to understand the parameters in which the demographic group make sexual decisions and choices. Nevertheless, in attempts to achieve that it is imperative to study different groups of young women separately, in line with their immediate environment and changes therein. This paper attempts to respond to the need by researching on how young women at Howard college, perceive female sexuality within the parameters of the university and how that in turn impact sexual behaviour and HIV and AIDS prevention choices.

Sexuality and gender

Gender is a crucial concept to consider when defining, understanding and conducting research on sexuality in the context of culture (Rao Gupta, 2000). Tamale (2011: 6) indicates that “researching human sexuality without exploring gender is like cooking pepper soup without pepper– it might look like pepper soup, but one sip will make it clear that an essential ingredient in this Nigerian specialty is missing”. Gender and sexuality are intimately intertwined together so that they either “inform or constrain one another” (Fletcher, 2015: 2). A demonstration on the intersection of gender and sexuality however demands a definition and discussion of the concept of gender as per the study.

Gender has been described as one of the most dynamic loaded words in the English language, forever changing and producing new meanings (Kaplan and Glover, 2009). In its earliest state the word ‘gender’ was used interchangeably with ‘sex’ to connote the state of being male and female (Wood, 2009). The definition of gender was limited to an individual’s physical aspects regulated by biological forces that in turn guided behaviours. It hence entailed that all males or females have similar traits and behaviours universally. The work of theorists like Robert J. Stoller challenged such conceptualization by bringing to light the complexities of human beings highlighting the possibilities for variation in behaviour to occur from one individual to another (Kaplan and Glover, 2009). He henceforth used the term ‘gender’ distinctly from ‘sex’ to “signal the complexities of behaviour, feelings, thoughts, and fantasies that are related to the sexes and yet do not have primarily biological connotations” (Kaplan and Glover, 2009).

Gender like sexuality is a social construct of culture (Fletcher, 2015). It is what society expects from female and male bodies. It is a “social phenomenon where males are expected to behave in a particular manner and also females are expected to behave in a particular manner” (Nota, 2015:16). Commencing from childhood human beings are provided with scripts on the ideal gender to embody based on sex. Little girls and boys are socialised differently on ideal roles to pursue and perform as a male or a female body. Gender like sexuality is a collective activity dictated by the culture of its people (Kaplan and Glover, 2009). Each society has values, belief systems, norms and meanings attached to certain aspects of life dictating conduct. An individual as such taps in that belief system and is in constant negotiation with social meanings and expectations in acquiring their gender (Wood, 2009).

Gender is “a process of creating distinguishable social statuses for the assignment of rights and responsibilities” (Disch, 2009: 109). Historically and on a larger scale, that has been done by grouping people into two groups: males or females (Fletcher, *et al*, 2016). Gender provides a basis for dictating and regulating interactions in various realms of people’s lives based on sex. As postulated by Disch (2009) fundamentally gender determines the rights and responsibilities an individual has almost in every sphere of life. Sexuality is among the

key aspects of one's life highly regulated by gender, as dictated by culture (Schwartz and Rutter, 1998). Based on the assigned gender, society assigns who one can have sex with, how, why and in what manner (Schwartz and Rutter, 1998). Gender as such is intimately linked to sexuality as it "often overshadows over social categories...to produce variations in social and sexual norms and behaviour" (Rao Gupta, 2000; 90).

Rao Gupta (2000) further explored the intersection between gender and sexuality in his paper on gender, sexuality and HIV and AIDS delivered at the 13th AIDS conference in Kwazulu-Natal, Durban. He argued that originally sexuality was largely viewed to comprise six P's namely practices, partners, pleasure/pressure/pain, and procreation. He however indicated that recent research in the field has highlighted an additional 'P' which is power. He points out that power is the most important P, having a phenomenal impact on the other P's. Power determines who has pleasure in the realm of sexuality and who does not. Ultimately the one with power determines practices in a relationship and one's partner.

Power dynamics in sexuality often emanates from societal gender categorisation of people into mainly two camps, femininity and masculinity (Fletcher, 2015; Kharbe, 2016). Femininity and masculinity refer to "a set of attributes ascribed to biologically sexed females and males respectively" (Hoffman, Borders and Hattie, 2000). Femininity and masculinity are gender identities conferred on human beings by members of the society based on one's sex (Kharbe, 2016). Every society "defines patterns, ideal images of what women and men are and should be, as orders of the assigned behaviours, and finally, as beliefs about their social roles and mutual relations" (Mandal, 2012). In most cases, the basis for deciding if a trait is masculine or feminine has on a larger scale been its prevalence among members of one sex in a distinct society (Hoffman, Borders and Hattie, 2000:476).

Nevertheless, traditional femininity on a larger scale has been associated with traits like passivity, timid, and emotional (Kharbe, 2016). Conversely traits like coldness, aggression, ambition and high intelligence have been labelled as unfeminine and not worthy of 'a good woman' (Kaplan and Glover, 2009). Little girls from a tender age are often made aware of the idea that they are female and from there forth embark on a journey of learning what it means to be female. The family plays a key role in the learning process by rewarding and punishing acceptable and unacceptable characteristics respectively. This is later reinforced by other societal agents mainly culture, schools and the media (Mandal, 2012). It is from that basis that the concept of femininity becomes internalized and labelled as 'natural' (Kaplan and Glover, 2009). Other than impacting a woman's personality femininity impact how women behave in relation with others for instance in sexual relationship with men and generally the roles they can or cannot undertake in life within a particular society (Ashraf, 2018).

On the other hand, traditional masculinity also referred to as hegemonic masculinity often juxtaposed with femininity falls on the other end of the continuum (Barrett, 2008; Lay and Daley, 2007; Kaplan and Glover, 2009). Traditional masculinity is often referred to invoke traits like domination, ambition, strength, assertiveness and anything lively and action oriented (Graff, 2017). Boys from infancy are exposed to scripts communicating ideal masculine traits through actions and the use of language. As is the case with females, ideal traits are rewarded therefore reinforced while those labelled as alien attract punitive action to be suppressed. Different from females however males are often given the impression that

they are first class citizens. Among others this is perpetrated by language where mostly “male is primary in our language while female is vaguely defined as other” (Ashraf, 2018: 7).

This conceptualization has been described as problematic and dangerous to both males and more especially to females (Martin, 2001; Schwartz and Rutter, 1998; Barrett, 2008; Lay and Daley, 2007; Kaplan and Glover, 2009). Overall, gender categorisation are often characterized by “an unequal balance of power, with women having less access than men to education, training and productive resources such as land and credit.....the construction of male and female sexuality reflects the inequalities of the social and economic spheres of life” (Rao Gupta, 2000:87). Inequalities perpetrated by societal definition and demarcation of femininity and masculinity, often disadvantages women in all spheres of life, sexuality inclusive, consequently impacting sexual attitudes, perceptions and behaviour and eventually disempowering.

As an example, traditional femininity portrays and advance a powerless notion of female sexuality characterized among others, by women inhibited from discussing sexual issues with partners, therefore unable to contribute in decision making (Weiss, Whelan and Rao Gupta: 2000). This has implication on the wellbeing and health of women, key among them, increased risk and vulnerability to diseases specifically HIV and AIDS mainly as it places them in a position where they cannot freely negotiate for safer sex (O’Sullivan, Harrison, Morrell, Monroe-wise, Kubeka, 2006; Maluleke, 2012: Dellar, Waxman and Abdool Karim, 2015).

Female sexuality in South Africa

Femininity and female sexuality in traditional South Africa in the context of HIV and AIDS

Literature on female sexuality and young women in South Africa highlight the centrality of cultural values, beliefs and practices in governing traditional South African black communities in all spheres of lives sexuality inclusive (Van dell poll, 2009; Langa; 2012: Chisale, 2017; Ngubane, 2017, Mitchell, 2009). Additionally, gender was a key factor considered in livelihood, as overall males and females were allocated different roles, identities and positions with interest to maintain order and suit the demands of the society (Langa, 2012; Chisale, 2017). Women were generally associated with reproductive roles within the parameters of the home whilst men had to fend for the family (Chisale, 2017).

In relation to sexuality, guided by cultural values and beliefs, different traits, expectations, roles, and positions were conferred on men and women (Hutson, 2017). Male sexuality was predominantly associated with traits like sexual exploration, conquest, activity and power as evidenced by practices like ‘Isoka’ in Zulu Culture. Isoka celebrated young men with multiple sexual partners. On the other hand, many studies have documented that femininity and female sexuality, among many groups was mostly defined in relation to passivity, submissiveness and powerlessness in interactions with members of the opposite sex. Among others, such is evidenced by norms and customs that encouraged silence on sexual issues and minimal or no sexual exploration among young women to preserve virginity (Leclerc-Madlala, Simbayi and Cloete, 2009; Maluleke, 2012; Van Der Poll, 2009; Shope, 2006; Rankhotha, 2004). Furthermore, it has been highlighted, most practices and norms relating to marriage and puberty were structured in either a way that depicted women as less of men or defined femininity in relation to masculinity (Nkonsi, 2016; Mazibuko, 2016). This section isolates and discusses two key cultural practices and beliefs i.e. Lobola and virginity

testing dominant among the Zulu people of Kwazulu-Natal. The section engages with literature discussing dominant definitions and traits of female sexuality perpetrated by the cultural values and practices and implications on young women's perceptions on female sexuality.

Lobola

Bride wealth famously referred to as Lobola among the Zulu-Xhosa people, Bohali among the Sotho and Mala among the Venda, is a cultural practice prevalent among most black South African communities especially the Zulu people in the province of KwaZulu-Natal (Hamoond-Tooke, 1994). As a practice, bride wealth is a custom whereby the husband to be or his family, normally represented by male members, delivers stock or any form of property to a male member of the potential suitor's family in order to marry a woman (Mwamanda, 2016). In contemporary South Africa, debate has arisen on the symbolic nature, significance and implications of Lobola to femininity and female sexuality and implications on HIV and AIDS.

One school of thought postulates that Lobola, when applied in its original state serves to create and advance relational bonds among two families and celebrates the addition of new members to the family (Hamoond-Tooke, 1994; Shope, 2006; Nkosi, 2011; Mwamanda, 2016). Tracing the practice from ancient Zulu societies, Hamoond-Tooke (1994) highlights the communal, social and economic nature of primitive societies arguing marriage was a union between two families with the two individuals taking a secondary role. The Lobola process which involved negotiations fostered interactions between the two families enabling them to form long lasting bonds. Such unbreakable bonds were imperative in traditional societies, enabling the two families/clans to smoothly work as a unit in instances of catastrophe like war and famine (Shope, 2006).

In relation to the significance and implications of Lobola to femininity and female sexuality, this school of thought argues that Lobola was and is meant to be a symbol of ultimate respect to women. In her study on rural black women perceptions of Lobola, conducted in Kwazulu-Natal, Shope (2006) highlights that among others, some participants, especially older women indicated that Lobola upheld the worthiness of women, as it symbolised how much the women were valued. It was argued that in a society, where black people struggled to access resources, due to apartheid, raising money for Lobola was no easy task. The effort and hard work invested to pay Lobola communicated a deep appreciation to a woman for the willingness to leave her family behind to build a new home with a man. Lobola henceforth celebrated womanhood and the role they play in marriage and generally in life (Hamoond-Tooke, 1994 and Shope, 2016).

The second school of thought criticises the practice of Lobola, drawing attention to gender-power dynamics signified and perpetrated (Hamoond-Tooke, 1994; Chisale, 2016; Nkosi, 2011; Shope, 2006; Mazibuko, 2016). One key argument dominant in this school of thought is that the nature of the practice resembles a business transaction. It has been highlighted that Lobola equates women to commodities to be bought by men (Chisale, 2016). Reference has been made to men who interpret a Lobola payment to mean full ownership and control over a woman's life equating her to a personal property (Mazibuko, 2016). A perception of women as properties has been highlighted to legitimize the abuse of women. Overall, the arrangement of Lobola has been cited to implicitly confer more power and rights to men in a household conversely leaving women with little or no power (Mwamanda, 2016).

A study conducted by Mazibuko (2016) among married women in Pretoria, assessing married women's perceptions on Lobola, ascertains views of scholars against Lobola. The study reported participants' inability to exert control in their relationships even in scenarios where their rights were infringed on or at risk. It was reported the study participants believed their husbands legitimately owned them through the payment of Lobola hence had all the power. The study reported some participants expressed playing the role of a 'good wife' even in circumstances of adultery and abuse, as leaving would demand they pay back the bride price, which they indicated they could not afford. Based on that argument it has been postulated Lobola reduces women to commodities and defines female sexuality in relation to negative connotations like passivity, submissiveness and weakness (Mazibuko, 2016).

Virginity testing

The transition from childhood to adulthood is recognised as an important phase in an individual's life hence normally marked with norms and rituals to prepare young people for the life ahead especially in relation to sexuality (Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa). Though variations exist from one group of people to another, in most traditional South African communities girls and boys were initiated into adulthood differently (Shefer and Foster, 2001; Weiss, Whelan and Rao Gupta: 2000; Leclerc-Madlala, Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016). Overall, for girls, a strong emphasis was put on chastity, respect for members of the opposite sex and a certain level of silence and inexperience on sexual issues and interactions (LeClerc-Madlala, 2012; Chisale, 2016). Boys on the other hand were generally encouraged to pursue young women and freely explore their sexuality to earn the prestigious label of 'man enough' (Langa, 2012).

Virginity testing is a ritual that was/is predominant among Zulu people to regulate and maintain chastity among young women (LeClerc-Madlala, 2012; Chisale, 2016). The practice entails periodical inspection of a young woman's genital parts, by older women in the community. The procedure was conducted to verify if a girl was/is a virgin or not. Girls found to be virgins were commended by the community, more especially the family. Non-virgins attracted punitive actions usually in the form of social stigma or risked not finding a worthy suitor to request for their hand in marriage (Leclerc-Madlala, Simbayi and Cloete, 2009).

A number of factors have been highlighted pertaining to the relevance of the practice. First, virginity testing ensured that young women were virgins until marriage, which was a symbol of pride and dignity of a young woman in Zulu culture (George, 2007). A young virgin attracted praise to herself as well as her family for nurturing 'a noble young woman'. Virginity also increased a young woman's likelihood of attracting a husband, who would pay a higher amount of Lobola (Rankhontha, 2004). Secondly, virginity testing was used to regulate a young woman's fertility (Kinoti, 2005). It was believed that because of fear of being found non-virgins, young women were more likely to shun sex, thereby preventing early pregnancies (Taylor, 2004; Gumede, 2000).

Wickström (2010) further discusses that virginity testing was /is a tool for encouraging and bringing back morality not only among young girls who undergo the ritual but the community as a whole. Virginity testing is a public affair and concern as a way of helping girls delay sexual debut as well as encouraging men to respect and uphold girl's sexual integrity. In this sense, it is argued virginity testing empowers and protects young girls from engaging in early

and unsafe sex, until they are old enough to make informed decisions (Wickström, 2010). Recently, the latter argument in line with the rationale for virginity testing has been suggested as a possible strategy for preventing and addressing high HIV and AIDS infections among young women in South Africa (Kinoti, 2005).

However, the practice of virginity testing and the norm of expecting young women to be virgins has been highly criticized by some quarters (Zungu, 2000; William 2005; Pamela, 2007)). Among others, criticisms have been directed towards the gendered nature of the practice and its negative connotation on female sexuality (Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Maluleke, 2012). Virginity testing has been criticized for advancing the notion that female sexuality depends on male sexuality for its existence, hence, according supremacy to the latter (Rankhontha, 2004). Furthermore, Virginity as a symbol of an ideal woman worthy of marriage configures and confines young women to view themselves as 'the second sex' nurtured and preserved for the pleasure of men such as their boyfriends or husbands (Maluleke, 2012). With such a mindset it becomes easier for young women to forfeit sexual control and power to men (LeClerc-Madlala, 2003). Additionally, young women may be objectified by their families, viewing them as commodities to be disposed to the highest bidder, promising a huge amount for Lobola (Maluleke, 2012).

Maluleke (2012) further highlights the double standard nature of the practice Among the Zulu people, virginity testing is only applicable to young women and not young men (LeClerc-Madlala, 2003). Though cultural norms and practices exist to sexually initiate young men to adulthood, ironically, most of the practices promote sexual adventures and exploration (Maluleke, 2012). Among others, such practices include Isoka, a norm where young men with multiple sexual partners are celebrated and male circumcision that encourages boys to have sexual intercourse with women after the exercise as a form of cleansing (LeClerc-Madlala, 2003). It has been concluded Virginity testing is discriminatory towards women imposing tough demands and expectations on one sex.

Young women's perceptions of female sexuality as influenced by some traditional cultural practices and norms in South Africa

Some of the above discussed cultural norms and practices among others have been reported as contributing towards negative constructions and perceptions of femininity and female sexuality among South African black young women (Shefer and Foster, 2001; LeClerc-Madlala, 2012; Hlabangane, 2014). Practices like preserving virginity among females specifically to attract a potential suitor has been cited to perpetrate notions and perceptions that female sexuality exist for male pleasure and satisfaction resulting in young women unable to negotiate for when, who and how to conduct sexual encounters (Harrison, 2008; Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016). This section presents studies documenting negative impacts of some cultural norms and values on female sexuality in traditional societies on young women's perceptions and behaviours.

Harrison (2008) conducted a study on sexual ideologies and relationship ideals among young people in a rural area in KwaZulu-Natal, the epicentre of HIV and AIDS in South Africa, with high infection rates among young women. Among others, key findings from Harrison (2008) study indicated most participants especially young women perceived and conducted sexual relations and activities in outmost silence and secrecy. It was reported, almost all young women who participated in the study indicated the crucial need of hiding

sexual relations from their parents arguing culture did not permeate them to openly engage, disclose or discuss sexual issues as virginity was the ideal. Most of the young women in the study indicated never to have discussed sexual related issues with their parents, resorting to acquiring information on sex mainly from friends. In order to sustain their relationships without alerting parents, the young women indicated meeting up with partners in secretive places for instance at school or crop fields far from their houses. Almost a similar observation was made in relation to young men who indicated not having open discussions on sex with parents. Ironically, the young men expressed not being pressured to hide their relationships as the young women, arguing they perceived it culturally acceptable for young men to pursue women and have sexual relations.

In relation to their perceptions on sex and young women in sexual relationships, Harrison (2008) study reported a general consensus from both young men and women that a good woman ought to be a virgin at the beginning of the relationship signalling it as a symbol of purity. Ironically, none of the participants expressed the necessity of virginity among young men. Furthermore, it was observed that most of the young women did not perceive sexual intercourse as necessary in a romantic relationship arguing abstinence is more ideal to maintain virginity (Harrison, 2008). Nevertheless, most of the young women who participated in the study indicated no resistance to sexual intercourse upon request by their partners, even in cases when they were not ready to engage in such. It was reported such compliance emanated from the need or pressure to prove their virginity in bids to reinforce the perception of being a 'noble' and 'ideal' woman to their boyfriends or to simply be loved by their partners (Harrison, 2008) .

This observation underlines the ambiguities as well as possible negative impacts of norms surrounding young women preserving virginity and discussions on sex on young women's perceptions of female sexuality as well as sexual behaviours (Shefer and Foster, 2001). Overall, a key conclusion from the study conducted by Harrison (2008) was that customs and norms that emphasize the need for young women to be chaste, inexperienced and silent about sex result in young women uninformed about sexual activities and implications thereof. In the absence of accurate information young women are not equipped to act and behave in ways crucial for personal protection and well-being. Furthermore, preserving virginity for males was identified to be linked to a passive perception of female sexuality disempowering young women from putting their interest and well-being first, believing they exist to satisfy male desire.

Reddy and Dunn (2007) conducted another study in Kwazulu-Natal among urban young women aged 15 to 19, pertaining to perceptions, management and representation of female sexuality. Among others, a key observation from this study was a perception of virginity as an ideal among young women. It was further reported young women perceived open discussions and communications on sex with parents and partners as indecent acts associated with promiscuous women. Nevertheless, as was the case in the above discussed study, preservation of virginity was pursued with the goal of gaining love, respect and acceptance from boyfriends and prospective husbands as opposed to personal agenda's (Reddy and Dunn, 2007). Consequently, it was reported most of the participants expressed readiness to engage in sexual intercourse upon request by their partners in order to prove their worth without requesting for protection for instance condom use. Hlabangane (2014) highlights the above situation as a heavy burden young woman must bear for the survival of the relationship as a result of certain cultural expectations on female sexuality. Hlabangane

(2014: 865) postulate “girls and women are not only expected to manage their own sexuality but also that of boys and men, which is said to be urgent and uncontrollable.” In the end, young women are pressured and pushed in situations detrimental to their health and wellbeing.

Another study was conducted at the University of Western Cape among female students, on their perceptions of female sexuality in heterosexual relationships. The study revealed almost similar patterns as reported in previous studies (Shefer and Foster, 2001). It was reported, many of the study participants expressed associating ideal female sexuality with passivity, stating that young women ought to be silent, submit to partners and not make any contribution in sexual interactions. The study participants indicated the above stated traits and behaviours symbolize a pure young woman; an attribute highly attractive to men. Most of the participants further expressed that men ought to take a leading role in a relationship indicating they are more experienced, knowledgeable and such is culturally appropriate.

Most of the participants were further of the view that resisting or attempting to offset the status quo is not feminine and can only lead to terrible consequences. Consequently, some participants acknowledged giving in to sexual advances in instances they were not ready to indulge in sexual activities, in attempts to please their partners and maintain the relationship (Shefer and Foster, 2001). The participants indicated inability to request for condom usage, for fear of being viewed as sexually experienced. An interesting divergent finding observed in this study however was that a few participants indicated not subscribing to cultural values and norms that connote young women as passive participants in relationships, arguing it is discriminatory. They however expressed a lack of courage and a language to positively resist male pressure, mainly because such was absent in their culture. It was observed in the end, the participants who indicated not to subscribe to discriminatory views of female sexuality ended up acting in ways that reinforced the status quo (Shefer and Foster, 2001).

Young women’s perceptions of female sexuality as influenced by some traditional cultural practices and norms and HIV and AIDS

Most of the above discussed cultural norms and practices relating to female sexuality for instance silence on sex and utmost submissiveness have been cited to play a role in young women’s poor or uninformed sexual decisions, choices and behaviours influencing young women’s susceptibility to HIV and AIDS infections (Leclerc-Madlala, 2001; Harrison, 2008; Reddy and Dunn, 2007; Dellar *et al.*, 2015). As evidence by the studies discussed above, passivity and naivety as ideal traits of femininity and female sexually, are often associated with no sex related discussions and communications between young women and adults (Weiss, *et al.*, 2000). Young women are as such not empowered to pursue and acquire prerequisite information on safe sex and protection from HIV and AIDS, from well informed personnel resulting in ignorance on sex (Harrison, 2008). A study conducted by Gumede (2018) in rural and urban Kwazulu-Natal verified the above stated assumptions. It was indicated young people including young women were not eager and open to freely discuss sexually related topics with parents and guardians mostly as a result of fear of disapproval. It was reported young people preferred having sex related discussions with peers who unfortunately often do not have correct information on sexual conduct especially on HIV and AIDS prevention.

Notions equating female sexuality to sexual naivety and no sexual exploration among young women have further been highlighted to present a challenge for young women to freely

access condoms even if they are freely available at local health centres (MacPhail and Campbell, 2006). Young women may be constrained in fear of attracting community gossip and guardians' backlash (Weiss *et al*, 2000). Young women bold to access condoms at local facilities risk being labelled prostitutes or immoral. Consequently, it has been indicated young women opt not to use condoms unless provided by partners. MacPhail and Campbell (2006) conducted a study among young people in a township in South Africa on challenges on condom usage among young women. Most of the young women who participated in the study expressed encountering hostility from nursing staff upon a visit at clinics to access free condoms. The participants expressed being bombarded with difficult questions while some threatened to have their parents or guardians informed of their sexual endeavours. Furthermore, some participants indicated they would not even be bold enough to access condoms at health facilities or shops as that would attract the labelling of a 'whore' or 'promiscuous' woman by the community and men they are in relationships with. It was noted such reasoning emanated from the notion that a 'noble' young women ought to be naïve on sexual matters.

Furthermore, scholars have reported that portraying ideal female sexuality as naïve and passive may normalize male superiority facilitating perceptions among young women that male control, coercion and violence are part and parcel of normal heterosexual encounters (Rao Gupta, 2000; Matrell, *et al*; 2009; Harrison *et al*, 2015; Abdool Karim, 2017). It has been postulated, such perceptions may inhibit HIV and AIDS prevention among young women in several ways. In cases of consensual relationships, young women may find it difficult to refuse sexual intercourse in cases they do not want to engage in such, often believing they ought to provide pleasure to their partners (Harrison, 2008). Macphail and Campbell's (2006) study on condom usage among young people provided evidence on the above assertions. A majority of young women indicated to have been forced into sex by their boyfriends but would not necessarily call it rape as they believed it was their duty to provide pleasure to the men. It has been highlighted, in such instances, often young women are not even empowered to request for HIV and AIDS testing to know their partners HIV and AIDS status prior to sexual intercourse or the use of a condom in fear of rejection (Hlabangane, 2014).

Young women holding to inferior notions of female sexuality are furthermore likely to condone, accept and not report any form of violence and abuse henceforth upholding the status quo and increasing risk to HIV and AIDS infections. Nota (2015) postulates gender-based violence as a strong variable contributing to increased vulnerability to HIV and AIDS infections among women. A study conducted in Soweto among antenatal women between the ages of 16 to 44 validated the above stated claim, by suggesting that there is a greater chance of HIV and AIDS infection among women in relationships featuring gender based violence (Dunkle, Jewkes, Brown, Gray, McIntyre and Harlow, 2004). Women in such scenarios are more likely to engage in unprotected sex as it is difficult for them to negotiate for condom use or any protection measure. Women experiencing gender-based violence are also more likely to have multiple partners and readily exchange sex for money or drugs, as escape and coping mechanism, increasing risks to infections (Nota, 2015).

Lastly, subscribing to notions that equate female sexuality with passivity and submissiveness can promote silence on rape among young women, which may normalize the practice (Nota, 2015). Rape increases the probability of HIV and AIDS infections to victims in cases where the perpetrator is positive, as it normally involves force which more likely lead to tearing of

the vaginal wall increasing the pathway for HIV and AIDS virus (Tallis, 2010; Nota, 2015). Rape continues to be a major dilemma plunging the lives of young women in South Africa (Ackermann and De klerk, 2002). Research documents that more rape cases are registered and occur in South Africa as compared to any country in Africa (Cohen and Vecchiato, 2019). Furthermore, more rape cases occur among girls and young women as compared to older women.

Femininity and female sexuality in contemporary South Africa

Over the past three decades, South Africa has undergone major political, social and environmental changes triggering cultural as well as social changes in most of its communities (Mantell, Needham, Smit, Hoffman, Cebukhulu, Adams-Skinner, Exner, Mabude, Beksinska, Stein and Milford; 2009). Among others, democracy, modernization and foreign influence facilitated by the media has led to exposure to diversified cultures leading to the erosion and fusion of traditions, customs and values which once defined most black South African communities (LeClerc-Madlala, 2001).

Harrison (2008) postulates that social-political changes that have occurred over the past three decades in South Africa, have brought about major shifts to the sexuality terrain. Modernization and democracy have paved way to western media and foreign influence, with that newer ideologies and discourses on sexuality. South Africa currently accommodates a multiplicity of discourses on female sexuality. Three key discourses predominant include traditional discourse, Christian discourse and modern discourse on female sexuality (Harrison, 2008; Jewkes and Morell, 2010). The Traditional discourse of sexuality is predominant among the older generation especially in rural areas of South Africa. Fundamentally, this discourse advocates for the preservation and reinforcement of traditional cultural values, norms and practices for instance practices like Lobola, virginity testing, male circumcision etc (Leclerc-Madlala, 2001). In relation to female sexuality among young women the traditional discourse advances the promotion of practices like virginity testing to ensure young women remain 'whole' until marriage. Furthermore, it encourages women to be submissive and respectful towards males in general, especially in sexual relations and interactions. (Ngubane, 2016).

The Christian discourse on sexuality emerged in South Africa during the 19th century courtesy of missionaries who visited South Africa (Jewkes and Morell, 2010). In the process of converting people to Christianity, missionaries advanced different standards of living to those initially practiced in most communities. Regarding sexuality among young people, the overarching message in this discourse was/is that sex is located in the realm of marriage mainly for procreation purposes. Predominantly, the Christian discourse to sexuality does not permit sexual discussion as well as sexual exploration among young women or young men alike upon reaching puberty. Female sexuality among young women is often associated with purity, chastity and submission (Jewkes and Morell, 2010). Within the parameters of marriage, it advocates for submissiveness of women to their husbands emphasizing that men are the head of the family (Jewkes and Morell, 2010).

The last discourse referred to as 'modern' is heavily inclined to western ideologies of living facilitated by the western media and modernization upon the dawn of independence and democracy in South Africa (Bhana and Anderson, 2013). This discourse is liberal in nature advancing equal rights and freedoms for men and women. Key notions advocated in this discourse in line with female sexuality among others include the independence of women in

all spheres of life, freedom of expression and sexual autonomy and exploration in sexual relationships (Yacoob, 2016). As a result of this discourse it has been indicated “there has been a conspicuous emergence, primarily in urban settings, of modern girl femininities, associated with the exercise of independence, the use of specific fashion commodities and explicit eroticism” (Jewkes and Morell, 2010:20). On a larger scale, the modern discourse on sexuality recognizes women as active participants in sexual encounters and relations, with autonomy over their bodies. It further resists and challenges notions that women are sexual objects to satisfy male desire arguing they too have sexual needs and ought to pursue relationships to satisfy such (Yacoob, 2016).

The emergence of a multiplicity of discourses on sexuality has led to major shifts in the sexuality terrain among black African societies the Zulu people inclusive. In relation to Zulu people the shifts have triggered the modification as well as the end of some cultural practices and norms dominant in traditional societies (Ngubane, 2016). As an example, a cultural practice that has attracted debate and contestation in contemporary South Africa is virginity testing (Rankhotha, 2004). Some quarters have cited virginity testing as a violation of the rights of women and a basis of abuse, not conducive for a modern society committed to the equality and improved livelihood of women (Maluleke, 2004). Additionally as already highlighted, virginity testing has been highlighted as a contributing factor in increased vulnerability of young women to HIV and AIDS, increasing their risk to rape among others (LeClerc-Madlala, 2001). Calls have been made for the abolishment of virginity testing leading to the end as well as modification of the practice in some communities especially urban areas of South Africa (Rankhotha, 2004; Leclerc-Madlala, Simbayi and Cloete, 2009; LeClerc-Madlala, 2012).

Ngubane (2014) indicates that shifts in cultural practices and norms as elucidated above have led to the fluidity and diversity of femininity and female sexuality among Zulu people in South Africa impacting women’s perceptions. Women in South Africa are constantly negotiating and re-negotiating the meanings of female sexuality based on the available discourses (Jewkes and Morell, 2010). Whilst due to strong pressure from communities, some women are still obliged to adhere and uphold traditional notions; some women in urban areas, often disconnected from their communities do not strictly conform to cultural values and norms (Bhana and Anderson, 2013). Many women in urban areas of South Africa blend preferable traditions together with new western notions on gender, femininity and female sexuality (Ngubane, 2014). Furthermore, there are women in contemporary South Africa who consider themselves altogether ‘modern’ subscribing to notions that they are equal to men and empowered to control every realm of their lives, sexuality inclusive (Mantell, Needham, Smit, Hoffman, Cebukhulu, Adams-Skinner, Exner, Mabude, Beksinska, Stein and Milford, 2009).

Mantell *et al.*, (2009) opines that the modern discourse of female sexuality is more likely to be mirrored among female students who are currently pursuing education in tertiary universities as most of them were born during democracy and modernisation in South Africa. Furthermore, it is argued that the university itself provides a different environment and more opportunities with regards to exploration and engagement with modern ideas on sexuality (Levin, Ward and Neilson, 2012). Whilst young women in communities or homes are more likely to be under parental surveillance who are more likely to reinforce either traditional or Christians notions of sexuality, the situation is different in tertiary institutions (Staden and Bodenhorst, 2009). Independence and female empowerment in relation to bodies and sex

are central themes advanced in most universities in South Africa (Reddy and Frantz, 2011). As such young women in universities are more likely to undergo processes of negotiating with a multiplicity of discourses in relation to how they perceive female sexuality impacting sexual behaviour. It has however been pointed out that there is a paucity of research on how young women in contemporary South Africa perceive female sexuality especially specific to context for instance the university, highlighting the need for more studies (Mantell *et al.*, 2009). Also, the few studies conducted, discussed in the section below, reveal variations, underlying the need for more contextual based studies.

Young women's perceptions of female sexuality in contemporary South Africa

Studies, though few, have been conducted in South Africa, interrogating shifts in young women's perceptions on female sexuality and femininity triggered by changes in the social-cultural terrain in the country. This section presents a few of those studies specifically from the region of KwaZulu Natal and mostly from the University setting, the location and context for this study.

Bhana and Anderson (2013) conducted a study among coloured young women between the ages 16 to 17 in a township location in KwaZulu-Natal. The aim of the study was to investigate participants' perceptions and positioning in heterosexual relationships. Against a backdrop of literature representing African female sexuality as docile and passive, the study focused on coloured young women in bids to fragment the notion of homogenous African sexuality and highlight the need for more contextual based research even among groups of young women not flagged as engaging in risky sexual behaviours. Key themes in the study included women's sexual desire, same sex desire and agency and constraints in heterosexual relationships. In relation to agency and constraint relevant to this study, the findings indicated that most of the participants perceived themselves as empowered to communicate with their partners on sex issues. Furthermore, participants expressed they perceived themselves as capable to equally contribute in decision making on whether they engage in sex or not and set the terms and conditions for sexual engagement. The study observed that though the young women were aware of cultural values and norms that regulate female sexuality within the community, the young women were making strides in resisting them in favour of newer, mostly modern notions of female sexuality.

Nevertheless, upon examination of participants' sexual conduct and behaviour in heterosexual relationships, major contradictions were noted. It was observed some participants indicated being coerced into unprotected sex following pressure from their partners and others, the quest to be loved by partners. This finding highlights the complexity nature of female sexuality in a modern society that still accommodates patriarchal traditional ideas on female sexuality. Bhana and Anderson (2013) however postulated that though some of the study findings revealed some of the study participants as less powerful, they were not powerless. It was indicated, the young women in the study were resisting male pressure and traditional connotations on female sexuality in subtle ways. As an example, it was observed some participants were requesting for money from boyfriends as conditions for sex while others indicated engaging in sexual intercourse for personal gratification. The two scholars highlighted the urgency for more contextual based research on young women in South Africa to provide more insights on how they understand and position themselves in heterosexual relationships and implications on vulnerability to the HIV and AIDS (Bhana and Anderson, 2013).

Another study was conducted at the University of KwaZulu-Natal among female students of Zulu origin on the definition and perceptions of a 'good Zulu woman' (Ngubane, 2016). Of interest was an exploration of female students' perceptions, views and reactions to normative attributes of a good Zulu woman as per traditional Zulu culture in a contemporary society. The study further focused on examining general attributes associated with a Zulu woman in relation to femininity as well as female sexuality.

The findings in Ngubane's study revealed continuities as well as changes in line with definitions and perceptions of a good Zulu woman. It was reported many of the study participants described a good Zulu woman as embodying traits like respect, kindness and nurturing, inclining towards traditional notions of femininity in Zulu culture. The participants nevertheless highlighted other attributes divergent from traditional dominant notions of femininity in Zulu culture. Among others divergent attributes included independence and self-reliance. The young women were of the view that as a result of the changes that have occurred in South Africa over the past decades, it is important for young women to depend on themselves and not solely depend on men. However, in relation to sexuality, there was a strong view of marriage, childbearing and submission to husbands as an epitome of a woman's life. This study again highlighted the complexities of femininity and female sexuality in contemporary South Africa calling for more contextual based research.

Lastly, Mantell *et al.* (2009) conducted a study at a tertiary institution in South Africa exploring African female students' perceptions of gender and sexuality in modern South Africa, specifically on how they have changed over time. The study findings reported that participants indicated there have been major shifts in South Africa pertaining to definitions, roles and expectations related to femininity and female sexuality more pronounced in urban areas and the University (Mantell *et al.*, 2009). The study participants indicated that democracy and modernization have paved way for rights and opportunities for women with that liberation and freedom. It was observed, the study participants did not consider themselves as docile or passive members of the society but rather active participants, able to contribute to development through contributions in the workplace and various spheres of life.

In relation to sexuality, the study participants expressed that though practices and norms that expect women to take subordinate roles in relationships persist, there is a crop of women emerging in South Africa claiming autonomy over their bodies (Mantell *et al.*, 2009). As an example, the young women were of the perception that many urban educated young women can ably make fundamental sexual decisions relating to family planning, protection during sex, initiating and refusing sex and changing sexual partners among others. Participants were of the view that it is not simply a responsibility but an obligation for young women to be proactive in sexual relationships and encounters to protect themselves from ills like HIV and AIDS. A majority of the participants indicated taking an equal role in regard to sexual decisions and practices in their relationships to ensure they are protected from sexual ills like HIV and AIDS.

The above presented studies emphasize the complexity and contextual nature of perceptions of female sexuality, sexual decisions and behaviours. It is precarious to treat young women as a homogenous group assuming they subscribe to similar notions and perceptions of female sexuality impacting sexual behaviour and decisions with similar implications in relation to HIV and AIDS prevention. MacPhail and Campbell (2006) argue

that one reason why HIV and AIDS pandemic has escalated among young women has been tendencies by researchers to make sweeping generalisation about all young women's sexual lives and experiences based on dominant groups, without zeroing in on an audience. Eventually such has led to one size fits all interventions, undermining effectiveness. It is therefore imperative to conduct this study, to better understand how young women of Zulu origin at the University of KwaZulu-Natal, Howard College, perceive female sexuality within the university setting and implications on sexual lives and HIV and AIDS prevention.

Conclusion

This chapter discussed literature relevant to female sexuality among young women in South Africa, its impact on young women's perceptions and sexual behaviour in heterosexual relationships and implications on HIV and AIDS prevention choices. This chapter highlighted female sexuality as a complex phenomenon hugely impacted by cultural norms, beliefs and practices of people in a particular environment and era. It engaged with studies documenting how societal discourses on female sexuality dominant in traditional South African societies especially among Zulu people constructed female sexuality contributing to a powerless perception of femininity among young women. Furthermore, it highlighted the negative implications of such on young women's sexual behaviour especially in line with HIV and AIDS prevention.

Nevertheless, the chapter acknowledged shifts in the cultural terrain in contemporary South Africa facilitated by democracy and modernization. On the basis that female sexuality is a cultural construct, it therefore highlighted the urgent need for more contextual based research on how young women understand sexuality in line with changing cultural norms and practices as per context and implication on sexual behaviour. The chapter highlighted the University, among context requiring examination, as they present newer values and norms on female sexuality different from those presented in communities. An understanding on how young women negotiate and experience sexuality in different context is imperative to contribute to the body of knowledge on whether young women are exerting control over an area crucial to their improved livelihood in relation to HIV and AIDS prevention or not.

CHAPTER THREE: THEORETICAL FRAMEWORK

Introduction

This study mobilised the culture-centred approach and empowerment theory as theoretical lens through which the study was understood. This chapter provides an in-depth discussion of the theories, highlighting the origins, characteristics and constructs. Furthermore, the chapter discusses how the two theories were applied and contributed towards providing grounding for the study.

In summary, the culture-centred approach underlines the role and impact of immediate culture on an individual's decision-making process and behaviour, acting either as an enabling or hindering factor to an individual's well-being. In line with the study, CCA informed the exploration of female sexuality among young women in line with cultural values, norms and beliefs within the immediate context and implications thereof. The empowerment theory elucidates on processes and outcomes necessary for an individual to gain mastery over one's life to improve livelihood. Empowerment theory aided in understanding and an assessment of whether perceptions of female sexuality among the study participants were translating towards empowerment or not specifically in line with HIV and AIDS prevention choices. Overall, the two theories together provided guidance in exploring the impact of the Howard College, on female students' perceptions on female sexuality and impact on sexual behaviour and HIV and AIDS prevention.

Background to Culture-centred approach

Culture-centred approach was championed by Mohan J. Dutta, based on criticism directed towards dominant approaches in health communication as highlighted by Airhihenbuwa (Airhihenbuwa and Obregon, 2000; Dutta and Basu, 2011). As an approach, CCA draws insights from four key disciplines namely: critical theory, cultural studies, postcolonial theory and subaltern studies (Dutta-Bergman, 2005). Critical theory underlines the interplay of three societal concepts, power, hegemony, and ideology in upholding supremacy over the "discursive and material spaces of capitalist societies" (Dutta, 2007:313). Critical theory brings to light how people in power make use of taken for granted societal apparatus and systems, to hold onto resources, with an agenda of continuing to hold the underprivileged in subjugation (Douglas, 1989; Thompson, 2017). In bringing such systematic injustices to light, critical theory aims to offset societal dominant configuration and approaches, to subvert the status quo (Fuchs, 2016; Thomson, 2017). Drawing from that perspective, CCA interrogates how people in control of discursive spaces produce and use knowledge to advance their own agendas at the interest of less powerful groups of society (Dutta, 2008). Furthermore, it offers scholarship on subverting and addressing such conceptualisation for the empowerment of the marginalised.

Cultural studies as a discipline emphasises the pre-eminence of context i.e. people's values, beliefs, practices and norms in the construction and perception of reality (Johnson, 1989; Baker, 2004). It draws attention to the social construction nature of every aspect of an individual's life, postulating individual actions and behaviours cannot be divorced from peoples' environment (Johnson, 1989; Galbin, 2014). Borrowing from cultural studies, CCA emphasises the "social constructions of discourse and the culturally situated nature of health narratives" (Dutta, 2008: 10). In addressing societal problems especially health it emphasises the centrality of addressing social structures that define people to facilitate

agency as opposed to mere implementation of culturally sensitive programmes aimed at changing individual beliefs, attitudes and behaviours (Dutta, 2007).

Post-colonial theory, as the name suggests aims at addressing the impacts of colonialism. Primarily, it challenges and deconstructs European conceptualisation of reality, its tendencies of 'othering', advancing the superiority of European people at the expense of colonised societies as a tool for exploitation (Lazare and Andries, 2009; Parsons and Harding, 2011). CCA therefore draws attention to "dichotomies of the first and third world, the north and the South...to see how these dichotomies play out in who gets to decide the health agendas" and further questions the "values underlying this dichotomy..." (Dutta, 2011:11). It underlines the derogatory role of such perspectives to peoples' culture leading to health communication programmes that do not benefit marginalised communities. Alternatively titling towards subaltern studies it advances "the desire to rewrite the narratives that constitute the discursive spaces of history by listening to locally situated voices that have been systemically erased" (Dutta, 2011: 7). It is only through such engagements that local health problems and solutions are identified.

The need for Culture-Centred approach

The culture-centred approach reacts to hegemonic tendencies of mainstream communicative systems and processes that often amplify the voices of people with power and control while conversely silencing voices of the marginalised members of the society (Duta, 2014: 69). Hegemonic communicative systems position marginalised communities as 'backwards' and 'unlearned' in need of education and civilisation. Hegemonic communication systems tend to employ linear or top down approaches to communication arguing such a setting is crucial to facilitate the transfer of new ideas, beliefs and advanced ways of life (Dutta and Basu, 2007). Conceptual frameworks, assumptions and methodologies constituting dominant communication paradigms often "filter what is included, the tools that are used and more fundamentally, who gets to provide the explanation and make the prediction" (Dutta, 2008: 45).

CCA raises three key challenges to hegemonic conceptualisation of communication namely its individualistic, expert oriented and de-contextualisation nature (Dutta-Bergman, 2005). Firstly, CCA argues that central to hegemonic communicative approaches was/is the need to induce behaviour change arising from the assumption that decision making stems from personal beliefs, knowledge and cognition (Dutta, 2014; Coetzee, 2017). CCA challenges the one-dimensional nature of such an approach arguing it fails to acknowledge the impact of context and culture in decision making which are fundamental aspects of some society's especially African societies.

Secondly CCA highlights that hegemonic communicative systems viewed an individual as rational, as such able to reason and make sound decisions without external influences. It is on that premise that hegemonic communicative systems focussed on adding new beliefs, reinforcing desirable one's and counterattacking undesirable beliefs to induce individual behaviour change (Dutta-Bergman, 2005). CCA highlights the problematic nature of such reasoning specifically its inability to account for instances where individuals make impulse decisions without much thought as a result of the context and outside circumstances (Coetzee, 2017).

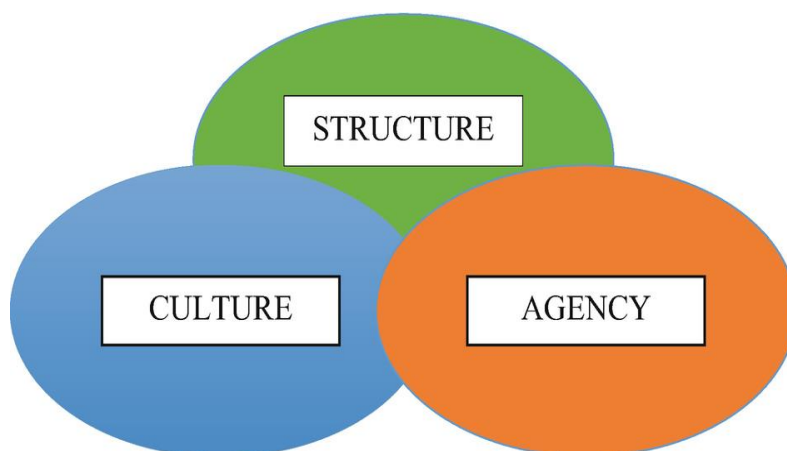
Thirdly, CCA critiques dominant communication approaches tendencies in de-contextualisation conceptualisation of communication (Dutta, 2011). In focussing on an individual, CCA argues that dominant communication approaches fail to make visible the role of structures and general surroundings on decision making. CCA argues that one's environment can be a constraint or facilitator of behaviour, hence the need for a holistic approach to communication (Dutta, 2014). CCA therefore highlights the need for community and individual involvement in decision making as opposed to expert oriented approaches which fostered the annihilation of individuals from processes crucial to their well-being leading to disempowerment (Dutta and Basu, 2007).

In summary, as a way of reversing the status quo and eliminating communicative exploitation, CCA postulate a new approach to communication, one that is holistic, empowering and participatory (Dutta-Bergman, 2005). CCA champions participation and engagement of ordinary members of society in communication and addressing problems facing individuals and communities. CCA postulate that ordinary members should be the ones in the forefront in suggesting solutions to issues impeding their livelihood as they are experts of their lives (Dutta and Basu, 2007). CCA as a framework postulates that communication approaches ought to be sensitive to culture, as rarely do individuals make decisions on their own. In acknowledging the centrality of culture, CCA highlights opportunities in recognising systems and processes acting as structures either constraining or liberating individual's agency (Dutta, 2011). To address structures CCA champions and advances dialogue and listening as tools for emancipation of marginalised groups (Dutta, 2007). In this study, CCA key constructs provided a theoretical base for this study. Additionally, CCA key tenants of dialogue and voice informed the study methodological approach and data collection as explained in detail in subsequent sections.

Culture, structure and agency

Culture centred approach as a communicative framework is rooted in the interaction between culture, structure and agency with communication at the meeting point (Dutta, 2014:72).

Figure 3.1: The Culture-Centred approach to health communication



Source: Dutta (2020:35)

Culture

In the context of a culture-centred approach to health communication, culture is defined as “shared values, practices, and meanings that are negotiated in communities, grounded in the notion that communities are heterogeneous sites of contestation and meaning making” (Dutta, 2018:241). Dutta’s theorisation of culture among others draws attention to the collective meaning creating nature of culture. Members of a given society collectively construct and assign meanings to physical, biological, emotional and mental aspects of life, meanings that often do not have any inherent connection to the phenomena (Uwah and Wright, 2011). As such culture provides a framework through which people understand, interpret and experience the world around them (Garuba and Raditlhalo, 2008, Nota, 2015). An Individual’s understanding and interpretation of a phenomenon, even perceptions about self, are not products of intrinsic abilities but a negotiation with their surrounding such as shared beliefs, values and practices (Dutta, 2018).

The collective nature of cultural meanings within a group infers the heterogeneous nature of culture from one society to another, and within society, one grouping to another (Dutta, 2018). It entails that different societies attach different meanings to similar concepts which in turn impact worldviews. On that basis, culture-centred approach emphasises the importance of examining individual understanding of social context specifically cultural values, norms and beliefs to obtain insights on health problems or issues impacting marginalised communities and sustainable approaches to address such. CCA theorisation of culture aids this study’s understanding of sexuality from a social constructionist stance. In this study sexuality is recognised as a result of negotiated meanings created by members of a group within a particular setting. The study therefore acknowledges variations in the definition and perceptions of female sexuality within various contexts in South Africa. It is on that premise, that the study examined how female students at UKZN perceive female sexuality within cultural values, practices and norms in the University context but also; acknowledging the communities where the students come from and within which UKZN is situated.

CCA further conceptualises culture as “a complex and dynamic web of meanings that is continuously in flux, as it interacts with the structural processes that surround the immediate culture” (Dutta, 2007:311). Individuals in the society are constantly interacting with each other exploring and developing new ways of approaching life based on situations and circumstances. In the process, some cultural meanings are contested, and new meanings are created. CCA henceforth views culture as a fluid concept subject to continuous changes depending on changing times and meanings (Dutta, 2018). As societies undergo changes for instance due to the impact of global or national shifts in political and economic landscape among others, so does culture. Changes in society may trigger changes in cultural meanings leading to modifications or altogether co-constructions paving way to newer worldviews impacting behaviour (Dutta, 2007).

The dynamic, fluid nature of culture and meanings co-constructed and constructed thereof on various aspects of life, in this case sexuality highlights the need for the continuous examination of sexuality among young women in South Africa. South Africa as a society is constantly evolving as a result of both global and national changes for instance democracy, modernisation, coming in of migrants, changes in social systems etc (Soontiens and De Jager, 2008; Sibani, 2018). The above stated changes in South Africa have led to the

changes in the cultural terrain as they have demanded changes in approaches to life. Female sexuality like every other important aspect of life, has been impacted in the process evidenced by changes and modifications on sexual values, beliefs and customs, for instance the end of virginity testing in some South African black communities (Leclerc-Madlala, 2001; Mantell *et al.*, 2009; Rafudeen and Mkasi, 2016). Furthermore, contemporary South Africa, especially urban settings, the University being among them, accommodates a multiplicity of notions of female sexuality some promoting the freedom and equality in sexual relations between men and women (Nkosi, 2011; Levin, Ward and Neilson, 2012; Mutinta, *et al.*, 2013). It is imperative to explore the impact of such changes if any, on cultural meanings pertaining to female sexuality and implications on young women in South Africa.

Structure

Structure as per CCA is defined as “the organization of social systems, the patterns of distribution of resources, and the patterns of control of these resources that are inherent in the production and reinforcement of social inequities” (Dutta, 2007: 319). CCA elucidates that structures operate either as enablers or hindrances to peoples’ ability to access resources. Nevertheless, in most cases CCA highlights that structures often systematically privilege people in power as they often have the upper hand in the organisation process according them more resources at the expense of ordinary members of society (Dutta, 2018). Resources range from material, communicative as well as health services among many others. Structures on the other hand comprise rules, policies and guidelines to be followed in order to access the resources (Dutta, Ban and Pan, 2012). CCA advocates for the need for ordinary members to be aware and engage with structures through participation among others as a way of negotiating and possibly deconstructing structures to improve livelihood (Dutta, 2018).

This study focuses on communicative resources, specifically, discursive spaces for knowledge and meaning creation on female sexuality among young women. Structures comprise systems, processes and notions dictating definitions of female sexuality impacting young women’s perceptions on female sexuality and sexual behaviour within communities and Howard College. Guided by insights from CCA the paper analyses the impact of rules and expectations on female sexuality on young women both in communities and at the University of KwaZulu-Natal, Howard College. Specifically, the study explores whether the rules and norms on female sexuality enable or hinder young women’s freedom in making informed and empowered choices regarding sexual choices, behaviours and actions related to HIV and AIDS prevention.

CCA further categorises structures at three levels namely: macro, meso and micro level (Dutta, Ban and Pan, 2012). At macro level, structures comprise global or national social systems that impact access to resources for instance global or national policies. In reference to the research topic, structures at macro level include global and national laws or policies that either guarantee or inhibit the equality of men and women or policies abolishing cultural values that control and negatively impact female sexuality. At the meso- level, structures include environmental influences specifically within one’s community, society or ethnic group (Coetzee, 2017). In the context of this study structures at the meso-level comprises norms and values on female sexuality within the community for instance among the Zulu people of KwaZulu-Natal.

The micro level addresses and focuses on structures in one's immediate context. Context refers to a "rich web of intertwined local environments within which health meanings are constantly negotiated" (Dutta, 2007: 320). Howard College for instance is a context falling under the micro level. CCA postulates that how societal members position themselves in the web of meanings and immediate culture in general act as a structure. An individual can reinforce dominant meanings, oppose dominant meanings or negotiate with dominant meanings impacting livelihood. Regardless of the differences in positioning, one aspect is common, every decision, choice and action an individual make is a result of immediate norms and values, which later impact the quality of life (Dutta, 2007). This study aimed to understand how young women at UKZN, Howard College position themselves in the web of meanings at the university and in their communities regarding what it means to be a young woman.

CCA highlights it is crucial to gain a sense of understanding of the structures that constrain or liberate different groups of society access to resources (Dutta, Ban and Pan, 2012). Knowledge of structures provides insights on ideal mechanism to enable communities to overcome life hindrance, leading to agency, a third cornerstone of CCA (Dutta, Ban and Pan, 2012). An exploration of young women's perceptions and understanding of female sexuality, as in this study, provides insights regarding young women's sexual behaviour aiding in understanding and addressing challenges such as increased HIV and AIDS vulnerability among young women in South Africa.

Agency

Agency refers to "the capacity of cultural members to enact their choices and to participate actively in negotiating the structures within which they find themselves" Dutta (2008: 7). Agency is located at its interaction with culture and structure (Dutta, 2011). Fundamental in agency is empowering marginalised communities to enable them challenge structures that inhibit them from actualising their potential. Among others agency is facilitated by active participation and engagement of people in the community in issues pertaining to their livelihood. Through engagements, community members are empowered to contribute towards creation of solutions to their problems which is necessary for their empowerment (Dutta, 2018).

Agency "embodies communicative actions that negotiate with structures" (Dutta, Ban and Pan, 2012: 7). Agency is a result of ordinary members given an opportunity to engage with cultural meanings, some possibly acting as hindrances to well-being. Engagement with structures enables people to become aware of systematic marginalisation and exploitation holding them in oppression (Dutta, 2018). Engagement also facilitates the negotiation or challenge of the meanings, leading to the construction or modification of meanings. Overall, agency enables ordinary and marginalised people in the society to take charge and control over their lives leading to improved well-being.

In the context of this study, CCA assumptions on agency were utilised in the process of data analysis, to assess the impact of young women's perceptions of female sexuality on young women's ability to take charge of their sexual decisions and behaviours. Literature in South Africa documents some cultural notions of female sexuality as contributing factors to young women's disempowered perceptions of female sexuality leading to vulnerability to HIV and AIDS infections (Harrison, 2008; Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016). Therefore, the study further explored the impact of perceptions on

female sexuality on young women's agency in relation to HIV and AIDS prevention choices and behaviours in heterosexual relationships.

Dialogue and voice

CCA describes dialogue and voice as empowering tools for transformation and agency (Dutta, 2014). Dialogue challenges and deconstructs dominant paradigms of communication by deliberately accommodating unpopular voices of ordinary members of the society. Dialogue provides a platform for marginalised and ordinary members of society to voice out concerns and hindrances to well-being providing opportunities for contextual based solutions (Dutta, 2018). Dialogue elevates marginalised groups of society to partners in the co-construction of narratives and knowledge inducing new liberating possibilities. It is through dialogue that ordinary members find opportunities to question otherwise taken for granted societal conventions shattering dominant foundations whilst conversely laying foundations for new worldviews. It is argued "when the marginalised are recognized and represented in discursive spaces of the mainstream, alternative rationalities and imaginations from the margins start taking root in the dominant discursive spaces" (Dutta, 2014:74). CCA postulates that such processes are empowering to individuals leading to the enactment of agency.

Dialogue and voice as purported by CCA informed research methods applied in this study. This study adopted participatory action research (PAR) which promotes dialogue to provide marginalised groups of people access to discursive spaces (Selener, 1997; McGarvey, 2007). Like CCA, a fundamental objective of PAR is to ensure that marginalised groups are part and parcel of all processes in the identification of issues affecting their wellbeing and most importantly in developing solutions (Macdonald, 2012). In exploring young women's perceptions of female sexuality, this study attempted to initiate dialogue on the topic among young women who participated in the study, thereby offering them a communicative space where they could articulate their views and be heard. This study further facilitated dialogue and voice, by providing an opportunity for young women to contribute on literature on female sexuality by giving a first-hand account on the subject and possibly begin to take steps towards deconstructing discourses on female sexuality that exploit and oppress their livelihood.

Applying Culture-centred Approach

In the context of this study, CCA informs the study objectives, research questions, methodological framework and data analysis. CCA highlights the impact of culture and immediate context on peoples' livelihood acting either as opportunities or barriers to resources and in turn wellbeing. It is on that premise that this study aimed at investigating the impact of context and culture on young women at Howard College perceptions on female sexuality to understand its impact on sexual behaviour. With a background of high HIV and AIDS incidences among young women in South Africa, the study further aimed to examine implications of the perceptions regarding HIV and AIDS prevention choices among young women. In this sense, CCA assumptions on structure, culture and agency informed the studies research questions and objectives.

CCA further highlights opportunities for marginalised and ordinary members of society to address structures impeding their well-being. CCA postulates participation, dialogue and voice as catalyst of agency offering opportunities for liberation (Dutta, 2014). Through dialogue and voice, ordinary members of society are given access to discursive spaces

facilitating opportunities for them to identify and possibly address structures that hinder access to good health or other equally important resources in life. CCA assumptions pertaining to the importance of participation and voice informed the study's methodological framework. The study utilised a participatory action approach to research using bodymapping exercise, renowned for inducing self-reflection and participation among research participants. In employing participatory action research, the study aimed to provide a space for research participants to engage with definitions of female sexuality in their context and think through how that either negatively or positively impacts their sexual decisions and behaviours. Furthermore, ultimately, the findings of the study contribute to literature and dialogue on female sexuality in South Africa, providing young women in the study an opportunity to have their voices included.

Lastly, CCA key constructs namely structure, agency and culture aided in the process of data analysis. The above constructs facilitated in the organisation of data making it possible for the researcher to concentrate on a section of the data relevant to the study objectives. Furthermore, assumptions advanced by CCA provided a framework for the researcher to make sense of the data, infer interpretations and conclusions and respond to the study research questions. For example, assumptions under agency and structure, assisted the researcher in examining whether notions of female sexuality within a particular context i.e. Howard College are enablers or hindrances to young women's well-being through their capacity to either enable or hinder young women to be active agents in making decisions, choices and actions in line with sexual behaviours and HIV and AIDS prevention.

Limitations of culture-centred approach

Culture-centred approach to health communication offers immense opportunities for ordinary groups of society to gain access to discursive spaces, articulate problems impacting their livelihood and contribute to solutions to address health challenges (Dutta, 2018). CCA as a theoretical framework promises sustainable solutions to challenges facing communities due to its people and culture centric approach to health communication (Dutta, 2014). Nevertheless, for the purpose of this study limitations were noted in relation to applying the theory in addressing some of the research questions.

Firstly, CCA conceptualisation of culture does not emphasise the complexity of the concept in its entirety, to ensure the term is used with caution. The concept of culture is underlined as one of the most contested terms, with at least "one-hundred-and-fifty- seven definitions presented between 1920 and 1950 alone" (Johnson, 2013). That is the case as culture is very diverse, dynamic and heterogeneous. Even within groups recognised as one cultural entity, heterogeneities exist making research on cultural groups easily prone to error and hasty generalisation, if applied without clear thought and demarcations. CCA definition of culture does not provide an in-depth elaboration on specifications on what is included and excluded in identifying a cultural grouping other than geographical context and shared values. In this study it was not easy to narrow down a group of women to comprise one culture for examination bearing in mind UKZN accommodates women of different races, ethnic groups all with different values. Upon much thought and study on the concept of culture, the researcher arrived at the decision to focus on one group of young women from one ethnic group, which is Zulu from the region of KwaZulu-Natal. Nevertheless, aware of the possibilities of differences in norms and values on female sexuality even among Zulu people in UKZN, the study narrowed its scope to only female students at the University of

KwaZulu-Natal, specifically, those residing in students' residence at Howard College campus.

Secondly CCA proposes dialogue, voice and participation as tools for community members to deconstruct structures impeding wellbeing leading to agency (Dutta, 2018). However, CCA does not provide clear detailed guidelines and steps to be followed by practitioners and researchers in the process of implementation or evaluation, making it challenging to apply in practical settings. In this study, the researcher had to borrow insights from other theoretical frameworks for instance participatory action research to support the exercise. Additionally, CCA portrays the process of deconstructing structures as a straightforward simple endeavour though the process is complex and daunting in practical cases. Furthermore, though CCA highlights the importance of agency in improved livelihood, it does not clearly highlight what agency entails other than having control over one's life. With no clear parameters on what it entails to have control over one's life, addressing some of the research questions for instance, the influence of perceptions on sexual agency and HIV and AIDS prevention was a challenging task. To address the above stated limitation, this study mobilised CCA together with empowerment theory which offers specifications on what agency and empowerment entails to be discussed in detail in the subsequent section.

Empowerment theory

The word empowerment is defined as "a process by which people, organisations and communities gain mastery over issues of concern to them" (Zimmerman, 1995:581). A concept accredited to the work of Barbara Solomon, mainly in the book *Black empowerment: Social work in oppressed communities*, it elucidates on processes necessary in facilitating transformation in the lives of marginalised people in the society. Empowerment postulates peoples' transformation is facilitated through entering in their worlds, understanding their issues, context, and working together with them to identify impediments and develop solutions to overcome such (Perkins, 2010).

Fundamental in empowerment is a transformation from 'powerlessness,' a state in which an individual perceives their actions as being ineffective in influencing outcomes of events in their life to obtaining 'power' which is the ability of persons and organizations to exert control and induce intended, foreseen and unforeseen effects on others (Lord and Hutchison, 1993; Durden, 2010). As a theory, empowerment was proposed by Perkins and later advanced by other theorists. Empowerment theory provides a lens for understanding the processes and cognitive elements essential for individuals, groups and organisations to achieve empowerment (Zimmerman, 1995).

Over the past two decades, empowerment as a concept and theory has become a buzzword featured in discussions, conferences and literature in line with improving the welfare of marginalised groups (Hur, 2006). Increasingly it has been acknowledged that true development for people can only occur, if those who were initially denied 'power' are given the opportunity of mastery over their lives (Pigg, 2002). In the context of contemporary South Africa, with the commitment to equality for all, empowerment has become central in improving the livelihood and welfare of young women facing so many challenges, high HIV and AIDS infections among them (Reddy and Frantz, 2012; Dellar *et al.*, 2015; Abdool Karim *et al.*, 2017; Klaas *et al.*, 2018; Maughan-Brown *et al.*, 2018). Increasing the capacity of young women to enable them have autonomy over their lives and bodies by equipping them at an individual, interpersonal, organisational and political level has become key in

addressing a myriad of social ills, sexual exploitation and HIV and AIDS being among the major issues (Kharsany and Karim, 2016).

Empowerment theory offers principles and a framework for processes necessary for individuals, groups and organisations to exert control over their lives and consequences derived from such efforts (Zimmerman, 2000).

Empowerment represents a paradigm shift in leaders', scholars', and ordinary people's assumptions, attitudes, and values: a shift from emphasizing professional or other forms of authority to equal and valued partnerships, from keeping one's distance from clients and subordinates to working closely and collaboratively, from dependency to self-help, from illness to wellness, from ameliorating problems, deficits or risk factors to transforming and liberating one's self, organization, and community toward competence (Perkins, 2010:6).

The underlying notion in this theory is enhancing peoples' lives through an identification and understanding of peoples' oppression and working together to overcome life obstacles. It arises from an urgent acknowledgement of struggles facing an individual or a group of people as a result of either physical impediments e.g. poverty or disability or mental impediments such as sexism holding them from actualising their potential (Durden, 2010). Central in this model is an urgent need to foster and achieve social-political and cultural liberation for the oppressed (Turner and Maschi, 2014).

Underlying assumptions of empowerment theory

As per empowerment theory, empowerment is both a process and an outcome. It is argued that "actions, activities or structures may be empowering, and that the outcome of such processes result in a level of being empowered" (Zimmerman, 2000: 45). It entails that attempts to enable people, communities and organisation to exert control or understand how certain structures impede their livelihood are often in themselves empowering as they produce certain results even as meagre as awareness of oppression providing a foundation for change (Hur, 2006). In the context of this paper, conducting a study on how young women perceive female sexuality and implications on HIV and AIDS prevention choices can be argued to be an empowering process. A discussion on the topic ultimately contributing to literature on the topic has the ability to create awareness among young women and practitioners in general on how various contexts in South Africa present either barriers or facilitators to young women's ability to make informed decision in relation to sexual behaviour and HIV and AIDS prevention choices.

Empowerment is context specific and its meaning is multifaceted (Zimmerman, 1995). The definition and parameters of empowerment varies from one group of people to another as determined by the immediate environment. The characteristics of empowerment for women struggling with alcohol abuse are different from young women infected with diseases for instance HIV and AIDS. Additionally, empowerment takes various forms ranging from sociological, psychological, political etc (Hur, 2006). Furthermore, it is possible for a group of people to be empowered in one dimension of their lives whilst undergoing oppression in another dimension. In the context of this study, an exploration of young women's perceptions of female sexuality and implication on sexual behaviour examines empowerment among young women at a psychological and sociological level. Additionally, this study defines

empowerment in parameters of young women making choices and enforcing decisions on sexual activities in their relationships and in line with HIV and AIDS prevention choices.

Empowerment is dynamic (Hur, 2006). This refers to the fluid nature of the concept characterised by change and progress over a period. Zimmerman (2000) further elucidates that an individual or organisation has the potential to experience empowerment at a certain level or situation only to experience the opposite in another scenario. Zimmerman assertions highlight the complex nature of empowerment, requiring continuous efforts in the implementation as well as thorough examination and scrutiny in assessment.

As a theory, empowerment can be analysed at three levels; individual, group and community; each level is inherently connected to the other hence inseparable (Durdin, 2010, Pigg, 2002). The individual level explores how a person thinks about themselves, encompassing one's knowledge, skills and capacities and how that in turn impacts mastery over one's life. At this level, empowerment is mainly viewed as a personal experience or journey in gaining increased control over one's life thereby influencing or exerting control in decisions and actions that directly impacts one's life (Lord and Hutchison, 1993).

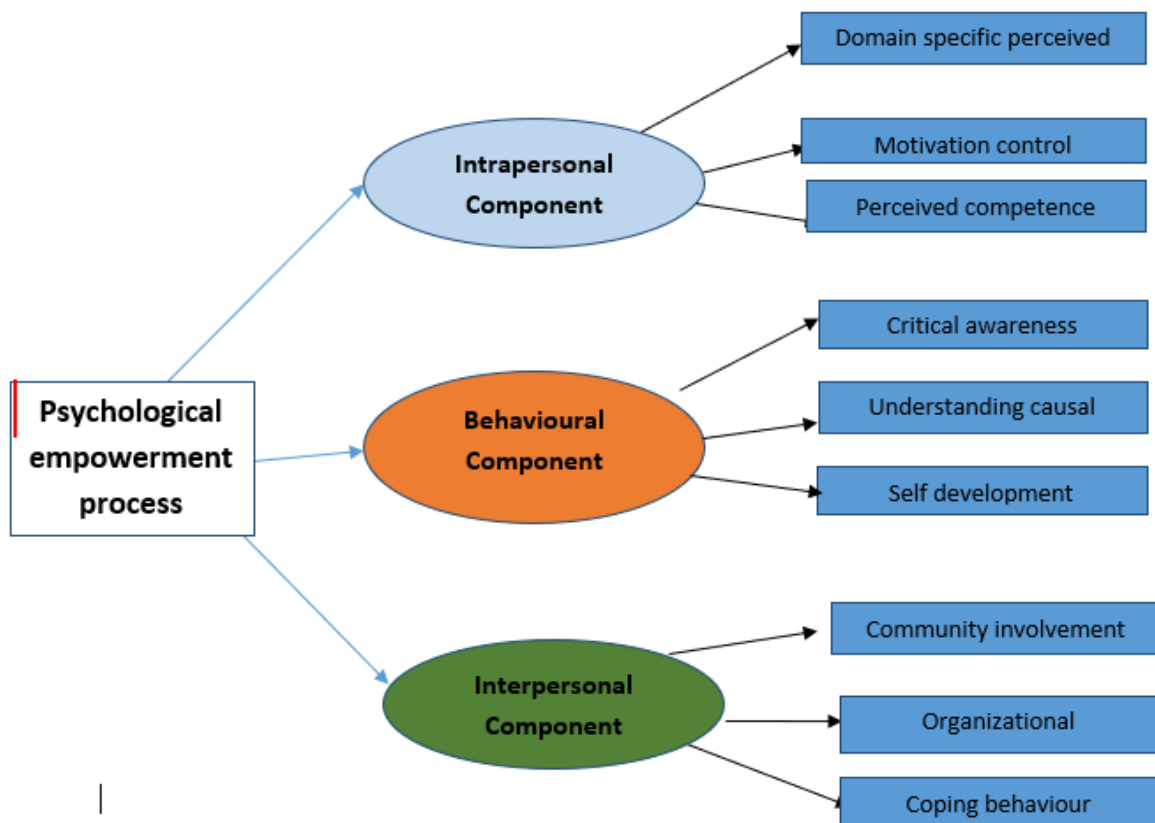
When empowerment is a collective initiative by a group of people facing similar oppression, determined to work together to effect positive changes, it is referred to as group empowerment (Lord and Hutchison, 1993, Pigg, 2002). For example, young women who have experienced sexual abuse at a university joining forces to fight sexual oppression, demanding more protection measures from authorities falls under this level. Lastly, community empowerment as the name suggests explores actions or processes involving a larger group of people especially a community working together as a team to improve their lives and the community (Pigg, 2002). A key distinction of this level from group empowerment is that it is often more organised and involves linkages with organisations, government and agencies to maintain the empowerment process and outcome (Zimmerman, 2000; Turner and Maschi, 2014).

It should be noted that for the purposes of this study, empowerment was applied and studied at an individual level however, in relation to the context. Empowerment analysis at an individual level explores "self-perceptions of competencies but includes active engagement in one's community and an understanding of one's social political environment" (Zimmerman 1995:586). This study examined young women's ability to exert control over sexual choices, decisions and behaviours as influenced by perceptions on female sexuality. However, that was examined in reference to the context and culture thereof i.e. discourses surrounding female sexuality within Howard College and communities where young women come from. This among others informed the study's adoption of empowerment theory together with the culture-centred approach.

Empowerment theory constructs at an individual level

Individual empowerment (IE) also referred to psychological empowerment is grounded on three key constructs namely personal beliefs of control, critical awareness of one's environment and involvement in activities to exert control (Zimmerman, 2000). The constructs are discussed in detail below in reference to the study.

Figure 3.2: individual/ psychological empowerment key constructs



Source: adapted from Zimmerman (2000)

Personal beliefs of control

Personal beliefs of control fall under the realm of intrapersonal component of IE. It includes one’s perceptions of self in so far as abilities and limits are concerned (Zimmerman, 2000). It comprises one’s belief that they can or cannot influence an outcome through either achieving set goals or avoiding an undesirable situation. It analyses the level of one’s confidence and determination which in turn impacts commitment in taking charge and control of decision making and actions in relation to self (Hur, 2006). This construct is recognised as the foundation of individual empowerment as it impacts subsequent decisions and actions taken by an individual. The more an individual perceives themselves as capable the more likely they are to behave in an empowered manner and vice versa (Zimmerman, 1995).

This construct informed the study's quest to explore young women's perception of female sexuality as they form the basis of young women's decisions and actions in relation to sexual behaviour. Studying that realm of young women's lives, uncovers whether young women in South Africa especially those privileged to be exposed to a multiplicity of notions on femininity different from traditional discourses in the context of the university reflects empowerment or not. This construct as such aided in addressing one of the key research objectives in this study i.e. an exploration of how young women perceive female sexuality. Responses in line with such supported the process of data analysis, offering insights on whether young women perceive themselves as capable of exerting control or not, informing the study interpretations and conclusions.

Critical awareness of One's environment

Critical awareness of one's environment draws attention to the role of the socio-political environment in an individual's state of power or powerlessness (Zimmerman, 2000). Also referred to as the interactional component of IE, critical awareness analyses the role of social context and the community at large in contributing to whether an individual is enabled to exert control over issues crucial to their livelihood or not (Lord and Hutchison, 1993). This highlights the crucial role of studying individual empowerment in relation to the environment, as more often individual perception of powerlessness is deeply rooted in structures and systems within their vicinity. An individual is faced with direct or indirect power blocks also known as casual agents that disenfranchise people from achieving set goals (Zimmerman, 1995). Casual agents may be physical, for instance the lack of material resources or mental for instance oppression due to societal norms perpetrating racism or gender disparities. As an example, in the context of young women and female sexuality in South Africa literature highlights cultural gender norms that negatively define and regulate femininity and female sexuality as power blocks hindering young women from being fully in charge of their sexuality, making them susceptible to HIV and AIDS infections (Harrison, 2008; Leclerc-Madlala, *et al*, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016).

Individual empowerment indicates that it is imperative for individuals to engage with stumbling power blocks in order to address and overpower them to facilitate the empowerment process (Bailur, Masiero and Tacchi, 2018). To induce the process of engaging with power blocks, Individuals first need to be aware or made aware of structures that impede them from progress and in what parameters (Zimmerman, 2000). Awareness of stumbling blocks is among others facilitated by participation and dialogue with people facing similar issues (Zimmerman, 1995). Through engagement with people facing similar obstacles, individuals learn and relate their personal experiences presenting opportunities to uncover structural and political roots of their oppression (Carr, 2016). Following awareness, individuals develop skills for instance analytical skills or obtain relevant knowledge to equip them to exercise more control (Bailur, Masiero and Tacchi, 2018). Additionally, participation and dialogue are stated as being in themselves empowering. Participation and dialogue allow people to work together with other people as a team, deriving feelings of belonging as well as opening opportunities for more liberating thought patterns and possibly actions.

In line with this study, this construct aided in examining the influence of notions of female sexuality at Howard College to gain insight on whether they act as stumbling blocks or not regarding young women's sexual decisions and behaviours in relationships. Critical awareness of one's context, offered insights in the process of data analysis enabling the

researcher to address one of the research objectives of this study, which was to understand the impact of UKZN, Howard College, on young women's perceptions on female sexuality.

Assumptions under this construct, further informed the methodological approach in this study. Engagement and participation of young women formed fundamental aspects of this research. That was achieved through a participatory action approach to research mainly through the use of a bodymapping exercise followed by semi-structured individual interviews as tools for data collection. Bodymapping is renowned for aiding optimal engagement with study participants, taking participants through processes of self-introspection thereof presenting opportunities for understanding of one's emotions, motivations, strengths and weaknesses (Lys *et al*, 2018). Bodymapping was therefore employed to spark young women's consciousness on processes they undergo in forming perceptions on female sexuality and how such impact their behaviour and HIV and AIDS prevention. That was followed by semi-structured interviews that provided a platform for participants to articulate ideas narrated on bodymaps as well as the research topic in general, providing opportunities for further engagement.

Activities to exert control

Activities to exert control, details actions taken by individuals either to contribute towards obtaining mastery of their lives or as a reflection that they have attained mastery over their lives. This is also referred to as the behavioural component of the theory, as it manifests in physical form changes occurring or that have occurred at a psychological level (Zimmerman, 1995). Among others Zimmerman (2000) suggests that participation is fundamental among activities reflecting an individual tilting towards empowerment. He states that interaction with others, especially those with similar interests facilitates the development of analytical and decision-making skills inducing control over the environment. Cattaneo and Chapman (2010) slightly differ with Zimmerman's conceptualisation in relation to participation as a key aspect in line with to activities to exert control. The two scholars bring to light the possibility of some individuals experiencing or feeling out of place in group settings posing as a hindrance to individual actualisation, contributing to a sense of powerlessness. Cattaneo and Chapman (2010) propose that any action that facilitates the fulfilment of one's goals should qualify as an action to exert control. In this study, participation and any other activity that enables an individual to achieve their set goals qualifies as activities to exert control.

A key research objective of this study was to explore how perceptions of female sexuality influence Howard College female students' sexual agency for HIV and AIDS prevention in heterosexual relationships. Insights under the construct, activities to exert control provided a lens through which the researcher was able to analyse the data to assess and infer whether the study participants reflected autonomy over sexuality or not at a behavioural level. As postulated by this construct, agency was interpreted in terms of sexual decisions and behaviours that reflected participants as participators as well as subjects regarding choices and decisions in heterosexual relationships. Furthermore, agency comprised deliberate sexual choices, decisions and behaviours on the part of participants to advance personal interest. Additionally, agency comprised participants' abilities to make and enforce HIV and AIDS prevention choices at free will.

Application of theory to study

The empowerment theory informed the study's research objectives, methodological framework and data analysis process. Empowerment theory postulates empowerment as a

complex process requiring engagement and removal of power blocks at structural level i.e. laws, culture etc, as well as power blocks at a personal level i.e. individual perceptions and mindsets. Previous research in South Africa documents some cultural norms and values on female sexuality as structural power blocks disempowering young women from making informed decisions and choices pertaining to sexual choices and decisions especially in line with HIV and AIDS prevention (Hlubangane, 2004; Dellar *et al*, 2015; Abdool Karim *et al* , 2017; Klaas *et al.*, 2018; Maughan-Brown *et al.*). However, Culture is a fluid concept subject to so many changes including environmental, social, political and global changes evitable in every society (Uwah and Wright, 2011; Sibani, 2018). The past decades have registered changes in cultural terrain in South Africa triggered by environmental, social and political changes for example modernisation, democracy etc (Rankhotha, 2004; Mantell *et al.*, 2009).

It is on that premise that this study was triggered to explore and understand real life experiences from young women on how the changes in the cultural terrain reflect in the sexuality terrain and how that in turn influence young women's perceptions of female sexuality. The study further aimed to uncover whether notions of female sexuality in the University of KwaZulu-Natal, Howard College, present either as facilitators or enablers to young women's ability to have control over decisions and choices in line with sexual behaviours. Additionally, on the premise that young women in South Africa continue to bear the heaviest brunt of HIV and AIDS (Abdool Karim *et al.*, 2017; Klaas *et al.*, 2018; Maughan-Brown *et al.*), the study further attempted to grasp whether the young women under study were able or not to enforce HIV and AIDS prevention choices in heterosexual relationship as a result of their perceptions on female sexuality.

Other than informing the research objectives, as already highlighted, individual empowerment informed the study's methodological approach. Empowerment theory postulates the engagement and participation of members of society facing particular challenges as crucial in creating awareness on problems as well as contributing in suggesting solutions to the challenges (Zimmerman, 2000). This study henceforth mobilised participatory action research tactics in data collection. Through adopting participatory approaches, this study aimed to generate in-depth data through providing young women with an opportunity to undergo processes of self-introspection, engage with other young women in their context and provided with a space to voice out their thoughts. Overall, findings of this study contribute to literature on young women and female sexuality, according young women the opportunity to be participators as well as subjects in narratives on female sexuality.

Lastly, key constructs under empowerment theory provided a lens for data analysis, enabling the researcher to critically examine the data and infer interpretations. Among others, empowerment argues that empowered individuals or individuals undergoing empowerment are more likely to reflect that in a belief they can influence outcomes as well as actions reflecting influence. In this study, the above construct enabled the researcher to assess and analyse whether young women under study reflected agency or not in relation to perceptions on female sexuality as well as sexual decisions and behaviour. Moreover, the construct of exerting control guided the researcher in inferring conclusions in line with the research participants' ability to make and enforce HIV and AIDS prevention choices in their sexual interactions and relationships based on collected data.

Empowerment theory at individual level criticism

A key aspect of empowerment theory specifically under individual empowerment that has been indicated as a limitation is its focus on the personal level (Lord and Hutchison, 1993; Gibb, 2007 and Perkins, 2010). It has been argued that it is almost impossible for individuals to overcome their fears, addictions or anything that entangles and hinders their well-being without the support of groups and others. Perkins (2010) elucidates that authentic and effective empowerment arises from people working together as a collective to identify and overcome forces. It is through such processes and interactions that individuals develop confidence, self and environmental awareness. It is also through such that people develop analytical, decision and leadership skills enabling them to be more in control of their lives.

Zimmerman (2000) however contradicts this criticism arguing that such reasoning emanates from a misinterpretation of individual empowerment.

He argues that IE “is not simply self-perception of competence but includes active engagements in one’s community and an understanding of one’s social political environment. IE also includes learning about controlling agents and acting to influence those agents” (Zimmerman, 2000:47). IE further studies the individual in their context hence factors in the role and impact played by the community. In the same vein it is noteworthy pointing that in this study, though the focus was on the individual such was done in reference and consideration of the context as well as engagements with others facing similar impediments.

Furthermore, considering the highlighted individualistic nature of IE, this study mobilised empowerment theory together with CCA. CCA moves beyond an individual by analysing individual behaviour in consideration of their contexts. The CCA indicates that the decisions and behaviours of individuals are an outcome of negotiations with norms, values and beliefs in the community and culture. CCA states it is imperative to be aware and take into consideration the community, social and political factors at work when understanding how community members make decisions. Assumptions under CCA therefore catered for aspects stated as absent in IE. Overall, this study applied CCA together with empowerment theory to explore young women’s perception of female sexuality within their cultural and sexual contexts and implication on sexual behaviour and HIV and AIDS prevention.

Conclusion

This chapter discussed the culture-centred approach and empowerment theory, theoretical underpinnings on which this study was grounded. The chapter elucidated on how the two theories together substantiated the premise for the study and informed the study methodological approach. Furthermore, the chapter discussed how the two theories aided in responding to the study research questions and supported the process of data analysis, aiding in examining how young women at Howard College perceive female sexuality and influence on sexual behaviour and HIV and AIDS prevention.

CHAPTER FOUR: METHODOLOGICAL FRAMEWORK

Introduction

This chapter presents the methodological framework for the study. It is aimed at providing a detailed account of the systematic approaches and perspectives that focussed and laid parameters for the research project, to substantiate findings. Comprised in this methodological framework is a narrative of the plans and strategies employed in exploring the topic under enquiry i.e. University of KwaZulu-Natal's female student's perceptions of female sexuality in contemporary South Africa and its impact on the young women's sexual behaviour specifically in line with HIV and AIDS prevention choices. Key areas elucidated on in this chapter include methodological approach, philosophical foundation and rationale behind the preferences. Furthermore, the chapter discusses the research paradigm, research approach, research design, sampling methods, data collection tools and data analysis methods. Towards the end, the chapter highlights the study's ethical considerations, reliability and validity.

Table 4.1: Methodological framework chart

Methodology chart	
Epistemological foundation	Social Constructionism
Research design/approach	Qualitative research
Sampling technique	Nonprobability Purposive sampling Snowball sampling technique
Data collection methods	Bodymapping workshop one on one semi-structured interviews
Data analysis	Thematic analytical approach

Research paradigm and design

Social constructionism

This research focused on young women at Howard College, UKZN and the meanings, interpretations and understanding they assign to sexuality based on socially agreed upon notions of female sexuality within their context. In order to effectively explore young women's perceptions on female sexuality and impact on sexual behaviour and HIV and AIDS prevention, this study employed social constructionism epistemology to offer a philosophical grounding and lens. Epistemology refers to "a theory of the nature of knowledge"

(Lukenchuk and Ulysse, 2013). It is concerned with explaining how people get to know, understand and define the world.

Social constructionism as an epistemological standpoint, champions the idea that knowledge is co-constructed (Galbin, 2014). It postulates that knowledge, meanings and what is perceived as reality is a result of interactions between members of the society within a environment (Amineh and Asl, 2015). Two fundamental aspects are core in this epistemological standpoint. The first aspect is its ultimate rejection of essentialist approaches to knowledge, meanings, reality and tendencies to place emphasis on a rational individual, whole and sufficient (Galbin, 2014). Though social constructionism acknowledges genetic and biological aspects unique to an individual it argues that “cognitive growth occurs first on a social level then it can occur in an individual” (Amineh and Asl, 2015:13). Social constructionism therefore draws attention to the role of society and culture in the generation of knowledge which is later learnt by individuals from infancy determining worldview and definition of reality. It states that knowledge and reality are fundamentally man-made, predetermined by social and cultural settings.

It is on that basis that through the lens of social constructionism, this study interrogated female sexuality among young women in line with norms, values, beliefs on sexuality as per cultures within the University of KwaZulu-Nata, Howard College. Social constructionism informed and supported this study’s approach to the topic under inquiry as a complex phenomenon one that young women are not born with however inducted in from a tender age as dictated and produced by community members. In the case of South Africa which comprises a multiplicity of cultures, this study recognised that a variety of meanings and interpretations exist in line with female sexuality, despite the fact that it is one phenomenon, hence the need for more contextual based studies on the topic. Secondly, social constructionism highlights and draws attention on the complex nature of the process of an individual learning and arriving at the definition of reality (Galbin, 2014). It states that the socially constructed nature of knowledge and meanings does not necessarily entail a homogenous conceptualisation of knowledge or reality among individuals in each context. People individually engage and negotiate with available meanings within their culture, based on different circumstances, developing perceptions, attitudes and conceptualisation of reality (Amineh and Asl, 2015). Social constructionism on that note argues that there is no such thing as a universal or absolute truth, as truth is predetermined by an individual’s experiences in a context.

The above assertions advanced and informed this study’s rationale and approach to understand how female students at UKZN’s Howard College learn and negotiate definitions and notions of female sexuality in the university but also within their wider culture to form perceptions on female sexuality. Despite a focus on a context, this study approached the study participants as individuals who undergo personal journeys and processes in interacting with available notions of female sexuality within the university to acquire personal meanings and interpretations. Overall, this study argued that an understanding of such definitions, perceptions and attitudes on female sexuality provides insights on realities constructed by the female students in relation to sexual lives and HIV and AIDS preventative choices.

Losantos *et al.* (2016), state that research from a social constructionism stance, should be viewed as a collaborative process between the researcher and participants. Collaboration requires a researcher to operate from a stance of not knowing, acknowledging research

participants as experts in their lives as opposed to assuming the role of an expert (Losantos *et al.*, 2016). Research thus becomes a deliberate attempt to facilitate the construction of new knowledge, fresh perspectives and approaches to life, paving way for liberation. It asserts that “the goal of research and scholarship is not to produce knowledge that is fixed and universally valid but to open up an appreciation of what is possible” (Galbin, 2014: 83). The philosophical underpinnings advanced by social constructionism in regards to research further provided insights for the study research design and data collection methods and tools. The Social constructionism informed the adoption of a research design that enabled and provided an environment where young women could freely express themselves as experts on their life stories and experiences and in a variety of forms. This study adopted a qualitative approach to research renowned for its ability to amplify voices of research participants to ensure their experiences are fully accommodated (Creswell, 2007). Furthermore, the social constructionism perspective contributed towards the use of bodymapping, a participatory action approach to data collection that facilitates optimum interaction between the researcher and participants.

Qualitative research

This study was interested in examining subjective complex variables, which are: attitudes, perceptions and behaviours from several young women. The study therefore utilised a qualitative approach to research. Qualitative research approach entails “an inquiry into the meaning individuals or groups ascribe to a social or human problem” (Creswell, 2007:74). A qualitative research design seeks to explore and examine how individuals relate, interpret or situate themselves in relation to an issue or phenomenon to unearth deep concealed information and gain insights on why things are in their state. This resonated with this study aim and interest to understand how young women form perceptions on female sexuality and sexual behaviours thereof, as a result of interacting with notions on how young women ought to act and behave in sexual parameters as prescribed by their culture. The focus was to understand how young women position themselves in the web of meanings on female sexuality to develop individual meanings and interpretations. Creswell (2007) highlights key characteristics of and when to use qualitative research that further validated the researcher’s choice of the approach. Qualitative research is conducted when there is need for an understanding of a complex issue. In the quest to respond to ‘why’ qualitative research goes beyond examining the exterior facets of an issue or phenomenon to an engagement with its intricate values henceforth dissecting the issue to uncover otherwise concealed aspects (Mason, 2002).

This study was triggered and motivated by high HIV and AIDS infections among young women in South Africa, four times higher than young men of the same age group and more pronounced in the region of Kwazulu-Natal (Harrison *et al.*, 2015; Abdool Karim, 2015; Klaas *et al.*, 2018). HIV and AIDS among young women is a complex dilemma in South Africa as it negatively impacts the lives of young women despite numerous efforts to address the pandemic. This study aimed to understand female sexuality more especially the perceptions and attitudes of young women towards female sexuality as well as the implications of these on sexual behaviour. In examining perceptions on female sexuality, the study further attempted to understand how the perceptions and attitudes can contribute to HIV and AIDS prevention choices or not. This study hoped that understanding these would contribute in addressing the question of ‘why are young women at a higher risk of HIV infections than young men in South Africa’. The complexity and seriousness of the topic at hand demanded

an approach with abilities to extensively interrogate and engage with the topic, in order to bring to light its intricate aspects, a characteristic of qualitative research (Mason, 2002).

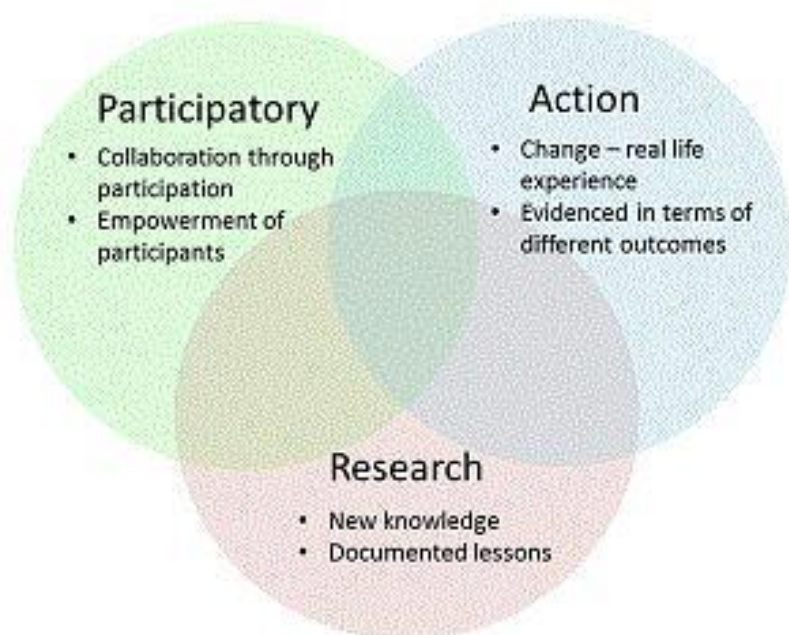
Another distinct characteristic of qualitative research that was considered relevant in this study is its emphasis on studying individuals within their contexts. Qualitative research affirms that “we cannot separate what people say; from the context they say it” (Creswell, 2007:40). Human behaviour and actions do not occur in a vacuum but in relation to one’s immediate environment, as such understating behaviour requires an equal interrogation of one’s context. This study therefore investigated young women perceptions within the context of the university as well as the wider culture. It examined notions on female sexuality available at Howard College and how young women position themselves and negotiate with the available notions in defining their sexuality and implications on sexual behaviours.

Lastly, qualitative research reflects an emancipative approach to enquiry hence it is conducted with the aim of facilitating a certain form of empowerment for participants (Creswell, 2007). Qualitative research has a strong focus on providing space for participants to share their stories, as such having their voices heard. It strives to eliminate power relations between the researcher and participants, fostering flexibility and productivity leading to deeper insights. As highlighted throughout the paper, empowerment was an underlying theme in this study. Qualitative approach to enquiry facilitated an environment and setting that enabled young women to voice out their perceptions with few hindrances. Specifically, this was achieved through the adoption of participatory action research design, under qualitative research to be explained in detail in the next section. The researcher hoped such an approach would enhance a deeper exploration of the topic under inquiry to facilitate the generation of in-depth data.

Participatory action research

The topic under inquiry, female sexuality among young women and HIV and AIDS is not only a complex issue but also highly sensitive. Female sexuality hinges on what is normally considered as a private-intimate domain in an individual’s life. On that basis, this study selected participatory action research as the most fitting design to aid in the process of data collection to achieve the study objectives. Participatory action research (PAR) is a distinct approach to a qualitative research inquiry which is prominent in the social sciences celebrated for its democratic, liberating and life enhancing objective in conducting research (Macdonald, 2012). As a research methodology PAR has roots and evolved from critical action research, community based participatory research, participatory community research and rural appraisal (Selener, 1997; McGarvey, 2007; Govender, 2013). PAR emerged as a response to key criticism directed towards ‘colonising’ tendencies of normative approaches to research (Selener, 1997). Four key weaknesses of conventional approaches to research included the exploitation of indigenous peoples’ and communities, unequal power relations between the researcher and the researched, lack of clear benefits for research participants and a misrepresentation of the cultures of researched peoples’ and communities (Baum, *et al.*, 2006). PAR as such is a departure from conventional research, through its recognition of the political nature of research either fostering liberation or imprisonment.

Figure 4.1: Participatory action research



Source: adapted from Chevalier and Buckles 2013

Three fundamental principles underlie and form the hallmark of PAR. Firstly, it advocates for equal power relations between the researcher and the researched which is absent in dominant research methodologies (Coetzee, 2017). PAR refutes notions of objectivity in the generation of knowledge arguing the observer cannot be divorced from his/her values when conducting research (Baum, MacDougall, Smith, 2004). It entails that the researcher always has an upper hand and power to exert influence on the study which may result in the exploitation of participants and impinge on findings. It argues for the need for researchers to acknowledge such power dynamics and work towards eliminating them. Primarily it foregrounds deliberate attempts for power sharing between the researcher and the researched to “blur the line between them until the researched become the researchers” (Baum *et al.*, 2006; 854).

In the exploration of young women’s perceptions on female sexuality and impact of sexual behaviours and HIV and AIDS prevention, the researcher attempted to minimise power imbalances between the researcher and the research participants using a bodymapping exercise for data collection. The exercise was conducted by the participants on their own, with no or minimal supervision and interruptions from the researcher. The researcher simply provided the participants with a guide providing detailed information on the study and the process for smooth completion of the exercise. The aim of utilising such an approach was to

allow research participants to be fully in control of the process and free to express themselves with few inputs from the researcher.

Secondly, participation forms another key cornerstone of participatory action research (Selener, 1997; McGarvey, 2007). Central in PAR is bringing about social change and improving the livelihood of marginalised communities. PAR is a people centric approach to inquiry as opposed to researcher centric approach. It is from that background that PAR acknowledges that research problems and dilemmas originate from communities signalling that their response equally lies in the communities (Macdonald, 2012). PAR advocates for dialogue, listening among other interactive approaches to research to ensure community engagement (McGarvey, 2007). It is through those interactions that marginalised people undergo processes of self-examination and self-reflection becoming aware of the problems that entangle and marginalise them. Dialogue and listening also enables research to take an account of the social-political factors contributing to the impoverishment/oppression of a group of people. As such PAR facilitates the identification of relevant solutions, feasible and championed by local communities (Baum *et al.*, 2006).

In this study, in line with the above aspect of PAR, bodymapping exercise was utilised as an interactive mode of data collection, one that facilitated the participation of research participants. Additionally, the study utilised multiple data collection modes i.e. writing and drawing in bodymapping and speaking in one on one semi-structured interviews as an attempt to ensure optimal participation of all participants based on their preference. Participants who would have not been able to comfortably and extensively express their views in speech, bearing in mind the private nature of the topic under enquiry were provided the opportunity to extensively express their ideas in drawing and writing and vice versa. Furthermore, the bodymapping exercise was utilised as a tool to initiate dialogue and a further exploration of the topic under study in semi-structured one on one interviews. Overall in employing innovative approaches in the process of data collection the study aimed at amplifying the voices of young women to contribute in a generation of in-depth data to respond to the study objectives and ultimately contribute to literature on female sexuality and HIV and AIDS in South Africa.

Thirdly, as suggested by the name itself, the other cornerstone also referred to as the ultimate objective of participatory action research is 'action' or social change. While the generation of knowledge is important, PAR gives pre-eminence to "education and development of consciousness as well as mobilisation for action" (Babbie, 2011: 333). PAR seeks to enable marginalised communities to become more aware of structures and systems that oppress them, to empower them to take steps to overcome the challenges and exert control over their lives. The agenda of PAR as such is deeper and more complex than other conventional methods of research as it heavily leans towards empowerment and transformation (McGarvey, 2007)

Informed by PAR the above sentiments were advanced and applied in this study using an art-based approach to inquiry. Arts based inquiry as the name suggests mobilises 'art' as an innovative tool in a qualitative inquiry. Using bodymapping utilising drawing and writing as forms of data collection, this study provided opportunities for posing and addressing complex questions in research in ways that ensured optimal engagement and interaction with the research participants. Through the exercise, this study attempted to provide opportunities for research participants to undergo processes of self-reflection and introspection with the hope

of not only collecting data but also enabling the participants to become more aware of decisions, behaviours, implications and necessary actions to take moving forward.

Study site

This study was conducted at the University of KwaZulu-Natal (UKZN), Howard College Campus. The University of KwaZulu-Natal was established in 2004 following a merger between the University of Natal and the University of Durban, Westville. UKZN Comprises of five campuses namely Howard College Campus, Westville Campus, Pietermaritzburg Campus, Edgewood Campus and Medical Campus. The university setting was chosen as the researcher sought to understand female sexuality considering the changing cultural terrain in South Africa. The University setting provides more opportunities for independence and delineates young women from communities that upholds and reinforces cultural values of female sexuality thereby providing more opportunities for exposure and interaction with other multiple notions on female sexuality (Staden and Bodenhorst, 20: 2009). Additionally, the university has been highlighted to provide a good ground for risky sexual behaviours as a result of newfound freedom prompting sexual adventures and exploration which may increase exposure to HIV and AIDS (Mutinta *et al.*, 2013). Also most university female students fall between the age range of 20 to 24 (Mutinta *et al.*, 2013) comprising a segment of young women between the age range of 15 to 24 highlighted as more vulnerable to HIV and AIDS infections in South Africa (Ramjee and Daniels, 2013; Dellar *et al.*, 2015). UKZN was specifically chosen as it is in the province of KwaZulu-Natal, recognised as the hotspot of HIV and AIDS in South Africa, with a prevalence of HIV at 27%. Furthermore, HIV and AIDS in UKZN is more pronounced among young women between the ages 15 to 24 (Maughan-Brown *et al.*, 2018).

This study decided to focus on one campus due to the contextual nature of the topic and approach taken in this study. The researcher approached the study from a social constructionism stance, which postulates knowledge and meanings as socially constructed by members of the society within a context (Galbin, 2014). The study therefore recognised the possibility of variations in relations to the 'culture' and notions on female sexuality from one campus to another. It was henceforth imperative to settle on one campus. Howard campus was selected as it is the largest of the five campuses and has the largest number of residential students (UKZN, 2019). Having a large student body who resided on campus made Howard campus an ideal site for the study as it focused specifically on female students residing on campus. Residential students were chosen as they spend more time within the university with no or minimal surveillance from parents as is the case with students who commute from home daily. It was hence assumed residential students have more freedom and opportunities for sexual exploration and are more likely to be more exposed to a variety of notions on female sexuality. Howard campus is in the vibrant coastal city of Durban. It offers a variety of courses and caters for students from a variety of cultures, among them Zulu people.

Sampling and recruitment

A crucial aspect in a research methodology with a direct bearing on the accuracy of results is choosing a sample to derive information from (Kumar, 2011). Whilst every study has people or specimen of focus referred to as a population, not only is it costly but at times almost impossible to interview all members of the population. A sample as such is a segment of the population to represent the rest based on the study design and objectives (Kumar, 2011).

Rahi (2017) defines the process of identifying a study sample as sampling. Broadly two sampling techniques are dominant which are probability also referred to as random and non-probability otherwise labelled non random sampling technique (Babbie, 2011:205). This study employed a non-probability approach to sampling in which “the probability of any particular member of the population being chosen is unknown and the selection of sampling units is arbitrary as researchers rely heavily on personal judgment” (Struwig and Stead, 2013: 116). Within this sampling technique several approaches are further applied. In this study to narrow down the number of participants to six, purposive and snowball sampling were used in the identification and recruitment of participants. Four participants were recruited using purposive sampling while two participants were recruited through snowball sampling as discussed in detail in the section below under recruitment process

Purposive sampling involves the selection of participants based on certain characteristics that places them in a position to provide the necessary information (Kumar, 2011). A key advantage of purposive sampling, considered in its selection for this study was that it eliminates room for the recruitment of participants not relevant to the topic ensuring the engagement of information rich participants to derive in-depth data (Etikan and Bala, 2017). Purposive sampling was henceforth ideal for this study as it aimed to focus at a group of people within a context. Nonetheless, a key shortfall of purposive sampling is that it may be prone to researcher bias if selection is purely based on the researcher’s unformed judgement (Kumar, 2011). To mitigate the impact of this shortfall, this study utilised a recruitment criterion, informed by the study objectives together with the theoretical framework when selecting study participants.

Recruitment criteria

The study was confined to black female students of South African origin specifically belonging to Zulu cultural grouping. Black women in South Africa are reported to be more infected with HIV and AIDS highlighting the urgency and need for investigation (Maughan-Brown *et al*, 2018). Among young black women of South African origin, the study only targeted young women from one grouping, Zulu, in respect of social constructionism standpoint, which recognises female sexuality as a cultural construct, with variations existing from one group of people to another. Zulu people are a dominant grouping in the province of KZN, hence the researcher assumed they are more likely to be the majority and easily found at UKZN. Furthermore, among the Zulu female students at UKZN, only students pursuing their final year of undergraduate studies were recruited for the study. Final year students were recruited as they were assumed to have been at a university setting for a moderately longer period hence experienced university life significantly to offer insights on the study topic. Additionally, only students who were residing on campus were included in the sample for the above stated reason which enabled a substantive analysis of their experiences.

Sample size

The initial sample size for this study was eight black Zulu Howard College female students but due to unforeseen circumstances beyond the researcher’s control, explained in detail in the subsequent paragraph, six participants aged between 19 to 22 formed the final sample size for this study. Nevertheless, Mason (2012:39) states that “a key principle in qualitative approach is an understanding of processes as opposed to a representation of the population.” As such sample sizes in qualitative studies tend to be smaller and the actual number is informed by the researcher’s judgment that the selected sample size can provide enough information relevant in addressing research objectives (Mason, 2012). Additionally,

sample sizes can be determined by a researcher's financial capacity to cater for the data collection process (Kumar, 2011). On the basis that this research did not aim to generalise the study findings but to explore young women's individual understanding and experiences on female sexuality and implications on sexual behaviour and HIV and AIDS prevention, the researcher believes the slight change in the sample size did not get in the way of addressing the study objectives.

Recruitment process

The first step of the recruitment process was marked with the researcher obtaining an ethical clearance from the University of KwaZulu-Natal, Howard College registrar to conduct the research among the students. Following this, the researcher sent and posted advertisements on UKZN Howard students' online portal, Howard campus students' Facebook page and WhatsApp groups, calling for potential participants. The advertisement contained detailed information pertaining to the study topic, characteristics of potential participants, the voluntary nature of participation and the researcher's details for further enquiry and recruitment procedure. In addition to advertisements on the above stated platforms, the researcher requested contacts within her network especially those with connections to the University of KwaZulu-Natal, Howard College for instance previous UKZN students to support in sharing the posters and publicising the study call for participants.

It should be pointed out that the above underlined online and referral strategies were employed in light of the Covid-19 pandemic mitigation measures which led to lockdown and restrictions of in person meetings globally and in South Africa. Moreover, the mitigation measures led to the abrupt and indefinite closure of the University of KwaZulu-Natal, two weeks before the commencement of this study. Initially, the researcher had planned to recruit potential participants by physically approaching female black students at the university residence on Howard campus until students who met all the above stated characteristics would be identified. However, in the interest of protecting the livelihood of the students and respecting and observing national lockdown regulation of social distancing, the study had to explore online options to collect data.

The online advertisements did not yield much results, as only two female students expressed interest and were recruited to participate in the study. Nevertheless, two previous UKZN alumni students shared the advertisements with colleagues and friends and were able to refer the researcher to four female students who met the set criteria. The researcher contacted the students via phone calls and WhatsApp messaging informing them of the study and requested if they were interested. Two of the four potential participants agreed and were recruited for the study bringing the number to four. Understanding the difficult nature of the circumstances during the recruitment phase of this study, the researcher decided to employ a second sampling strategy, snowball sampling, to support in the recruitment process.

Snowball sampling involves the use of already existing study subjects in the identification of more participants with similar characteristics within their network (Katz, 2006). Snowball sampling is relevant when potential study participants are difficult to identify and locate (Etikan and Bala, 2017). In this case the already recruited participants were requested, upon agreement, to refer the researcher to potential participants who met the set criteria in their circle. Two already recruited participants referred the researcher to two potential participants who expressed interest to take part in the study and met the criteria hence were recruited.

The researcher continued the snowballing sampling process until eight participants were recruited for the study. All study participants were provided with detailed information about the study, consent forms and designated dates for data collection. Participants were further advised of the voluntary nature of participation in the study and freedom to withdraw at any time they deemed necessary. Before the commencement of the study, participants provided consent to participate in the study through writing an email to the researcher, indicating agreement to participate in the study. Some participants provided a verbal consent through sending a recorded voice note through WhatsApp. Two recruited participants did not respond to the researcher on the agreed upon dates for data collection, leaving the number of participants who went through the data collection process to six.

Data Collection and Analysis

Data collection methods

Data collection for this study commenced at the beginning of April 2020 and went through until the end of May 2020. Initially, the researcher intended to collect data through a body mapping workshop followed by focus group discussions. However, due to social distancing measures and the lock down that was being implemented in South Africa and globally to curb the spread of the COVID-19, the focus group discussions were not conducted. Body mapping technique was still employed; however, it was an individual exercise conducted by participants in the comfort of their homes.

Body mapping is a visual art-based methodology renowned in participatory action research for its ability to enable participants and the researcher to work together in the generation of data (Govender, 2013). This technique in data collection involves the creation of maps resembling the human body using either drawing or painting or any other artistic scheme to represent aspects of an individual's life, experiences and the world they live in. Several aspects distinguish bodymapping over conventional means of data collection making it ideal for this study (Govender, 2013; Lys *et al.*, 2018).

Firstly, body mapping provides a wide range of options for people to express their feelings and experiences (Lys *et al.*, 2018). This is particularly important when discussing sensitive topics and working with young people, which all applied to this study. As such body mapping makes it flexible for participants who are not comfortable in talking about their feelings to use other means of expressions. Secondly, bodymapping is a form of empowerment through its provision of active involvement and participation of participants (Govender, 2013). As participants go through the journey of creating maps they are actively engaged, inducing self-introspection and reflection which provides opportunities for awareness of who they are, what they want and possibly how to get there.

In this study, participants carried out the bodymapping exercise individually in the comfort of their homes. The sessions were guided by a detailed bodymapping guide prepared by the researcher which was sent to participants through emails or WhatsApp. The researcher was also available online to address any questions and issues pertaining to conducting the exercise. To ease the communication process, the researcher provided internet data to research participants. Participants were requested to draw bodymaps on any A4 paper available using pencils, pens and if available (though optional) using colouring pencils. The bodymapping exercise was conducted in English as the researcher is not conversant with Zulu. Upon completion of the exercise, participants took photos of their drawings, using mobile phones and sent them to the researcher either through phone or email.

The bodymapping exercise was followed by a one on one semi -structured interviews to allow participants to elaborate more on their bodymaps and the topic under study. Note that the use of one on one semi-structured interviews was a diversion from the initial proposal of utilising focus group discussions. Focus group discussion is “a research technique that collects data through group interaction on a particular topic determined by the researcher” (Rabiee, 2004: 657). Key attributes of focus group interviews that previously dictated the choice of the technique, was its ability to facilitate optimal dialogue between the researcher and participants resulting in the uncovering of deep meanings and interpretations of peoples’ experiences thereby facilitating a deeper examination of complex issues or problems under investigation. However, considering the modification from face to face data collection channel to online data collection, the researcher opted for one on one interviews to eliminate technical and personal challenges that would arise with being able to have all participants available and actively participate at the same time.

Individual semi-structured interviews nonetheless, were still deemed ideal and more likely to achieve the same or even better results as it is argued that it is one of the most valuable approaches in deriving in-depth data especially when exploring personal perceptions, experiences and understanding of an issue or phenomenon (Fox, 2009). Through semi-structured individual interviews, participants are afforded ample opportunity and space to express themselves freely based on their experiences and circumstances. Whilst there are various types of one on one interviews, mostly determined by the format of questions, this study opted for semi-structured one on one interviews. Semi-structured interviews entail the use of an interview guide containing a set of predetermined questions similar for all participants (Berg, 2001). Nonetheless, it provides for the emergence of unanticipated questions or issues as the interview progresses. This aspect makes one on one semi-structured interviews flexible enabling an in-depth exploration of the issue. Nevertheless, the interview guide ensures consistency between the study participants upholding the research rigor (Berg, 2001). The one on one semi-structured interviews were conducted mainly through phone calls and WhatsApp calls depending on the participant’s preference. The interviews as highlighted were guided by a discussion guide, however the guide was semi-structured, and the questions were open ended to allow for flexibility. The interviews lasted between 30 to 45 minutes for each research participants. Refer to Appendix 1 and 1A for question schedules for the bodymapping exercise, as well as the one-on- one semi-structured interviews. The proceedings of the interviews were electronically recorded using another mobile phone, with the participant’s knowledge and approval and later transcribed for data analysis.

Data analysis process

The subsequent step after data collection is data analysis. Data analysis involves the organisation and arrangement of huge amounts of collected data into rich finer details (Braun and Clarke, 2006). This process facilitates easy description and reading of the data making it possible to infer embedded meanings and project interpretations on the study topic. It is therefore argued that it forms the pinnacle of the research process determining the validity and credibility of the study results and conclusion (Struwig and Stead, 2013:179). Poor approaches and techniques in data analysis threaten the quality and authenticity of the research findings thereby jeopardising the research project.

Thematic analysis

A myriad of data analysis approaches exists from which researchers conducting qualitative and quantitative research can choose from mostly dictated by the study approach and objectives. The complex nature of the topic under study, examining subjective meanings and interpretations, demanded an analysis approach that facilitates thorough examination. It is on that basis this study subscribed to thematic analysis. Among others, this approach is well known and labelled as essential for any researcher interested in qualitative research. It is argued to provide core skills valuable for other forms of qualitative analysis due to the centrality of theme identification, a generic trait in most qualitative forms of data analysis (Braun and Clarke, 2006).

Thematic analysis involves the careful ordering and generation of meanings from data based on emerging themes or patterns (Lapadat, 2010). An almost similar definition is provided by Braun and Clarke (2006:80) who defines it as “a method for identifying, analysing and reporting patterns (themes) within data”. A key underlying aspect of thematic analysis is therefore the identification of themes which are hidden or embedded topics that represent or organises a group of repeated ideas in a data corpus (Vaismoradi *et al.*, 2016). A theme facilitates the unification of ideas across collected data in line with the research inquiry making it possible to isolate participant’s subjective meanings and interpretations. It is from there that a researcher can draw similarities, differences and contradictions enabling an insightful and in-depth understanding and interpretation of data.

Thematic analysis is instrumental for studies exploring complex issues and phenomenon that often demands thorough examination due to their contextual and personal nature, for instance perceptions on female sexuality and implications on HIV and AIDS prevention choices among young women (Braun and Clarke, 2006). Thematic analysis, due to its flexible nature, also provides a rich account of data by facilitating the emergence of unanticipated topic and ideas, bringing fresh insights, interpretations and new ways of approaching issues (Nowell *et al.*, 2017:3). The above philosophical assumptions made thematic analysis ideal for the study topic as it resonated with the study objectives of understanding how young women at the University of KwaZulu -Natal assign meanings and form perceptions on female sexuality and how that in turn impact their sexual behaviour and agency in HIV and AIDS prevention. As a data analysis technique, thematic analysis has six phases, all linked to each other though not in a linear pattern. The phases comprising familiarisation with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report (Braun and Clarke, 2006) are discussed in detail in reference to this study in the section below.

Familiarisation with data

Familiarisation with data entails a thorough engagement with data through repeated reading to an extent in which one is immersed in the data (Braun and Clarke, 2006). It is advisable to employ an active approach to the reading to initiate the process of meaning making and deriving general ideas of the data (Rabiee, 2004). At this stage the researcher is encouraged to take notes or mark issues that seem interesting to later on feed into subsequent stages. In cases when data sets exist in form of audio and video, this stage also involves data transcription, a process whereby verbal data is recorded in written form (Braun and Clarke, 2006). Again, this is an active process, according the researcher an opportunity to familiarise more with the data and initiate the analysis process.

In the context of this study, data familiarisation was an ongoing process commencing during the process of data collection. The study data corpus included participants' bodymaps and audio from one on one semi-structured interviews. One on one semi-structured interviews were conducted only after participants sent their bodymaps to facilitate deeper exploration of participants' responses as expressed on the bodymaps and the topic in general. Upon the submission of each bodymap the researcher had to thoroughly engage with the data so as to smoothly proceed to conducting semi-structured interviews. This process went on for a period of two months, as data was collected through online channels and phone calls hence participants sent the bodymaps and went through the one on one semi-structured interviews at their time of convenience. Nonetheless, after all the data was collected, the familiarisation process continued as the researcher had to transcribe audio version of data into verbal form. This was later followed by repeated sessions of active reading of the transcribed data together with the bodymaps to achieve a thorough familiarisation. To ensure the process was productive, the researcher took notes and highlighted interesting issues to initiate meaning making and identify possible initial themes.

Generation of initial codes

Following the process of data familiarisation, the researcher embarked on the process of generating initial codes. Coding is a process whereby "researchers identify important sections of text and attach labels to index them as they relate to a theme or issue in the data" (Nowell *et al.*, 2017:6). Codes as such are identifications of interesting sections or features of the data that can be used to initiate meaning making and interpretations of the data. The researcher simply extracts an interesting segment of the data and assigns it a key idea and label for further engagement. Two key techniques guide the coding process informed by the type of study analysis which is data driven or theory driven (Braun and Clarke, 2006). In the former, codes purely emerge from the data without any preconceived ideas in mind. In the latter coding is determined by specific questions to be addressed drawn from the study's theoretical framework together with research questions.

The generation of initial codes in this study deployed both two approaches to coding. This study was guided by the culture centred approach together with the empowerment theory from which several research questions were derived. Henceforth first and foremost, segments of data from the bodymaps and interviews transcription that were of interest and importance as per the questions as well as the theories were highlighted and appropriately coded for further analysis. However, to add depth to the study, the researcher also made room for emerging insights by coding and pulling out other segments that kept on recurring though not explicitly directly linked to research questions, for further analysis at a later stage.

Searching themes

Phase three begins after the analyst or researcher has extensively engaged with the data and from that generating a long list of codes. The underlying task in this stage is to engage with the long list of codes, repeatedly reading through them with an analytical eye. This process enables the researcher to take note of codes containing similar ideas as well as those implying different ideas (Vaismoradi *et al.*, 2016). Codes with repeated and related ideas are extracted and organised into a topic, referred to as the theme (Braun and Clarke, 2006). This process continues until all or most of the codes are properly grouped.

In this study, the researcher adopted the mechanism of using visual representations to aid the process of identifying and sorting themes. All code names and brief descriptions were

written down on small pieces of paper and later piled into themes. To ensure order, the researcher first separately carried out the process of theme identification for bodymaps as well as semi-structured individual interviews. Following such, the researcher merged and sorted themes from all the available data as a whole guided by the study questions.

Reviewing themes

Reviewing themes mainly involves theme refinement. Braun and Clarke (2006) postulates that it is possible for some candidate themes not to be sufficiently supported by data or simply too diverse. Additionally, some themes may simply be shallow to stand alone whilst others too broad. In other scenarios, it is even possible for code extracts in themes not to be coherent making the theme problematic (Nowell *et al.*, 2017). This stage as such demands the researcher to carefully go through each theme, carefully reading through and analysing the extracts from the codes under it. It is only when the researcher is satisfied that all themes are valid that they move on to the other related stage of theme definition.

In the process of data analysis for this study, the researcher dedicated an ample time to the process of reviewing themes to ensure validity of the data output. The researcher extensively engaged with the themes together with the coded extracts. During that process some themes were divided into parts, others were merged into one whilst others were discarded. Themes were also critically interrogated in relation to coherence with other themes, in line with the study research questions, to ensure they together contributed to telling one story.

Defining themes

In theme definition, the analyst or researcher describes in detail what each theme captures. Additionally, relationships between themes are clearly outlined to ensure they tell a story in line with study objectives. In the context of this study, this step involved the researcher critically engaging with the refined themes, delineating specifics of each theme. Themes were clearly named with detailed written description of ideas suggested therein. The researcher further generated sub-themes to ensure a proper flow of ideas and coherence. Themes were further described and organised in line with other themes and the research objectives to inform the findings of the study.

Report writing

Report writing forms the final phase of thematic data analysis process. This stage requires the researcher to transcend beyond a mere description of the available analysed data to presenting data in a manner that infers meanings and interpretations against study objectives and theoretical assumptions. The section presents results and key findings of the study. In this study, the report writing sections presents key findings, results and conclusions made by the study based on the interpreted data. To ensure validity the findings and results are supported by a selection of vivid and compelling extracts from the data. Furthermore, findings and results of this study were informed by the research objectives together with the theoretical framework by the study.

Research trustworthiness

Research trustworthiness deals with the extent to which research methods and designs can be trusted to produce quality results that depict the picture on the ground (Korstjens & Moser, 2018). Research trustworthiness determines how believable the study and study results are, worthy to impact an understanding of a phenomena or situation. In the field of

social science, it is said there is nothing like perfect methods for research (Coetzee, 2017). Nevertheless, it is the responsibility of the researcher to thoroughly consider the methods and strategies employed, to ensure research methods and results are trustworthy. In this study, three factors namely credibility, transferability and dependability were considered as criteria to ensure the study rigor and trustworthiness (Shenton, 2016) as explained in detail below.

Credibility

Credibility is concerned with “the confidence that can be placed in the truthfulness of the research findings” (Korstjens & Moser, 2018: 2). Credibility ensures that the research findings are “true” and sound. This research subscribed to qualitative research and social constructionism hence recognized that truth is subjective and there is no such thing as a “single truth”. Therefore, the researcher acknowledged that there are many “truths” as people have different realities based on how they relate with contextual factors. This study aimed to achieve truthfulness through ensuring the study results were a true reflection of participant’s different views and realities.

Two keys strategies were employed to achieve credibility. Firstly, in relation to data collection methods, credibility can be achieved through prolonged engagement with study participants through the use of a multiplicity of data collection tools and data collection methods that ensure participants optimal and active engagement (Shenton, 2016). This study employed two data collection tools namely: body mapping exercise followed by semi-structured interviews. The use of the two data collection tools ensured the verification of the information provided as the researcher was able to cross check and also explore the topic deeper through follow up examination following variations or inconsistencies. Secondly, in relation to data analysis, this study strived for credibility through the use of direct quotes from participants in the process of data analysis and presentation. Participants’ semi-structured interviews were transcribed and presented in their original state together with participant’s bodymaps images to substantiate the study results and findings.

Transferability

Transferability is when “understandings can then be transferred to new contexts in other studies to provide a framework with which to reflect on the arrangements of meaning and action that occur in these new contexts” (Van der Riet and Durrheim, 2006: 92). Transferability is achieved through providing detailed information on the study participants, the context and the research process to enable other researchers to assess whether the study findings can be applied and used in their own settings. In line with this criterion, this study provided extensive details on the study participants, their context and the processes followed in conducting the study, from the formulation of the study topic to the generation of study findings to ensure other researchers can easily deduce whether the study results can be applied to other context.

Dependability

Dependability is closely related to credibility. Central in dependability is convincing the reader and other researchers that the findings of the study are valid and did occur as portrayed by the study (Korstjens & Moser, 2018). Dependability is achieved through a detailed account of processes employed in the study specifically in data collection and analysis to achieve the results (Shenton, 2016). This study henceforth attempted to achieve dependability of the findings mainly through reporting and providing step by step details on

all processes followed to arrive at the study findings and results. Additionally, this study presented rich comprehensive accounts from participants from where conclusions were drawn.

Ethical considerations

Ethical consideration is an important aspect of research, to ensure that the rights of participants are not infringed upon, either knowingly or unknowingly. Ethical considerations is even more important when conducting qualitative research, due to the in depth nature of the method and at times the sensitive nature of research topics (Arifin, 2018). This study made a deliberate attempt to minimise possible risks of violating the rights of research participants. The following ethical guidelines namely ethical approval and access to participants, informed consent and voluntary participation, anonymity and confidentiality and data protection were followed as explained in detail in the section below.

Ethical approval and clearance

Ethical clearance for this study was obtained from UKZN Humanities & Social Science Research Ethics Committee under approval number HSSREC/00000483/2019 to ensure it did not violate human rights. Additionally, before the approval, the proposal was presented and highly scrutinised by a panel of professors, lecturers and fellow students at the Centre for Communication, Media and Society (CCMS). The researcher submitted the proposal to the ethics committee upon refining the proposal based on the provided comments. Furthermore, this research sought and obtained approval from the University of UKZN Registrar to conduct the study among female students at the University of KwaZulu-Natal. It was only after obtaining the gatekeeper's letter that this study recruited students as its study participants.

Consent and voluntary participation

All participants for this study were recruited on voluntary basis. Participants were provided with all details pertaining to the study at the beginning of the recruitment process and given a choice to decide whether they are interested in participating or not. Participants who expressed interest to be part of the study were provided with consent forms to go through and sign as evidence that they understood what the study entailed and joined with no coercion. As it was difficult for participants to physically sign consent forms, participants provided consent by writing an email indicating agreement to participate in the study. Some participants provided verbal consent by recording an audio verifying consent, which was sent to the researcher through WhatsApp. Nevertheless, despite providing consent, participants were informed of the provision to withdraw from the study at any time they deemed it essential, without any questions from the researcher. Furthermore, consent and permission was sought from participants, to allow the researcher to audio tape one on one semi-structured interviews before the commencement of the exercise.

Anonymity and confidentiality

This study ensured that the identity of all study participants was anonymous and confidential. Participants were informed of this provision by the researcher and it was further stipulated in the consent forms. Furthermore, no names of the participants were used in the process of data analysis or in the final report. Instead of names, the researcher assigned other forms of identification for the participants which were used in the final report.

Data protection

Data collected in this study was safely stored and highly protected by the researcher. The researcher personally transcribed the interviews hence no other party had access to the semi-structured interviews. Furthermore, the researcher did not share the bodymaps with other individuals except using them in the final report, without participants' identities for confidentially purposes.

Limitations

This study's approach to data collection faced the following key limitations. Firstly, the sample size for the study was small and restricted to a specific group of young women at the University of KwaZulu-Natal, for the findings to be generalised for KZN and across. This study argued that young women cannot be categorised as a homogenous group, as their sexual lives are heavily impacted by distinct beliefs, values and practices within their immediate context. Henceforth whilst possible inferences can be made from this study, such cannot be conclusive for all young women in contemporary South Africa.

Secondly, as a result of the Covid-19 pandemic in South Africa, leading to the abrupt closure of the University of KwaZulu-Natal and passing of social distancing regulations this study employed individual interviews as opposed to focus group discussions. Initially, focus group discussions were deemed more relevant for the study, due to their characteristic of inducing discussion and dialogue among participants. Dialogue is highlighted as essential in the generation of in depth, nuanced and variety findings on a topic. Due to the circumstances, this study missed out on the opportunity for participants to engage and have dialogue amongst each other.

Thirdly, in observing quarantine and social distancing regulations, the study employed virtual strategies in data collection. Phone calls, emails, WhatsApp voice calls, and message were used as channels for data collection. Physical data collection methods can add depth to the quality of data mainly through observation. In the case of this study, the researcher missed out on the opportunity to collect data through observations of peoples' gestures and other forms of physical oriented feedback.

Lastly this study utilised English as the language of communication for data collection despite engaging black South African young women of Zulu origin as study participants. Even though most of the participants indicated being comfortable with English it is possible that some of them were not as expressive as they would have been in their local language, a possible limitation.

Conclusion

This chapter presented the processes and procedures followed in data collection and analysis for this study. Ethical considerations and also guidelines followed to ensure that the study was trustworthy and valid were further highlighted. Towards the end of chapter, key challenges and possible limitations of the study mainly in the process of data collection were further presented. The subsequent chapter presents data following the analysis process.

CHAPTER FIVE: DATA PRESENTATION

Introduction

This section captures and presents data on the topic under inquiry, University of KwaZulu-Natal female students' perceptions on female sexuality and impact on sexual behaviour and HIV and AIDS prevention choices. As elucidated in the methodological framework, two tools were mobilised in the process of data collection namely: bodymapping and one on one individual semi-structured interview. The bodymapping exercise marked the first phase of the data collection process in which young women expressed their perceptions and experiences on female sexuality and its impact on their sexual behaviour and HIV and AIDS prevention choices using drawings and writing narratives. One-on-one semi-structured interviews were used to provide the participants with an opportunity to further explain what was presented on their body maps. The semi-structured interviews also enabled the researcher to seek clarity in cases where the drawings and writings were not fully visible and clear, or where the researcher failed to understand the meanings of the bodymaps. Furthermore, one-on-one semi-structured interviews provided an opportunity for participants who were not able or comfortable to express themselves fully using the body maps to verbally express their thoughts, perceptions and ideas.

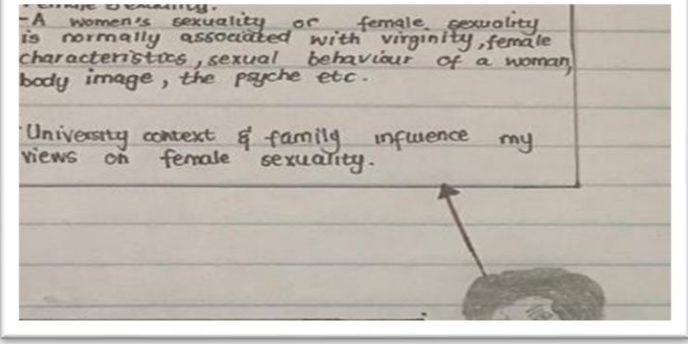
Ultimately, the two tools were used for triangulation purposes to add depth to the data that was collected as well as minimize bias. Overall, it was noted that some participants were more detailed and expressive in their bodymaps than one on one individual semi-structured interviews and vice versa, validating the usage of the two data collection tools. One participant (participant six) however indicated not to be comfortable to undergo the interviews, hence only data from her bodymap is utilised in this paper. This section provides a detailed description of data that was collected using both tools. For clarity purposes, data and results derived from the bodymapping exercise is labelled PB to mean participant's body map with a number in the middle to identify the participant for instance P1B. Data from one-on-one semi-structured interviews is presented as PI, symbolising participant interview with a number in the middle to identify the participant, for instance P1I.

Data presentation is guided by themes generated and informed by the study theoretical framework i.e. Culture-centred approach and empowerment theory together with the study research questions. Four key themes were identified namely: definitions and understandings of female sexuality, influencers of notions on female sexuality, impacts of perceptions on female sexuality on sexual behaviour and impacts of perceptions on female sexuality on HIV and AIDS prevention behaviours and choices. Each theme however, had sub themes that emerged from the discussion, which have also been presented in the chapter.

Understanding and definitions of female sexuality

The data collected indicated that participants understood female sexuality from both a biological and sociological perspective, though most of the responses were aligned to the sociological stance. Requested to define and underline their definitions and understandings of female sexuality, participant number two (P2B) in her bodymap (see below) indicated to associate female sexuality with virginity, female characteristics, sexual behaviour of a woman, body image and psyche. During the interview, P2I expounded further on what she meant by female characteristics and behaviours by pointing out aspects like loyalty and respect for self among others. P2I expressed *"Aaaah, I think some of the attributes a woman/female should possess is loyalty. I think that one of the qualities and*

attributes...aaah I think to always be firm, I mean not to always allow the partner to be always in the driving seat, you know. Aaah communication between you and the partner. I think the woman should always initiate communication. Aaaah What else, I think respect” (P2I, April 2020).

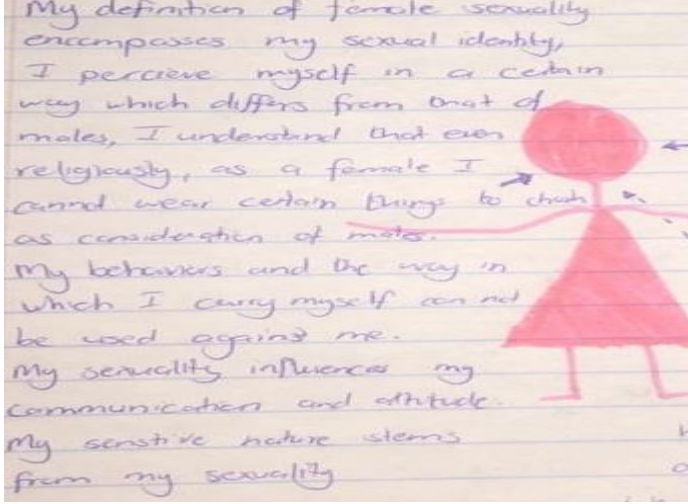
P2B Definition/understanding of female sexuality	Description
 <p>The image shows a photograph of handwritten notes on lined paper. The top note reads: "A women's sexuality or female sexuality is normally associated with virginity, female characteristics, sexual behaviour of a woman, body image, the psyche etc." The bottom note reads: "University context & family influence my views on female sexuality." An arrow points from the bottom note to the top note.</p>	<p>A woman's sexuality or female sexuality is normally associated with virginity, female characteristics, sexual behaviour of a woman, body image, the psyche etc.</p>

Participant one in her bodymap defined female sexuality as “virginity and body image”. During the interview participant one further highlighted other characteristics and attributes she associates with female sexuality mostly leaning to sociological aspects. P1I indicated “Aaaah I think a woman who knows what she wants. Secondly a woman who is honest. And aaah a woman who believes in equality between a man and a woman” (P1I, April 2020). P1I further indicated roles and responsibilities associated with female sexuality “it’s to be a family planner like for example know everything that is needed in the house. Secondly, she is the one who is supposed to be responsible in organising family life. And aaah the third thing is to be an influence, like for example, if the man does something bad, she is supposed to influence him, like showing him the right path (P1I, April 2020).

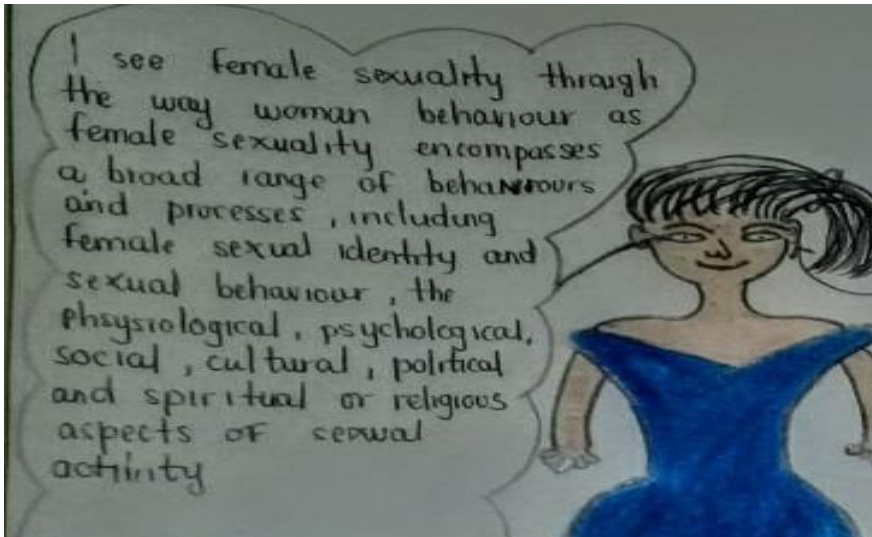
Participant three in her bodymap stated to understand female sexuality as “a way women/female shows their feelings or attraction to the opposite sex. A normal behaviour for a person who has feelings” (P3B, April 2020). Participant three further elaborated on her response in line with her understanding and definition of female sexuality during the interview. Participant three uttered “Aaah, I think as long as the woman is able to respect the partner. But at the same time that has to be done in return. The male figure has to do the same. And then be willing to be a supportive somebody. Just be in love with your partner and not cheating I guess” (P3I, April 2020).

Participant four in her bodymap stated female sexuality as herself and women being different from men indicating she believes she is supposed to dress in a certain way to church in consideration of men, among many others. (P4B see below). During the interview, P4I was requested to clarify how she or a woman is different from men of which she responded “I feel everyone should be how they are. If one is loud, they should be loud and be able to embrace their beauty in their own way. So, woman should be woman, there is no specific criteria that a woman should fit.” Nevertheless, P4 later contradicted her initial sentiments of not associating female sexuality with any specific attributes as the interview progressed by

stating motherly nature and warmth as an attribute for women. She stated *“Like every woman is born with that motherly ability, whether you realise it. There is something about us motherly even before you even realise it. So, having that quality brings warmth in our homes”* (P14, April 2020). P4 response further suggested motherly nature and warmth as an inborn attribute of female sexuality.

P4B Definition/understanding of female sexuality	Description
 <p>My definition of female sexuality encompasses my sexual identity, I perceive myself in a certain way which differs from that of males, I understand that even religiously, as a female I cannot wear certain things to church as consideration of males. My behaviours and the way in which I carry myself cannot be used against me. My sexuality influences my communication and attitude. My sensitive nature stems from my sexuality.</p>	<p>My definition of female sexuality encompasses my sexual identity. I perceive myself in a certain way which differs from that of males. I understand that even religiously, as a female I cannot wear certain things to church as considerations of males. My behaviours and the way in which I carry myself cannot be used against me. My sensitivity influences my communication and attitude. My sensitive nature stems from my sexuality.</p>

Participant five in her bodymap broadly defined female sexuality as comprising both biological and sociological components. She stated *“I see female sexuality through the way woman behaviour as female sexuality encompasses a broad range of behaviours and processes including female identity and sexual behaviour, the psychological, physiological, social, cultural, political and spiritual aspects of several activities”* (P5B see below). P5 expounded further on specifications in relation to behaviours and identities she associates with female sexuality during the interview. She articulated *“A woman is supposed to behave in a proper manner. But should also be treated equality. You must represent yourself in a proper manner so that the opposite sex won’t think of you in a specific way or judge. Proper to me is the way that when u act or when other people see you. They will be able to recognise that you respect yourself. In terms of dress code, you need to wear something that shows that you are a woman and you respect yourself. Because sometimes you know how it goes that you are wearing a mini skirt people tend to think of you like you are a prostitute. People will be like ok, the way she is dressed it means she is sending out messages that I am selling my body, or I don’t respect myself as a woman. Also, the way you speak, as a woman you should know how to speak. For instance, you cannot go around speak inappropriately words and say you respect yourself. So, you need to respect yourself, like do not respond anyhow and do not swear”* (P5I, May 2020).



P5B, May 2020

Participant six in her bodymap defined female sexuality as “suppressed” (P6B, April 2020). The participant was however not available for the one on one interview henceforth it was not possible for the researcher to explore further what the participants implied in her response.

Position or status of women in relationship

The participants further highlighted how they perceive and define female sexuality in relation to several scenarios starting with the position of women in relationships. It must be pointed out that it was interesting to note how all participants suggested they were aware and believe in equality between men and women before addressing the question. A point of significance however was how all participants had varying opinions in relation to its feasibility, application and interpretation. Overall, most of the participants seemed to be tilted towards the view that men ought to take the leading role in the relationship under strict terms and conditions set by the woman. Additionally, there was a consensus of leadership not through force and coercion but love and understanding emanating from an understanding that none is superior to the other.

Participant one narrated “*I believe in equality but then I think it’s the man who should lead. I think by leading for example, like being, aah lets say that man has a boy child. That man should lead in terms of pleading to his son to be a good person, like doing the right thing. That is what I have in mind for now*” (P11, April 2020). This participant’s response suggests that she is aware of the notion of equality but does not subscribe to its feasibility in certain circumstances. In her case, she believes men are more suitable in taking an upper hand in some important issues in the family, for instance in this case guiding the boy child.

Participant’s three responses concurred with the previous participant’s response however redefined leadership. She argued “*...oh God. Aah I don’t know if this one will make sense. But I think a good and caring man can take the lead in a relationship. I think I will describe my good man, not someone who is going to be saying ok I am the man, so you are going to be doing as I say. No, not like that. That is not going to work like that. And there is a saying that goes, aah , a man that does his job properly, a woman will follow him anywhere he goes*” (P31, April, 2020). As per this participant, she embraces the notion of men taking the leading role; however, she redefines leadership and places conditions for one to earn that

status. The participant's response suggests interpreting leadership in terms of someone who inspires and motivates another in order to influence decisions. This is contrary to traditional dominant notions of leadership in parameters of most cultures where leadership is equated to utmost control and exertion of force (LeClerc-Madlala, 2012; Chisale, 2016). Nevertheless, to some extent her response may suggest a certain level of conformity to the ideology that men occupies and holds a higher status than women in a relationship as her last statement describes the woman as the follower.

Almost similar ideas were expressed by participant five who expressed *"My views, I would say it should be all about relationship. There is no way a man should take up decisions and take everything upon them. We are in a relationship; we are in a relationship. We are creating a bond between us so I should be involved as well"* (P5I, May 2020). This participant seemed to emphasise the need for men and women to work together recognising a relationship is a partnership. Nevertheless, the participant's use of the phrase 'I should be involved' towards the end, may connote an inclination of a setting in which the man has more control or has a higher position than the woman in decision making however constantly acts in consultation with the woman.

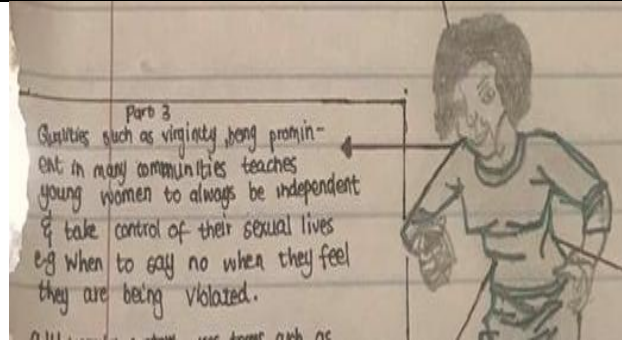
Participant four comment suggested men should earn women's respect as well as submission to be accorded leadership. The participant argued *"I don't like that males have to be dominant in that area, like you have to respect your man no matter what they do, nooo, there is no such thing. They need to earn respect. So, if they do things that make you not respect them, then that is understandable, and it shouldn't be questioned. And if they don't think that women do not submit, then they need to check themselves, and we shouldn't be struggling because I am not submitting naturally to the man."* (P4I, April 2020).

The beginning of her response suggests an utter disagreement with the notion that men should have a higher status, by being the leading ones in the relationship. Towards the end, the participant's statement however suggested that she is open to the notion of women submitting to men however not merely because they are men but when they act in ways that invoke and attract such. The researcher inquired more on the issue for clarification to which the participant stated *"Not even doing things per se, but just treat women in a certain way or just have something that will make a woman want to submit to you. Not even in terms of material things, but be, your nature must just make a woman want to submit to you"* (P14, April 2020). Overall, the participants' comments challenged the traditional perspective that portrays and accords male's leadership status based on their biological composition of being male and not having actual leadership characteristic.

Significance and meaning of sex to young women

Sexual activities encompassing significance of sex, communication on sex and when and how it should be conducted has for a long time been a major criterion in contextual definitions of female sexuality. The researcher explored participants' views in relation to the sexual conduct they associate with female sexuality. A key issue that occupied central space among all participants was the relevance and meaning of virginity. Participants' views on this issue were divided into three subthemes that fall under three main schools of thoughts i.e. Pro- virginity, mixed feelings and indifference on virginity as a criterion for defining female sexuality.

Two participants expressed supporting virginity with different interesting reasons for their standpoints and the importance of virginity in general. In support of preserving virginity participant two uttered “*qualities such as virginity, being prominent in many communities, teaches young women to always be independent and take control of their sexual lives e.g. when to say no when they feel they are being violated*” (P2B, April 2020, see below). This participant indicated she personally took the decision not to indulge in sexual intercourse until she reaches the age 21. During the interview session she further commended activities like virginity testing arguing “*you have to look at virginity testing or the reed dance in a very cultural way, because that’s where most of the girls are taught to, you know to carry themselves as a lady. Because as much as there is the cultural element there is a lot that is there. Because now girls are being taught about HIV, they are being taught about a lot of things*” (P2I, April 2020). This participant’s comment suggested she is preserving her virginity to fulfil a cultural obligation which she believes also inspires her to be in control of her sexually. Virginity in this case, is portrayed as a positive attribute, one that empowers the young woman to be in control of what happens to her body and additionally enables her to prevent sexually transmitted diseases like HIV and AIDS. A Similar finding has been documented in a study conducted by Wickström (2010) in which virginity testing was noted to be empowering to young women, strengthening as well as protecting them from early and unsafe sex until mature to make informed decisions.

PB2 Virginity and female sexuality	Description
 <p>The image shows a handwritten note on lined paper. The text reads: "Part 3 Qualities such as virginity being prominent in many communities teaches young women to always be independent & take control of their sexual lives e.g. when to say no when they feel they are being violated." To the right of the text is a simple line drawing of a woman with curly hair, wearing a tank top and shorts, holding a small object in her hand.</p>	<p>Qualities such as virginity, being prominent in many communities, teaches young women to always be independent and take control of their sexual lives e.g. when to say no when they feel they are being violated.</p>

Participant three narrated how her interpretations and relevance of virginity and female sexuality among young women has evolved over the years from fulfilling a cultural obligation to a personal choice for individual gratification. She articulated “*Firstly it’s a cultural belief that you only have to be sexually active when you are married. So, it started like that. But as time went by, I was like no they have held me, but some of the things they were like implanting them in the wrong way. Like it’s almost like you have to keep yourself for the man or the husband. And then now it’s almost like the decision I took, like as my mum you helped me to reach this age and still be a virgin. But am like but can I change a few things, like it shouldn’t be about a man. But like I don’t want to involve myself because of me, that I am just not ready*” (P3I, April 2020).

This comment brings to light a significant insight on how virginity can be a positive attribute for young women if framed in a different manner and for different objectives. Virginity has been critiqued for propagating inferior perceptions of female sexuality among young women

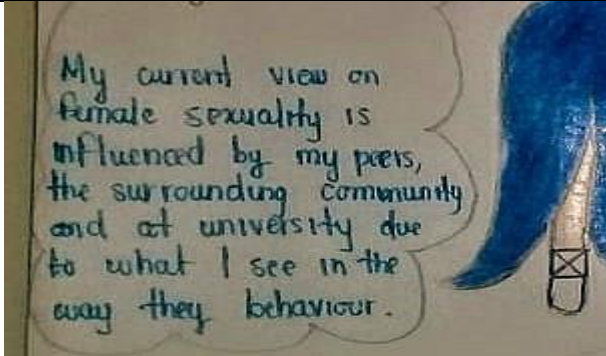
as culturally it has mostly been advocated for women to be worthy brides or attract higher Lobola (Rankhontha, 2004). The participant’s comment brings a fresh perspective on how preserving virginity can be empowering and liberating to young women if defined purely from the woman’s standpoint, to advance her personal agenda and general well- being.

Of the participants with mixed feelings on young women preserving virginity, it was purported maintaining virginity arouses feelings of pride and joy and reinforces a young woman’s identity of being a ‘Zulu woman’. Nevertheless, on the negative note, celebrations like the reed dance in honour of young virgins were suggested to be discriminatory to young women who are non-virgins as a result of traumatic circumstances like rape. Participant five lamented *“Aaah it’s a good thing but also bad. It’s a good thing because you tend to be proud of yourself as a Zulu woman. That you have been respecting yourself and u haven’t been doing anything bad. But on the bad sad is that it’s so sad you see when girls go to reed dance where they celebrate, where they say I have been a virgin for so many years but you see some of the kids, there are kids who would have been there but are not there not because they were fast and wanted to sleep with boys but only because they were raped. So yeah that’s what I think”* (P15, May 2020).

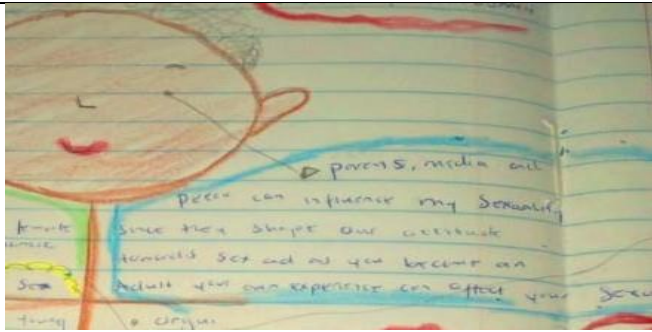
The remaining participants suggested virginity should be a young woman’s individual choice, and not a standard for defining a young woman’s sexuality. One participant indicated that sex is a result of feelings residing in both men and women that develop when two people are in love. It was argued, girls who want to be virgins should pursue that route and girls, who do not want to, should be allowed not to without attracting any labelling or punitive action.

Influencers of female sexuality

Two sub themes emerged regarding key influences on female sexuality by almost all participants. The two influences included the community i.e. family, church and neighbours and the university i.e. peers and seminars. Participant two stated *“Aaah I think my parents. My family has influenced my views. Growing up, aah, we are a small family and I live with my parents”* (P21, April 2020). Participant four highlighted *“society in terms of my social surroundings. You know coz I am in the university. You look at how couples in the university move around”* (P14, April 2020). On the same wavelength with the others, participant five indicated the community, peers and the university as key influencers on her perceptions on female sexuality (P5B, May 2020, see diagram below).

PB5 influencers of perceptions on female sexuality	Description
	<p>My current view on female sexuality is influenced by my peers, the surrounding community and at the university due to what I see in the way they behave.</p>

Participants further identified the church and individual experiences as contributing influencers on their perceptions on female sexuality. One of the participants out of two who indicated church as an influence uttered “*mhmm I would say my church environment. I think I have been viewing how they have been doing things*” (P3I, April 2020). Out of the six participants, two participants indicated “personal experiences” together with media and parents (P1B, April 2020, see diagram below) as an influence on perceptions of female sexuality. Overall, it was noted that all participants were influenced by a multiplicity of agents in the formation of perceptions on female sexuality, the common main ones being the community and university.

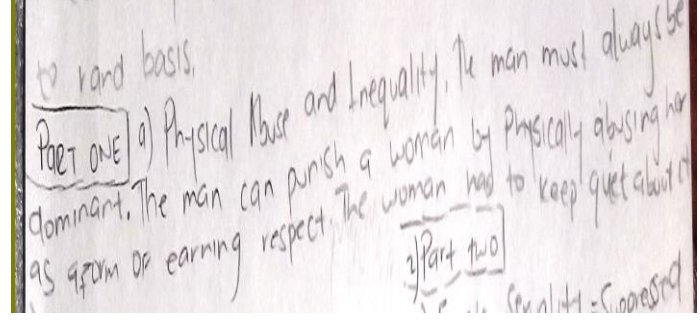
P1B Influencers of notions on female sexuality	Description
 <p>The diagram shows a central figure with a head and torso. Arrows point from the figure to the text 'parents, media and peers'. Below this, there are handwritten notes: 'peers can influence my sexuality', 'since they shape our attitudes towards sex and as you become an adult your own experiences can affect your sexual origins'.</p>	<p>Parents, media and peers influence my sexuality since they shape out attitudes towards sex and as you become an adult your own personal experiences shape sexual origins.</p>

Dominant notions on female sexuality as per the community

In line with the community as an influence on female sexuality, dominant notions of female sexuality identified by participants included women as mothers and domestic duties overseers, women as subordinates to men mainly husbands, women not to openly discuss sex or explore sexually, women not to pursue formal employment, women to condone male abuse, women as sexual objects for the husband’s gratification, women respectful to self and others, women as nurturing and women to conduct themselves with grace in relation to mannerism, posture and speech. Based on the highlighted aspects it was noted that the community mostly harboured and advanced traditional discourses on female sexuality in line with Zulu culture. Henceforth, notions of female sexuality as per the community shall refer as well as be used interchangeably with traditional notions of female sexuality as per Zulu culture.

The following excerpts from participants’ interviews highlight some of the attributes of female sexuality as per the community. Participant five expressed “*As a Zulu woman, in my culture a woman is supposed to be respectful and submissive to men. It is believed a man is the head of the family and of any relationship with a woman as such should always be in control. A man is recognised as powerful as such the woman is expected to follow and do as she is told*” (P5I, May 2020). Participant four articulated “*culturally, women are supposed to carry themselves with grace, so to speak. Like they need to be well mannered, well behaved, when they sit on the chair they have to sit up on the chair. They need to be wife material, they need to cook, clean, cater to the man. They need to have a motherly quality even*

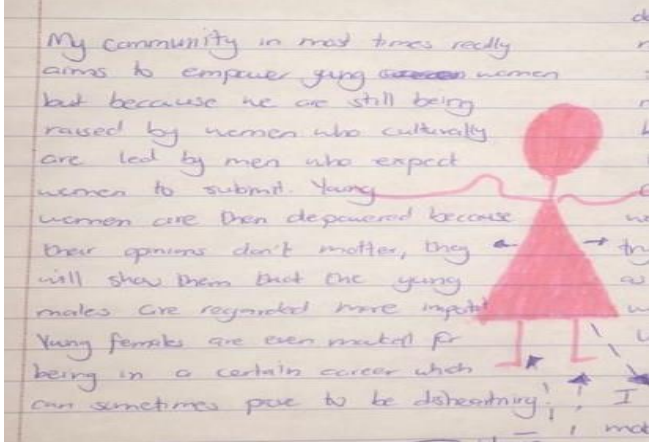
before they have children” (P4I, April 2020). Participant six indicated “Physical abuse and inequality, the man must always be the dominant one, the man can punish the woman by physically abusing her as a way for him to earn respect, women should be quiet about the abuse” (P6B, April, 2020, see diagram below).

P6B Dominant notions of female sexuality in the community	Description
	<p>Physical abuse and inequality.</p> <p>The man must always be the dominant one. The man can punish the woman by physically abusing her as a way for him to earn respect.</p> <p>Women should be quiet about the abuse.</p>

Participants further expressed how they feel about dominant notions of female sexuality in their community; specifically, whether they feel they are positive or negative with regards their well-being as young women. Three participants indicated strong negative feelings towards most of the highlighted community dominant notions of female sexuality. Participant three indicated “My mother is a very strict and culturally rooted person, she comes from a background where man is more superior than a woman, and because of that, she ended up raising us the same way. For each time I make a mistake, or she wants you to realise your mistake she will then say, ‘you shouldn’t be doing this because one day you will do the same thing to your husband.’ There is never a time where she will relate your mistake maybe as something you could actually do in your workplace environment. Because of growing up under that environment, a part of me has a hate for men, each time I feel I am taught to bow to somebody just because they are opposite sex” (P3B, April 2020).

This participant comments may suggest a young woman who feels oppressed by some cultural-community notions of female sexuality that constantly limits and define women in parameters of house makers and as subordinates to men. The participant paints a picture of a young woman who has professional aspirations but is tormented by her mother’s vision for her future. This finding asserts with Chisale (2017) argument that mostly in traditional communities’ women are defined in the context of wifely and reproductive roles. Contrary to observations made by scholars like Harrison (2008), Simbayi and Cloete (2009), LeClerc-Madlala (2012) and Langa (2012) the young woman in this study project those feelings of powerlessness into resentment as opposed to compliance.

Participant four indicated that most notions on female sexuality within her community and culture depower women mostly because of the patriarchal nature in which her society is structured. She indicated her society culturally views women as subordinates of males making it difficult for women’s voices to be considered or heard (See diagram P4B below).

P4B attitudes towards some community notions on female sexuality	Description
 <p>My community in most times really aims to empower young women but because we are still being raised by women who culturally are led by men who expect women to submit. Young women are then depowered because their opinions don't matter, they will show them that the young males are regarded more important. Young females are even marked for being in a certain career which can sometimes prove to be disheartening.</p>	<p>My community in most times really aims to empower young women but because we are still being raised by women who culturally are led by men who expect women to submit, young women are then depowered because their opinions don't matter. They will show them that the young males are regarded more important. Young women are even marked for being in a certain career which can be very disheartening.</p>

Moving on, three participants expressed having mixed feelings towards some dominant notions of female sexuality in the community i.e. both positive and negative feelings depending on the advanced values. The participants indicated that some notions advanced in their community are discriminatory and strip women of their humanity and power while others help them to be better individuals. Participant five argued *“Some of the ideas are fine, in terms of for instance how a woman should represent herself in public or towards the opposite sex. Also, in terms of like on the dress code and respect, that is the good thing because it is teaching us girls on how to be responsible and respectful. But on the point of saying the man should be the head of the house. No, that is not right because sometimes men feel like they have all the power”* (P5I, May 2020).

Almost similar sentiments were shared by participant four who concurred *“Personally, I think some of the qualities are great. Like every woman is born with that motherly ability, whether you realise it. There is something about us motherly even before you even realise it. So, having that quality brings warmth in our homes. So of course, I believe that coz homes need to be warm zones. And then aaah the carrying yourself in a certain way, I don't think so. It doesn't matter how I carry myself as long as I am not disrespectful....”* (P4I, April 2020). The statements by the young women exhibit both continuities and changes in relation to how the young women define female sexuality in contemporary South Africa. The comment hereof indicates young women's active involvement in the process of defining female sexuality, choosing values that suit them and deliberately dropping others. The young women's comments reflect young women who are eager to respect and honour their culture values, but not at the expense of their well-being.

Dominant notions on female sexuality at Howard College

Mainly, participants highlighted Howard College as a hub of liberating notions of female sexuality. Notions identified by all but one participant included: Women as beneficiaries of equal rights and freedoms, women as active and not passive participants in relationships, women empowered with a voice, freedom of expression in relationships promoted for all parties, 50-50 approach to relationships, feminism as an ideal and relationship as a partnership to induce success for both. The participants indicated that these dominant

notions were derived from day to day interactions with partners, general conduct of most couples on campus, seminars and lectures, textbook texts and interaction with peers from the opposite sex. Based on most of the above highlighted attributes, it was noted that Howard College was mostly infiltrated with modern notions of female sexuality. Henceforth in this study, notions of female sexuality at Howard college shall refer and be used interchangeably with the modern discourse of female sexuality.

The following are excerpts from interviews with two participants highlighting dominant notions of female sexuality at Howard College. Participant two narrated *“Well, aaah in a university setting we come across a lot of vocabulary that influences our thinking. And with me I have come across the word feminism. Aaah when you look at the word feminism a lot of people interpret it in different ways. But well now, because of the society we are in. but I think many feminists just live life the way they want to be”* (P2B, April 2020). Advancing almost similar views as the one above, participant one articulated *“Aaah, the dominant views. Women aaah are not expected to be submissive, like I think when I women ends up being submissive, they end up losing their rights or something like that. Like I as a woman if I am in a relationship, I also need to have my voice I also want to have my opinion”* (P1I, April 2020).

Nevertheless, one participant had an interesting all together contradictory notion of female sexuality dominant at the university. The participant identified submission and female suppression as a dominant notion of female sexuality at the University. She expressed *“The University of UKZN is packed with cultural people so to speak. So there have taken their cultural activities and brought it to the university. Where they come from homes where the males dominate. The male, you can’t say anything to the male without the male responding in a certain way. Like you can’t just go to the male, you need to approach them in a certain manner. So, I have seen that imposed on young women who supposedly think they have met the love of their lives. So, they just fall in the whole, I won’t do what my boyfriend doesn’t like. So that’s basically what you see all the times, with everyone who is on campus and in a relationship”* (P4I, April 2020). This participant’s comment suggests the university is at times not entirely different from the community when it comes to notions of female sexuality. She argues community values of female sexuality are imported to the University space by students and endorsed by females in the name of love. It is evident from this participants’ comment that even though the university context predominantly advances equality notions of female sexuality, some oppressive notions still exist, predominantly in day to day informal interactions.

Participants were asked to express how they feel about dominant notions of female sexuality at Howard College. The findings indicate most participants had positive feelings identifying the university as a site of liberation and empowerment. The participants further narrated how the university has impacted their personal lives, mostly in positive parameters. Sharing her experience on the positive impact of Howard College participant three uttered *“Mhmm I think university has helped me a lot in terms of views on female sexuality. When you are at home, you keep on hearing same stuff on how you should be behaving. But when you are at the university, it is a different environment, so you get to experiment new things, you get to hear views from different people. And then you end up saying, no man, I think I have been raised in this kind of situation. One and two worked for me but three and four I just have to let go and do what works best for me”* (P3I, April 2020).

Participant two conveyed almost similar sentiments postulating the university as instrumental in inspiring her to speak up and stand her ground in relationships and interactions with the opposite sex. She illustrated *“Yeah, it has impacted me. Aaah I mean, for me it is important for my partner and any member of the opposite sex to respect me. So, because of the terms I have encountered like feminism, even though most feminist.... laughs...don't like engaging in sexual or romantic relation, but again we are taught to always stand our ground, stand firm. If you don't like something, just say it as it is. Just always speak your mind and make sure that your views are always heard in the relationship”* (P2I, April 2020).

Two participants had mixed feelings towards dominant notions of female sexuality at Howard College, partly positive and partly negative. Despite concurring with the other participants on the liberating role of the university context they indicated such freedoms have limitations and challenges. Participant three lamented on how some young women are pressurised into indulging in sexual intercourse by peers or partners at Howard College in the name of proving their freedom or worth despite not being ready to do so. She stated, *“Universities are much free environments, and through our peers, we end up involving our-selves to sex even when we know we are not ready”* (P3I, April 2020).

Participant number four sentiments on dominant notions of female sexuality at Howard College were thought provoking as she questioned the feasibility of freedom and empowerment of some notions of female sexuality at Howard College arguing, they are limited to ‘seminar’ and ‘lecture room’ spaces. She lamented *“Aaah we so much feel secure in lecture theatre venues, because you know your opinion will not be override because you are a female. But because everyone in that seminar is a learner, so everyone who says anything matters and they will be taken seriously. Aaaah but the moment you leave that seminar. You know how we have lecturers who are within our peers, and you get on the outside. And when you have conversations amongst friends and that lecturer is there as well. Then the opinion changes, he is not playing the role of someone who is teaching then everything else changes. Now he goes on hey this is how it should be. What you said in class is rubbish, I only allowed you to say it coz we were in front of the whole class, but hey that is not how it works and stuff like that. So that where the depowering comes in, you can't agree and later disagree. So, it's somewhat like simply a performance and not a reality”* (P4I, April 2020).

Evident from this participants comment is the fact that though strides have been made to make universities like Howard College spaces where female sexuality is associated with freedom, equality and empowerment, limitations still exists holding and suppressing young women from fully exercising and enjoying such freedoms. On a larger scale, a majority of the freedoms were said to be theoretical and abstract, as young women are faced with a myriad of challenges to actualise them.

UKZN female students' sexual behaviour

The scope of this paper transcended beyond exploring UKZN's Howard College female students' perceptions on female sexuality to an examination of how such impact sexual behaviour and young women's HIV and AIDS prevention choices. This was fundamental, on the basis of research studies in the field documenting the role of powerless perceptions of female sexuality in contributing to sexual behaviours that places young women at high risk of HIV and AIDS infections (Leclerc-Madlala, 2001; Harrison, 2008; Dunn and Reddy, 2007; Dellar *et al*, 2015). Specifically, powerless perceptions of female sexuality have been linked

to passive behaviours in relationships depriving young women opportunities to be active agents, able to make informed choices and decisions.

This section presents data on UKZN's Howard College, female students' sexual behaviour to explore the relationship between young women's perceptions of female sexuality and actual behaviour in heterosexual relationships. Also, it analyses whether the behaviours exhibit passivity or agency. A variety of issues and behaviours were discussed ranging from relationship status, reasons for pursuing relationships, whether the relationships are sexual and if yes is the sex consensual, general communication on sexual issues and decision making in the relationship.

Relationship status and reasons for pursuing relationships'

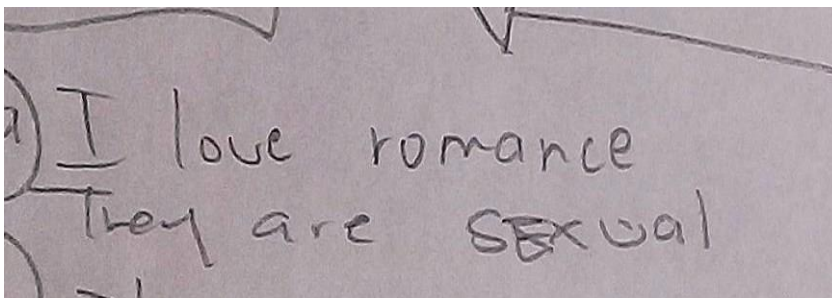
All except participant six indicated being in a relationship during the time of the study. Participant six however indicated to have previously been in heterosexual relationships, hence was still eligible to continue with the discussion. Participants thereafter expressed reasons for pursuing romantic relationships. Three key reasons were discussed by five participants, whilst one participant, participant one, suggested not having a reason or being unaware of such. Reasons articulated by the participants included partnership, search for potential life partner and pursuit of romance. Participant three stated "*my purpose of being in a relationship is almost like to build a partnership and future with my partner*" (P3I, April 2020). Participant four indicated "*I pursue romantic relationships to get a better understanding of who I am. One can learn so much by being with an individual who enhance your good or bad side*" (P4I, April 2020). Participant six stated "*I love romance*" (P6B, April 2020).

Though the five participants had different purposes for pursuing relationships, a key similarity noted was that they all seemed to be aware of what they were doing suggesting a certain level of intentionality in relation to their sexual behaviours. The participants' responses suggested they were not passive participants who engage in relationships merely because they are approached by men or expected to do so by the society. The young women rather indicated pursuing relationships to fulfil personal needs and motives. One participant response however was indistinct as she stated "*hahaha I don't know. I think it's the feelings, I don't know*" (P1I, April 2020). To some extent, this response may suggest uncertainty or unawareness of one's actions and motivations. Different from the other participants the absence of clear intent on the part of this participant may suggest a certain level of passiveness or not having full control over her decisions.

Sexual status and reasons behind such

Three participants indicated pursuing sexual relationships, two participants indicated being in non-sexual relationships while one participant (P5), did not disclose her relationships sexual status. The researcher provided the participants with a choice not to respond to any question that they were uncomfortable with or did not just want to respond. However, despite not wanting to disclose her relationship status, participant five was among the five participants who initially indicated to have been in a romantic relationship when responding to one of the questions. Overall, the mere fact that a majority of the participants were mostly eager and open to discuss their sexual status may suggest a shift in perceptions on female sexuality from a domain associated with utmost silence about sex as indicated by a majority of studies to one in which young women are not ashamed to freely express sexual interactions and activities (Mantell *et al.*, 2009; Bhana and Anderson, 2013).

The three participants in sexual relationships went on to elucidate on reasons for their choices and decisions. Significant in the responses articulated was sex for pleasure and satisfying sexual needs. Participant six stated “*I love romance*” (P6B, April 2020, see diagram below). Participant one articulated “*it fulfils my needs for sexual relations. It gives me assurance of being loved*” (P1B, April 2020). Evident in these responses is that the young women viewed sex as normal for young women and pursued it not as an obligation to their partners but for personal gratification. Such an outlook on sex and young women is divergent from traditional community notions on female sexuality in which sex for young women is mostly associated with procreation and pleasing men (Jewkes and morel, 2010; Yacoob, 2016). This may suggest that the young women may have been impacted by notions of female sexuality at Howard College in line with the modern discourse of female sexuality, which normalises and provides for sexual freedom and exploration.



P6B, April 2020

Discussion on this topic extended to how the young women came to the decision to engage in sexual activities. The main aim for this discussion was to examine whether the decisions were consensual or coerced. Overall, it was discovered the decision to engage in sexual activities was voluntary and mutual. Sex was indicated as part and parcel of a romantic relationship between a man and a woman as it satisfies sexual needs. As reference, participant four indicated “*It was a mutual thing to initiate in sexual activities.....when two people are in a relationship, they end up doing certain things and partaking in intimate stuff and whatever*” (P4B, April 2020). Based on the above response, it can be argued thereof that some of the young women in this study exhibited autonomy over their bodies as well as a certain level of empowerment to make decision pertaining to indulging in sexual intercourse without coercion.

The participants who expressed pursuing non-sexual relationships presented two reasons in line with their choice. It was observed that one participant arrived at that decision in order to fulfill and honor standards set by parents and family members suggesting that her decision is mostly a result of community influence. She narrated “*Aaah, for me. Aaah growing up... I was influenced a lot by my sisters... my cousins rather. Most of my cousins reached the age of 21 which is basically the age whereby most parents tell you that you can date, you can be in a relationship, and basically you can start living your life*” (P21, April 2020).

The other participant’s response suggested a partial influence from both the community and university. She indicated initially pursuing virginity as a result of cultural values as prescribed by parents but later on shifted to preserving it for her personal good to ensure she only engages in sex when she is ready for the act itself and consequences that may follow. She argued “*I still believe virginity so much. But I always feel like there should be some sort of a conference for women on how to raise children. Coz no man...laughs, coz our parents cannot be saying you are embarrassing me to the community.*” (PI3, April, 2020). She later

on added *“So I think university has helped me a lot in terms of views on female sexuality. When you are at home, you keep on hearing same stuff on how you should be behaving. But when you are at the university, it is a different environment, so you get to experiment new things, you get to hear views from different people. And then you end up saying, no man, I think I have been raised in this kind of situation. One and two worked for me but three and four I just have to let go and do what works best for me.”* An important insight can be drawn from this participant’s comment pertaining to notions of female sexuality even in line with cultural notions. Young women should be the central and important subjects in such rhetoric and should have a chance to ultimately make a choice.

Communication on sex and role in choices and decision making

Overall a majority of participants demonstrated high levels of communication with partners pertaining to sexual activities. The study participants also demonstrated an ability to contribute and enforce decisions pertaining to general conduct in the relationship inclining to equality and empowerment notions of female sexuality predominant in Universities. Nevertheless, Inconsistencies and contradictions were noted in participant five responses, specifically pertaining to her ability to enforce choices and decisions in her previous relationship.

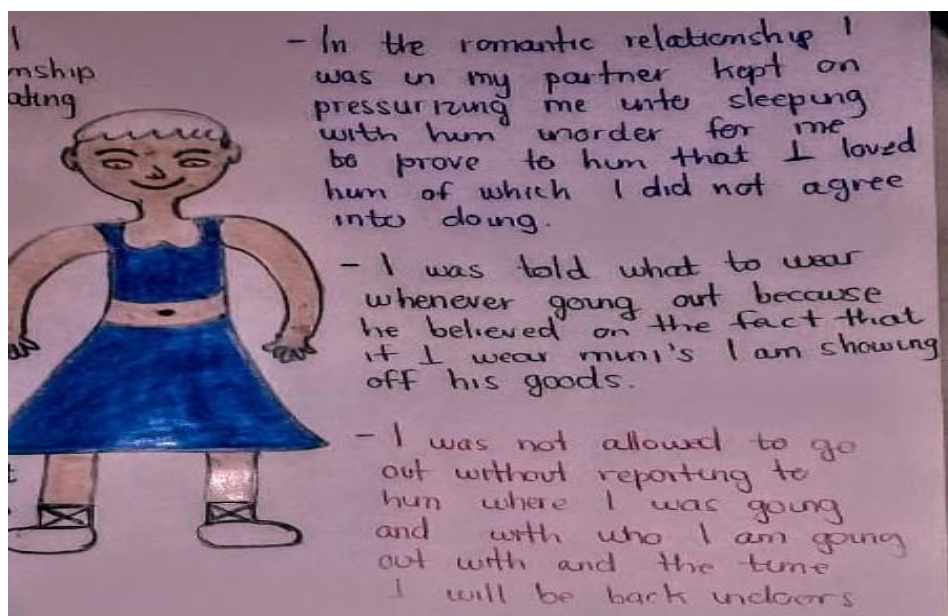
Two participants who initially underlined the decision to remain chaste demonstrated they communicated about their decision to their partners and enforced their choices in instances where their partners made sexual advances. One of the participants, participant three narrated *“from the early days, when you are still asking me to be together. I always make it clear that this are the rules. So, the moment, they try to request for whatsoever, to try your luck. I tell you no man, we had agreed. So, if they keep asking, I will be like no man we agreed. Then if you keep on nagging me on that, am just going to have to tell you that it’s fine. How about you go to that other person who can give you what you want. Because mina I am not ready for this and will not change my decision just because you are asking”* (P3I, April 2020). This statement demonstrates the participant’s ability to communicate her sexual stance with no intimidation. Furthermore, it illustrates the young women’s ability to make and enforce decisions in the relationship reflecting her freedom and agency. The above finding contradicts findings from two separate studies by Matrell (2009) and Shefer and Foster (2001) at two universities where it was observed that young women perceived themselves not in a position to communicate and discuss sexual issues with their partners in fear of portraying themselves as too sexually experienced or scaring off their partners..

Similar trends were registered among the young women who decided to be involved in sexual activities in their relationships. The young women demonstrated an ability to freely communicate about their sexual needs and fantasies without any restriction or fear. Participant one stated *“I openly discuss sexual issues for instance sexual fantasies and what I want him to do or not. This is a relationship so he can’t just do what he wants and not what I want”* (P1I, April 2020). This comment reflects a shift in young woman’s view and communication on sex and their sexuality. The young woman who made the comment suggested she considers herself as an active participant in sex, using it to meet and fulfil her desires. Furthermore, she considers it normal for young women to express sexual desire, a narrative absent and mostly unacceptable in traditional notions of female sexuality. This may suggest a crop of young women in contemporary South Africa able to make and enforce choices and decisions in relationships. This is a contradiction to some studies that observe young women as powerless agents succumbing to pressures to indulge in sexual

intercourse against their will in order to keep the partner (LeClerc-Madlala, 2012; Chisale, 2016).

Participant five articulations on communication on sex and enforcing choices and decisions were riddled with inconsistencies and ambiguities. During the one on one semi-structured interview she expressed an ability to communicate and enforce choices and decisions in heterosexual relationships. The participant however requested to be exempted from elaborating and discussing any scenario in which she enforced any choice or decision in her current or previous relationship. Participant five in her bodymap however narrated how she was previously in a relationship with a partner who dictated her dress code, monitored her movements and was pressurising her to engage in sexual intercourse, see diagram below. The inconsistency may suggest Participant five was more comfortable to express herself in writing and drawing as opposed to one on one discussion considering the sensitive nature of the discussion.

The researcher nevertheless referred to the bodymap responses, seeking clarification from the participant. In response participant five confirmed the occurrence of above-mentioned scenarios. She further indicated her partners actions made her feel upset and angry as he was forcing her to do things against her will. She indicated partial compliance to his dressing demands and monitoring of movements in the interest of maintaining the relationship. She however indicated not succumbing to his sexual advances. Participant five expressed *“Sometimes, I would do as he wished sometime not. Coz I would always tell him like you can’t tell me what to wear; I wear things according to my comfortability. But Sometimes I would just say let me just give it a go and do as am told. But I did not agree into what I was pressurised into doing (having sex)”* (P5I, May 2020). Participant five responses may suggest an ability to communicate and enforce certain choices and decisions whilst at the same time failure to enforce and communicate others.



P5B, May 2020

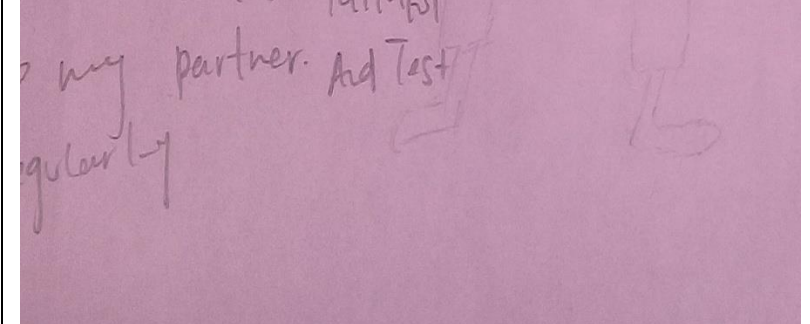
Sexual behaviour in line with HIV/AIDS prevention choices

This section presents findings on the participants' sexual behaviour in relation to HIV and AIDS prevention choices. Specifically, the section explored participants' stance on young women and HIV and AIDS prevention choices, in reference to participants' actual

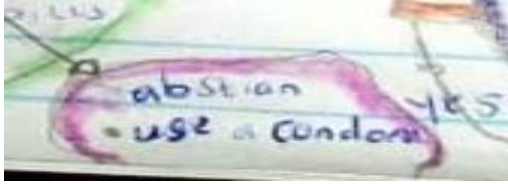
behaviours. Five participants strongly argued that young women should be able to make choices and take a proactive role in protecting themselves and their partners from HIV and AIDS. They indicated HIV and AIDS is a fatal disease, hence prevention and protection, is a responsibility of every individual, young women alike. Participant one had the following to say *“Firstly women need to know what they want in lives. Because if they always listen to men, what men wants, that means at the end of the day they don’t know their worth. Secondly, they have to learn to stand up for themselves like protect themselves because they will otherwise end up digging their own grave”* (P11, April 2020). Participant two stated *“women should always have a say in the sexual terms and conditions with regards to contraception and protection”* (P2B, May 2020).

Participant five indicated that young women’s role in HIV and AIDS prevention choices and actions is dependent on their partner as well as the strength and confidence of the woman. Her sentiments suggested that it is easier for young women to contribute in making and enforcing decisions in relationships in cases where the partner is tolerant and open to enabling the woman to have certain levels of influence in the relationship or when the woman has a strong will. She expressed *“Some do have a role, some don’t. It depends on the partner you are within a relationship. If you are a person who tends to allow the partner, say and do whatever and is in charge of everything in relationship you won’t. But if you are a person who stands firms and gets you power then obviously you would have a role in negotiating with your partner and save yourself”* (P5I, May 2020).

Narrowing in on HIV and AIDS prevention choices, fundamental practices highlighted by all participants included the essential nature of undergoing an HIV test, condom use and being faithful to one partner. In line with an HIV test, participant three argued *“I think it is an important part of the relationship, as soon as you decide to be sexually active. I think it important to both know your status for safety reasons”* (PI3, April 2020). Concurring with the above sentiments participant six further stated *“test regularly”* (PB6, April 2020, see bodymaps diagrams below).

PB6, HIV AIDS test and young women	Description
	Be faithful to my partner and test regularly.

Participant five articulated on the pre-eminence of condom use in performing a double task of preventing the contraction of HIV and AIDS and unplanned pregnancies. She postulated *“it’s best to always use protection no matter what. So, if you don’t know your partners status, use a condom. Even if you know your partners status, always use a condom to prevent pregnancies and all that. In order for you to be safe, always use a condom if you are sexually active”* (P5I, May 2020). Similar sentiments were shared by participant one who in the bodymap stated women should either *“abstain or use condoms”* to protect themselves from HIV and AIDS (P1B, April 2020, see diagram below).



P1B, April 2020

Participant four went further to illuminate on the need for young women to take full responsibility for condom use by having condoms at hand. She argued *“Don’t rely on your partner to always come with all the things you guys have. Have it yourself so when he try to trick you that he doesn’t have or he doesn’t need it then you already have it”* (P14, April 2020). The participant’s statements illustrated awareness that sometimes men may not be open to or may resist condom use (Hlubangane, 2014). In view of such scenarios, she perceives women as rightful candidate to carry condoms to eliminate room for excuses. Overall, it was observed that all the young women who participated in the study perceived themselves as qualified to make choices and decisions pertaining to HIV and AIDS prevention.

The study went further to examine actual HIV and AIDS prevention choices and behaviours practiced by the participants in their relationships. This was more applicable on three participants who were or had previously been sexually active. All the participants who indicated to have been sexually active indicated to have gone for an HIV and AIDS test. Two participants underwent the procedure together with their partners, indicating that was necessary for transparency purposes. One participant however went through the procedure alone, indicating she did not think it would have made any difference if the procedure was done whilst in the company and together with her partner.

In relation to condom use, all sexually active participants indicated to have previously requested for such. However, they demonstrated lack of consistency in condom usage indicating either they were aware of their partners’ status or trusted their partners, to use condoms. Overall, the participants illustrated they were empowered to make and enforce decisions and choices to ensure they are less susceptible to HIV and AIDS infections. This finding contradicts a majority of studies that reveal young women as powerless and unable to make and enforce HIV and AIDS preventions choices due to apprehension for instance in a study conducted by Vukapi (2016) or due to the need to be loved as suggested in a study conducted by Reddy and Dunne (2007). The young women in this study exemplified young women that hold on as opposed to relinquishing all power to men, when it comes to issues of health and general well-being. However, the study observed complacency, as a stumbling block to the participants’ ability in enforcing HIV and AIDS prevention choices especially in long term and stable relationships.

Conclusion

This chapter presented data that was collected through bodymaps and individual semi-structured interviews with a selected group of Zulu female students at Howard College campus, University of KwaZulu-Natal. The chapter provided an in-depth discussion on four key themes that emerged through the data analysis process namely: UKZN’s Howard College, female student understanding and definitions of female sexuality, influencers of female sexuality, sexual behaviour and sexual behaviour in line with HIV and AIDS prevention choices. Each theme had sub themes, which were further delineated and comprehensively explored. The subsequent chapter will further discuss the findings in line with the study objectives and the study theoretical assumptions.

CHAPTER SIX: DISCUSSION OF KEY FINDINGS

Introduction

This chapter presents a discussion of the key findings for this study. The findings will be discussed in line with the concepts stipulated in the culture-centred approach and empowerment theory, the theoretical framework on which this study was informed. Furthermore, discussion of findings will be done in reference to previous literature and studies on female sexuality in South Africa. Throughout the discussion section, attempts will be made to make key conclusions together with recommendations in line with the set objectives as well as research questions.

Howard College female students' perception of female sexuality

The first objective of this study was to explore and understand how female students especially those of Zulu origin understand, define and perceive female sexuality within the context of the University of KwaZulu-Natal, Howard College campus. Overall, on a broader spectrum this study observed that the participants perceived and defined female sexuality from both a biological and sociological stance nevertheless pre-eminence was accorded to the sociological stance. Two participants indicated to define and associate female sexuality with psyche as well as physiological and psychological aspects of a female which are mostly inborn traits of a human (Dretske, 2004). All the participants nevertheless focussed on aspects and features like body image, virginity, female characteristics and behaviours for instance respect, loyalty etc. The above highlighted traits are not inborn indispensable qualities of the female anatomy but rather learnt and informed by dominant notions and practices in most context and cultures (Tolman and Diamond, 2001; Burr, 2015). For instance, as stipulated in the literature review section in this study, in traditional Zulu culture, virginity among young women was recognised as a marker of utmost purity and a desirable trait for young females worthy to find suitors (LeClerc-Madlala, 2012; Chisale, 2016).

The finding above concurs and advances sentiments proposed by various scholars in the field on the pre-eminence of researching and approaching sexuality in view of the social constructionist perspective (Gupta Rao, 2000; Parker, 2003; Arnfred, 2004; Macphail and Campbell; 2006 Tamale, 2011; Uwah and Wright, 2011). As much as the role of biology cannot be disregarded, it cannot alone facilitate the understanding of sexuality in its entirety. Human beings are social beings; whole lives are dictated by values, beliefs and practices agreed upon by members of their culture (Parker, 2003). The above finding also confirms and advances sentiments by the culture-centred approach that focuses on the pre-eminence of an individual's context and the culture there in, in shaping an individual view of self (Dutta, 2014).

The study further narrowed in to explore specific parameters used to define female sexuality specifically because it was noted most of the participants initially defined the concept in broader and abstract terms. Female sexuality traits discussed by the participants varied from general conduct, mannerism and responsibilities of a woman. However, key patterns were noted in line with the position from which most of the participants were defining female sexuality comprising compliances, changes and modifications of traditional traits of femininity and female sexuality. For example, specific key traits and characteristics of female sexuality highlighted by participants included respect for oneself and partner, loyalty, love, warmth, home maker, self-awareness, assertiveness, firmness and control. The first four qualities i.e. respect for oneself and partner, loyalty, love, warmth highlighted comprise traditional notions

of female sexuality in traditional societies for instance in Zulu culture. The above qualities endorse the role of a woman as a home maker and follower of a man (Leclerc-Madlala, 2012). The remaining qualities which are assertiveness, firmness and control were not traditionally associated with female sexuality as they connote a woman with certain levels of power, a trait not traditionally perceived as desirable for women (Connell, 2005). This suggest that the participants are redefining and negotiating female sexuality by adopting some traditional traits of female sexuality from their culture they deem as reasonable or necessary together with newer notions of female sexuality not previously prescribed for women.

This final finding is similar to that of a study conducted by Ngubane (2004) among female students at the University of Kwazulu-Natal on how they perceive a “good” Zulu woman in contemporary South Africa. The findings of the study reflected that female students were actively redefining how they perceive themselves by choosing some aspects of their culture they perceive as fit for them, changing or modifying values and practices they deem as not ideal and adopting newer qualities of female sexuality previously labelled as ‘unnatural’ for women.

Almost similar trends were noted in line with how the participants perceived female sexuality regarding the position of women in relationships and sex and pleasure and young women. In light of perceptions on the position of women in relationships, this study revealed an interesting outlook, fused with compliance and changes together with agency and passivity. The young women in the study were quick to clarify that they understood and subscribed to the notion that men and women are equal nevertheless, many of them perceived men as the ones who ought to take a leading role in the relationship. It was however stated that men should earn women’s respect as well as prove their worth and abilities to be accorded the right to lead as opposed to feeling entitled to leadership by the virtue of biologically being men. The young women redefinition of leadership as not being uttermost submission on the part of women as well as placing terms and conditions for according men the right to lead reflects a shift from traditional conceptualization of leadership and imply a certain level of agency. It may suggest that the young women acknowledged themselves as powerful agents as well as active participants in the relationship. Nevertheless, compliance was noted in the respondents’ eagerness to relinquish some part of that power to men to play the role of a primary leader. It was as if most of the participants inherently and unconsciously recognized men more suited to lead.

Overall, the findings reveal the interplay and impact of notions of femininity and female sexuality from both the community mostly inclining to the traditional discourse of female sexuality and university mostly inclining to the modern discourse of female sexuality. Research has shown that even in ‘modern’ spaces for instance universities, perceptions on sexuality and gender norms do not lead to an absolute change but rather an adaptation of values and norms (Matrell, *et al* 2009). The perceptions of female students in line with the position of men and women in the relationship indicate a compromise and negotiation of both traditional and modern notions that the young women have been exposed to.

Lastly, pertaining to the young women’s perceptions on sex and pleasure, this study established two key findings. It was observed that half of the participants inclined to the notion that it is more ideal for sex and pleasure to located in the realm of marriage or formal relationship from the age of 21. Nevertheless, their responses indicated such should not be

done out of pressure from the community but be a voluntary decision. The participants mostly indicated they were preserving themselves until they were mature and ready for sexual intercourse so that they will be responsible to bear some of the consequences that come with indulging in sexual intercourse for instance pregnancies. This finding is unique and reveals a shift in relation to how these young women are defining female sexuality. Literature in South Africa is mostly populated with research that depicts young women having perceptions of saving their virginity for the right partners or to attract a good suitor to marry them (Harrison, 2008; Maluleke, 2012; LeClerc-Madlala, 2012; Chisale, 2016). The young women's responses however demonstrated a definition of female sexuality purely from their standpoint and personal agendas and without a backdrop of male sexuality.

On the other hand, the remaining participants perceived sex and pleasure as part and parcel of female sexuality. They indicated sex as a natural occurrence designed to be enjoyed and pursued by females and males alike. Emerging studies in the field of female sexuality in South Africa have documented similar observation, indicating a shift on how young women perceive sex and pleasure in contemporary spaces in South Africa (Bhana and Anderson, 2013).

In summary the study noted an adaptation of traditional and modern notions of female sexuality in relation to the study participants' perceptions of female sexuality. The study further observed that young women in the study perceived female sexuality in both active and passive parameters. Their perceptions on female sexuality were however more inclined towards the positive/active end of the spectrum. On a larger scale, the young women demonstrated an awareness of societal barriers operating to suppress and oppress their sexuality. They demonstrated a certain level of confidence and determination for the need to overcome these barriers to ensure that they are more in control of their sexuality. The empowerment theory argues that empowerment is a process that begins at an intrapersonal level when the individual recognises and believes that they are capable of influencing decisions pertaining to their livelihood (Hur, 2006). It can be concluded therefore, that the young women' perceptions of female sexuality exhibit young women undergoing an empowerment process.

Key influences on UKZN, Howard College, female students' perceptions of female sexuality

A specific objective under the first objective was to examine key influences on young Zulu women at Howard College, perceptions of female sexuality. The study established the community i.e. traditional discourse on female sexuality and Howard College i.e. modern discourse of female sexuality as two main influences. UKZN is located within the province of KwaZulu-Natal with various people and communities with distinct cultures, where most students who study at UKZN originally come from. As alluded to in the methodology section and in the data presentation section, this study focussed and was limited to female students of Zulu origin, the majority grouping in Kwazulu-Natal.

It was observed that participants demonstrated being socialised in female sexuality norms, values and practices in Zulu culture from a tender age impacting some of their perceptions on female sexuality. Nevertheless, it was observed that the transition to the university exposed the study participants to other mostly modern values, norms and practices on female sexuality, which again impacted some of their perceptions on female sexuality. The participants articulated on how they were bombarded with concepts associating female

sexuality to submission and utter respect on the side of women towards men in communities only to experience and be exposed to concepts for instance feminism that associated female sexuality with freedoms at Howard College. This finding echoes assumption put across by the Culture-Centred approach which highlights the role of context in an individual livelihood. CCA states that the immediate environment and the culture thereof operates as a constitutive framework creating meanings and dictating peoples' views and experiences, as reflected by the participants' perceptions on female sexuality in this study (Dutta, 2014).

In line with the type of impact and influence of the two contexts, this study observed varying reactions from the study participants. However, in relation to the community mostly in line with traditional discourse of female sexuality as per Zulu culture, some participants indicated the framing of some cultural values, norms and practices as perpetrators of negative connotations of female sexuality with the potential to disempower young women. It was established that norms for instance those that encourage young women to be respectful and submissive to men at all costs and also practices that emphasise chastity among young women for purposes of attracting a suitor, depicts women as a lesser sex, born and nurtured to satisfy the desires of men. The above-mentioned practices were highlighted as contributing factors in young women losing their voices and power in heterosexual relationships, increasing vulnerability to social ills among them HIV and AIDS.

This study henceforth highlights discourses pertaining to female sexuality within the community mostly traditional as structures hindering young women's ability to have control over their sexuality negatively impacting wellbeing (Dutta, 2018). This finding concurs with findings from a majority of studies conducted in South Africa as discussed in the literature review section, which have established the disempowering role of some cultural values, norms and practices in line with female sexuality (Shefer and Foster, 2001; Weiss, Whelan and Rao Gupta: 2000; Leclerc-Madlala, Simbayi and Cloete, 2009; LeClerc-Madlala, 2012; Langa, 2012; Ngubane, 2016).

In relation to the impact and influence of the university context, varying perceptions were noted however on a larger scale, Howard College was identified as a hub of liberating notions with positive implications on female sexuality. The university was depicted as a space that promotes freedoms and the empowerment of young women enabling them to be active participants in relation to sexual conduct and relationship. Most of the participants in this study indicated that their transition from the community to the university facilitated a process of enlightenment and bewilderment regarding their perceptions and understanding of female sexuality. Most of the participants indicated undergoing processes of self-introspection, analysing some of the notions of femininity and female sexuality in reference to their culture and community. This engagement led to the questioning of the validity and impact of some traditional notions on female sexuality on their livelihood. It was observed that the process enabled most of the participants to identify some cultural notions and values as structures limiting them from actualising their potential as underlined by CCA (Dutta, 2014).

CCA argues that when marginalised groups of society become aware of structures oppressing them, they are able to deconstruct them by finding ways to challenge the barriers in order to co-construct new meanings (Dutta, 2018). He refers to the process of challenging structures as agency. In the context of this study, agency was demonstrated by some of the participants' deliberate abandonment or refinement of some perceptions on female sexuality

as advanced by some norms, values and practices in their community and culture. This study established that the study participants eventually co-constructed new meanings in line with female sexuality by blending meanings on such from notions of female sexuality in their culture and at the university. This finding has been reported in another study conducted by Ngubane in the year 2014. The study explored how female students at the University of KwaZulu-Natal defined a “good” Zulu woman in contemporary South Africa. It was established that participants derived notions from both their community and the university in their definition of who they believed was a good Zulu woman.

Influence of perceptions of female sexuality on sexual behaviour

The second objective of this study was to understand the impact of the University of KwaZulu-Natal female student’s perceptions of female sexuality on sexual behaviour. Specifically, this objective aimed at examining two key issues. Firstly, it aimed at uncovering the relationship between how the young women in the study perceived themselves and their sexual behaviour. Considering the complexity of the structural and social forces that surrounds female sexuality and its impact on an individual, it cannot be assumed that one’s perceptions of sexuality will automatically be expressed through actual behaviours (Jewkes and Morrell, 2010; Bhana and Anderson, 2013).

The study observed both consistencies and contradictions between participants’ perceptions and sexual behaviours in relationships. On a larger scale, most of the participants in the study demonstrated an ability to translate their attitudes and beliefs on female sexuality into their day to day actions and interactions with male partners. As reference, participants who perceived virginity as an ideal trait confirmed not only being able to communicate to their partners on their choice but an ability to enforce such. In the same vein, those who viewed sex and pleasure as part and parcel of female sexuality indicated an ability to communicate on their needs and desires to their partners and some even narrated how they refused sexual intercourse on days they were not keen.

Nevertheless, some participants’ responses were surrounded by uncertainties and contradictions. One participant for instance expressed how she associates female sexuality with the ability to be in charge of her body as well as influence decisions in the relationship. When quizzed to elaborate and provide any scenarios confirming such either in her previous or current relationship, she indicated she was not willing to respond to the question. The participant’s unwillingness to provide examples of personal experiences reveals one of the challenges associated with conversations surrounding female sexuality. In most cases women feel embarrassed and uncomfortable to discuss such issues as they are considered private and sensitive. Tradition notions on female sexuality perpetuates that sexuality issues are private and should not be discussed in public or not even discussed at all since such discussions reflects the woman as being promiscuous.

Nevertheless, a critical look at this participant’s bodymap uncovered inconsistencies between her perceptions and actual behaviours. The participant narrated how she once was in a relationship with a partner who dictated her dress code, monitored her movements and was pressurising her to engage in sexual intercourse. She indicated her previous partner’s behaviour made her feel controlled and angry. At a later stage in the interview the researcher requested for her reaction towards her previous partners actions, of which she indicated partial compliance to his dressing demands and monitoring of movements in the interest of maintaining the relationship. She however indicated not succumbing to his sexual

advances. The participant's actions of partial compliance in the interest of maintaining the relationship may signify an inability to effectively convert all her perceptions of self and female sexuality to tangible actions.

The above finding highlights the complexity of female sexuality in line with perceptions of self and actual behaviour. It may suggest that one's beliefs and attitudes of self, an issue or phenomenon does not always translate in actual behaviours. Even though the participant discussed in the paragraph above perceived herself as empowered that did not fully materialise in actions. The findings echo assumptions advanced by constructs under empowerment theory. Empowerment theory states that individual empowerment occurs at several levels two of them being intrapersonal and interpersonal (Zimmerman, 2000). The intrapersonal level encompasses an individual's beliefs, attitudes and perceptions that they can influence decisions and actions in their life. The interpersonal level is the behaviour component, comprising the manifestation of one's beliefs, attitudes and perceptions (Hur, 2006). Empowerment at an intrapersonal level does not always guarantee empowerment at an interpersonal level as an individual has to interact with the social context, referred to the interactional level of individual empowerment, which contributes to their ability to exert control. In this sense, it may suggest that even though the participant discussed above was undergoing empowerment at an intrapersonal level, the manifestation of the process may have been disrupted by forces in her social context for instance pressure from her partner, inhibiting her ability to translate beliefs and perceptions in actions.

Almost a similar finding was uncovered by Bhana and Anderson (2013) in a study conducted in the same region of Kwazulu-Natal among colored teenage women on how they interpret and negotiate their sexuality. It was observed that though the young women perceived themselves mostly as capable and in control of decisions in their relationships, it was difficult for some of them to translate some of their beliefs and attitudes into actions due to factors like pressure from their partners or the quest to be loved and maintain the relationship. It can be argued when it comes to sexual conduct and behaviour, more factors are at play inhibiting an individual's will and autonomy (Jewkes and Morrell (2010).

The above finding echoes the need of addressing partnership dynamics in the quest of empowering young women (Nota, 2016). No matter how empowered a young woman may perceive herself to be, her actions and behaviours are bound to be impacted by her partner one way or the other. It is henceforth imperative for young boys to be socialised in a way that recognises women as equals and powerful agents in a relationship to aid in young women's empowerment process.

The second purpose under this objective was to examine the relationship between perceptions on female sexuality and young women's sexual behaviours regarding autonomy in making choices and decisions in relationships. An examination on such was relevant with a lot of studies in South Africa documenting some notions of female sexuality dominant in the community and cultures, for instance Zulu culture, as perpetrators of negative perceptions on female sexuality among young women. (Rankhotha, 2004; Leclerc-Madlala, Simbayi and Cloete, 2009; LeClerc-Madlala, 2012). The studies indicate as a result of negative perceptions of female sexuality, young women become passive and receptive participants in their own sexual experiences increasing vulnerability to HIV and AIDS infections (Rao Gupta, 2000; Matrell, *et al.*; 2009; Harrison et al, 2015; Abdool Karim, 2017).

This study established that Howard College female students under study were tilting towards positive behaviours as a result of their perceptions of female sexuality. This study observed that a majority of the participants' behaviours reflected autonomy over their lives signalling an empowerment process. Zimmerman (1995) argued that empowerment can be measured by an individual's ability to carry out activities that exhibit power and having mastery over one's life. On the most part, the participants' conduct and actions in the study exhibited awareness, intent and control. A good reference confirming such relates to the participants' reasons for being in relationships. All but one participant had clear distinct purposes and motivations for being in a relationship. In addition, it was observed that the young women were pursuing relationships for personal gratification, as opposed to succumbing to influence or pressure from other parties.

Similar trends were observed in the young women's purposes for engaging in sexual intercourse as well as not engaging in sexual intercourse. Despite having different standpoints on sex, on the most part, most of the participants demonstrated that their actions stemmed from personal interest and aspirations and not coercion from partners or their communities. Despite being aware of the challenges surrounding them, the young women demonstrated determination and courage to be active subjects in relationships and not passive objects who merely respond to male desires.

Nevertheless, it should be pointed out that the study does not purport that young women in the study are empowered rather are undergoing empowerment. Indeed, it is argued that empowerment is dynamic, meaning it is a progressive process (Hur, 2006). Additionally, by the virtue of being a process, empowerment is fluid meaning it is subject to change at any given time. The participant, who complied with some of her boyfriend's demands whilst at the same time exerting resistance in some areas, as discussed in the previous section, is a demonstration of that.

This was further noted in the participants' perceptions regarding the rightful person to lead in a relationship. Overall, though most of the participants expressed considering themselves as equals with their male partners; they demonstrated reluctance to lead or co-lead the relationship. Many of them expressed eagerness to delegate those powers to qualified males, to guide the relationship under strict terms and conditions. This scenario may suggest the young women's attempt to reach a compromise demonstrating both power and at the same time powerlessness which emanates from the empowerment process they are undergoing.

Influence of perceptions of female sexuality on HIV and AIDS prevention choices

This section discusses findings in relation to the third objective of this study, impact of UKZN, Howard College, female students' perceptions on female sexuality on HIV and AIDS prevention choices. As discussed in the introduction and literature review chapter, young women in South Africa are more vulnerable to HIV and AIDS infections, four times higher than young men within their age group (Abdool Karim, 2017). Among others, some cultural norms, values and practices on sexuality especially female sexuality have been identified as contributing factors to young women's increased vulnerability. Some dominant notions of female sexuality have been identified to objectify and commoditise women, promoting the notion that female sexuality exists to gratify male sexuality (Chisale, 2016; Mwamanda, 2016). It has been stated young women raised in such contexts; mostly perceive themselves

as powerless affecting agency in heterosexual relations. In the absence of agency, young women are denied the opportunity to contribute or make choices and decision in sexual relations and encounters, regarding HIV and AIDS prevention choices (Harrison, *et al*: 2006). This objective henceforth aimed to interrogate Howard College female student's agency regarding HIV and AIDS prevention choices as influenced by their perceptions on female sexuality. One reason cited for young women's vulnerability to HIV and AIDS has been their inability to request for condom use (Harrison, *et al*: 2006). This study henceforth examined UKZN, Howard College, female students' perceptions on requesting partners for condom use and experiences on such. The study observed that the participants perceived themselves and women in general as qualified candidates to request for condom use. All participants indicated that it is their responsibility to request and ensure condom use at all times to protect themselves and their partners from HIV and AIDS. Furthermore, some few participants were of the view that young women should take it upon themselves to carry condoms as it performs a double function of preventing HIV and AIDS as well as unplanned pregnancies. This finding contradicts finding from other studies which suggested that young women view condom use as the responsibility of males (Weiss *et al*, 2000; Nota, 2016).

In terms of their actual behaviours, the study observed that the young women demonstrated both agency and passivity in requesting and using condoms. It was observed that all participants who were sexually active indicated asking for condom use at some point in time, mainly at the beginning of the relationship to ensure they were protected from HIV and AIDS. CCA postulates that "agency refers to the capacity of cultural members to enact their choices and to participate actively in negotiating the structures that constrain their access to resources" (Dutta, 2014:72). The act of requesting for condom use demonstrates agency as it suggests that the young women in the study understood their vulnerability to HIV and AIDS and its dire implications on their lives, hence were active participants in relation to enforcing decisions to mitigate its impacts on their lives.

However, it was observed that the participants were not consistent in requesting as well as condom usage as the relationship progressed. It was observed that they did not perceive condom usage as crucial as their relationship progressed either due to the fact that they had undergone for an HIV test with their partners at some point in the relationship or had developed a deep sense of trust towards their partners. It was observed the participants perceived themselves not at high or any risk of HIV and AIDS infections, having established strong bonds and a sense of belonging in the relationship. This above finding may suggest complacency and to some extent passivity making the young women less empowered to affect HIV and AIDS prevention choices. Individual empowerment postulate individuals who are undergoing empowerment or are active agents in their lives are critically aware of their environment (Zimmerman, 2000). Critical awareness of one's environment entails an identification of explicit as well as implicit casual agents in one's environment also called power blocks, which have the ability to negatively impact one's wellbeing and livelihood. The young women in this study exhibited being blinded by comfort and love to an extent that they could not critically identify the possibilities of being at risk to HIV and AIDS for instance by their partners sexual unfaithfulness etc. In putting all their trust on their partner, perceiving them to be faithful to protect them from HIV and AIDS infections, the young women exhibited not being active agents in HIV and AIDS prevention measures, increasing susceptibility to infections.

The above finding highlights the complexity of condom usage for HIV and AIDS prevention among young women especially in stable relationship as indicated by other scholars (Macphail and Campbell, 2006; Hlabangane, 2014). In a study conducted by Hlabangane (2014) on teenage sexuality and HIV and AIDS among young women in Soweto, it was established that young women were more at risk to HIV and AIDS infections in stable relationship as they were more reluctant to use condoms as compared to casual or one off relationships. This finding highlights the need for communication campaigns and narrative on sexuality that normalise consistent condom use as part and parcel of casual as well as stable relationships. It is also imperative to promote positive language on condom usage to ensure it does not connote lack of trust towards one's partner.

The study further examined perceptions and behaviours in relation to HIV testing, as an HIV and AIDS prevention measure. The study uncovered almost similar patterns as was the case for condom usage. All participants highlighted the significance of knowing their as well as partner's status prior to indulging in sexual intercourse. Additionally, they indicated they believed they are empowered to initiate for an HIV test to ensure they do not place their lives and their partner at any risk.

In line with actual choices and behaviours, it was established that participants who were not sexually active indicated not to have undergone for an HIV test. They indicated they plan to undergo an HIV test when they intend to indulge in sexual activities. Participants who were sexually active indicated to have undergone for an HIV test. Two of them indicated undergoing an HIV test in the company of their partner, while one participant indicated to have undergone the process alone, indicating not seeing the necessity of doing the test with her partner. Nevertheless, it was observed, all sexually active participants did the HIV test once, at the onset of the relationship.

It can be concluded that in undergoing for an HIV test specifically in the company of their partners', some of the participant's demonstrated being in charge as well as an ability to exert control over decisions in one's life. The participants actions to know their and the partners' status reflects an awareness of structures that can negatively inflict their lives i.e. infection from HIV and AIDS and an attempt to engage and address the structure. As per CCA that reflects agency as well as empowerment as per empowerment theory (Zimmerman, 2000; Dutta, 2014). Nonetheless, in undergoing the test once and in the case of one of the participants, in the absence of the partner, displays complacency and passivity. The World Health Organisation (WHO, 2014) recommends that people who are sexually active should undergo an HIV test together with the partner on a regular basis. Henceforth, actions of some of the participants as suggested in the above scenario suggest a lack of critical knowledge and awareness of HIV and AIDS resulting in an inability to identify and engage with explicit factors that may increase their risk to HIV and AIDS infections, for instance unfaithfulness on the part of the partner during the period after the initial HIV test. As per empowerment theory, such actions do not connote an individual who has complete mastery over one's life reflecting lack of empowerment (Zimmerman, 2000).

The above finding draws attention to the complexity of HIV testing as an HIV and AIDS prevention strategy especially in stable relationships. The above finding highlights that It is imperative for HIV and AIDS prevention campaigns to echo the significance of HIV testing for both parties in a relationship not only at the onset of the relationship but on a three months frequency as advised. Other than condom usage and HIV testing as an HIV and

AIDS prevention choice, participants indicated the importance of being faithful to one partner as a measure to prevent HIV and AIDS infections in their relationship.

Summary of key findings

Based on the data analysis and discussion, the following observations and key conclusions have been made from this study. Female students at the University of KwaZulu-Natal who participated in the study were impacted by traditional notions of female sexuality from communities predominantly in line with Zulu culture as well as modern notions of female sexuality at the University of KwaZulu-Natal, Howard College Campus. Though the impact varied from one individual to another, the participants indicated that they normally choose what they deem as ideal and necessary from each context and employ it in their lives. In relation to the participants' perceptions of the impact of notions of female sexuality from both the university and community i.e. whether it is mainly negative or positive, mixed feelings were expressed by each participant. Nevertheless, overall modern notions of female sexuality within the university context were associated with positive connotations on female sexuality inclining to liberation and empowerment of young women. That however did have its own limitations and challenges, as two participants indicated the freedoms as more theoretical and susceptible to manipulation and abuse. Traditional notions of female sexuality dominant in the community were predominantly spoken of in negative terms, perpetrating notions of female sexuality as equivalent to passivity and powerlessness. However, some participants highlighted some positive aspects of notions of female sexuality dominant in their community for instance providing a good moral compass for young women in relation to mannerism and dress code.

Pertaining to participants' actual perceptions of female sexuality, variations occurred from one individual to another but overall, the study observed an adaptation of traditional and modern aspects of female sexuality from the community and the university spaces. Specific key traits and characteristics of female sexuality highlighted by participants included respect for oneself and partner, loyalty, love, warmth, home maker, self-awareness, assertiveness, firmness and control. In relation to communication on sexual issues and general issues with partners, there was a widespread perception of self and females as qualified candidates to communicate views, needs and desires and be heard. However, major variations were observed pertaining to the other two parameters. In line with perceptions on the position of women in the relationship, most participants exhibited an acknowledgement of the need for equality between men and women however perceived themselves more suited as followers to a 'worthy' man's lead. There was a consensus on a redefinition of leadership from using force and coercion to leading in parameters of motivational or mentorship recognising the other as a partner.

Pertaining to perceptions on sex and pleasure for young women, two perceptions were predominant among the participants. Almost half of the participants perceived virginity as an ideal, arguing it is good for women to wait until they are older to indulge in sex. It was interesting however to observe that several of the participants perceived virginity as an ideal not necessary to preserve themselves, so they get a husband but for self and personal interest. The other half of the participants viewed sex and pleasure as part and parcel of a relationship arguing it is imperative to meet needs and desires.

Discussions on the impact of perceptions of female sexuality on sexual behaviour revealed two key observations. First and foremost, in relation to the correlation between participants

perceptions on female sexuality and actual behaviours, consistencies and contradictions were noted. Nonetheless, overall, the study noted in the case of most of the participants, their perceptions on female sexuality reflected in their actual behaviours. Secondly, in line with the nature of the impact, overall, the findings revealed behaviours tilting towards empowerment. Though some of the participants demonstrated coercion and compliance as a motivation for some of their behaviours, most of the participant's actions demonstrated awareness, choice and free will.

Almost similar findings were revealed in line with the impact of perceptions of female sexuality on HIV and AIDS prevention choices. The participants demonstrated perceptions and an ability to make decisions and choices pertaining to HIV and AIDS prevention choices. Nevertheless, complacency was noted as a key stumbling block to participants' ability to enforce HIV and AIDS prevention choices.

CHAPTER SEVEN: CONCLUSION

Women in South Africa bear the heaviest brunt of HIV and AIDS, being the most infected. More unsettling is the disproportionate HIV and AIDS infections among young women of reproductive age, much higher as compared to their male counterparts. Over the years, the situation has led to a surge of research in the field, in pursuit of understanding factors that contribute to increased vulnerability of individuals in that demographic group. Social-cultural factors specifically peoples' norms, values, beliefs and practices have been cited as key factors exacerbating young women's susceptibility, unique to most African countries, South Africa included. Social-cultural values play a key role in the socialisation process dictating what is deemed acceptable and unacceptable in the parameters of sexual values, beliefs and conduct. It in turn impacts young women's perceptions on sexuality and sexual behaviours.

In the case of South Africa, some dominant cultural values have been cited to be detrimental to women, mostly gendered. Largely, female sexuality has been defined solely from a perspective of male sexuality, perpetrating the notion, that not only is it inferior, but its mere existence depends on the other. Research indicates that has translated to young women who perceive themselves as second class and passive participants in sexual relationships and encounters. That has translated to inability for young women to exert control over decisions pertaining to their bodies, placing them at risk of infections. Nevertheless, culture is not static as it continuously evolves as societies change. Literature in South Africa documents how the culture terrain in contemporary South Africa has been infiltrated with other notions of female sexuality, some contrary to traditional notions. It has been highlighted, among others newer notions of female sexuality are more likely to be reflected in spaces that advance the empowerment and liberation of all especially women for instance in university spaces (Ngubane, 2016).

The aim of this study was to investigate how female students at the University of KwaZulu-Natal, Howard College campus, especially those of Zulu origin understand, define and perceive female sexuality within the context of the University of KwaZulu-Natal. It further examined if and how such perceptions impact sexual behaviour and HIV and AIDS prevention choices. In pursuit of that, the study mobilised two theories i.e. culture centred approach and empowerment theory to form the theoretical framework.

The culture centred approach was well suited to the study as it highlights the significant role of one's context in shaping an individual's values, beliefs, perceptions and behaviour henceforth one's whole life. This assertion was mobilised in informing and guiding the paper's first objective. CCA further argues that meaning making processes and outputs have an impact on an individual livelihood, either acting as enablers or limitation to well-being. This assumption provided insights on addressing objective number two of the study, interrogating the influence of perceptions of female sexuality on sexual behaviour. In cases of societal systems and structures, playing the role of oppressive agents, CCA highlights dialogue and participation as key strategies to facilitate agency. The study mobilised dialogue and participation as one of its key approaches in data collection procedures mainly using a bodymapping exercise.

Empowerment theory details processes, tools, knowledge and skills fundamental for oppressed and marginalised groups of people to attain control and mastery over their lives. It also offers psychological and behavioural traits that characterise either empowered or

underpowered individuals and groups. Empowerment theory as such provides a theoretical lens to measure and assess the extent an individual or group have control over their livelihood. In this study, empowerment theory was mobilised to assess and make suggestions on whether the study participants exhibited control and power pertaining to sexual behaviour and more importantly HIV and AIDS prevention choices. Empowerment theory further offers strategies for instance participation to aid in the empowerment process. Following that insight, this study employed bodymapping exercise together with individual semi-structured in-depth interviews as tools to aid in data collection, later analysed through thematic data analysis

Key concluding recommendations from the study

Involve all facets of society to promote empowering notions of female sexuality

The findings of this study established multiple spaces as key contributors to female students at the University of KwaZulu-Natal perceptions on female sexuality. Predominantly the community comprising family, church, community members, culture and the University of KwaZulu-Natal comprising peers, seminars, books were cited as major influences. This study observed that the young women in the study were consciously and sub-consciously engaging and negotiating with notions of female sexuality in both spaces, forming their own perceptions and understandings of female sexuality ultimately impacting sexual behaviour and HIV and AIDS prevention choices. Overall, the young women exhibited perceptions of female sexuality in both positive and negative terms, though the majority were slanted on the positive end of the spectrum.

This finding highlights the need for a holistic approach in promoting positive discourses on female sexuality as one way of mitigating young women's increased vulnerability to HIV and AIDS. Multiple target as well as specific group interventions should be employed in communities as well as institutions like schools, universities and even workspaces to ensure all people become aware of the importance of recognising and associating agency and freedom as part and parcel of female sexuality. Literature and this paper continue to highlight how negative connotations of female sexuality are detrimental to young women and their well-being. It is therefore imperative to ensure all spaces where young women are socialised and exposed to become spaces that encourage and accommodate positive female sexuality if young women are to be empowered to be in control of female sexuality and make informed decisions in relation to HIV and AIDS prevention.

The need to contextually revisit cultural values on female sexuality so young women are central subjects

In examining key influences on perceptions of female sexuality, despite the study participants being at UKZN, this study observed the community and traditional cultural values there in as significant elements in young women's life crucial to their identity and perceptions. The majority of the participants expressed pride in being Zulu hence felt compelled to participate in cultural norms, values and practices in line with female sexuality. Some cultural values, norms and practices in Zulu culture, in line with female sexuality, were cited as disempowering to young women impacting autonomy in relationships. Overall, the participants expressed not having issues with cultural values per se but the presentation, framing and motivations behind some of the cultural values. Young women questioned why some cultural values pertaining to female sexuality for instance preserving virginity portray men as the subject and centre of the narrative while women are often on the receiving end.

Participants expressed dilemma in embracing their Zulu identity whilst at the same time preserving their well-being.

This finding points at the need for the modification or reframing of some cultural norms, values and practices to ensure that young women are active voices therein. Based on this study, cultural values, norms and values are integral to society and a part and parcel of every group of people. Therefore, this paper argues the need to engage communities and cultural entities not with the aim of erasing cultural values but to highlight the negative connotations embedded in some cultural values, norms and practices, in hopes of modifications, in ways not detrimental to young women's health and well-being.

Male involvement for positive female sexuality and sexual behaviours

In examining the impact of perceptions of female sexuality on young women's sexual behaviour, it was observed that young women's ability to successfully translate perceptions of female sexuality to sexual behaviours were largely impacted by their partner's perceptions of female sexuality as well as behaviours. As reference, one participant indicated perceiving female sexuality and self as empowered to contribute and enforce decisions in relationships. Nevertheless, it was later noted that the young woman was not entirely able to translate her perceptions into actions, as she later indicated acting against her will as a result of pressure from her partner. This finding echoes on the need to engage young men to embrace and promote positive female sexuality in order to facilitate positive sexual behaviours among young women. It is important for young men to perceive and understand that young women are equals and partners and that female sexuality does not depend on male sexuality for its existence.

Narratives to normalise consistent condom use and regular HIV testing

In examining the impact of perceptions of female sexuality on HIV and AIDS prevention choices and behaviours, the study highlighted complacency as a key factor inhibiting young women from protecting themselves from HIV and AIDS, especially in stable relationships. It was observed that condom usage and HIV testing was predominantly associated with casual or initial stages of a relationship. Participants did not perceive themselves at high risk of HIV and AIDS as relationships progressed and developed, having developed trust and a sense of belonging with their partners. The study suggests the need for the implementation of more health communication campaigns and programs that highlight and normalise narratives on the significant role of consistency in condom usage as well as regular HIV testing as part and parcels of long term and stable relationships.

Areas for further research

The study recommends the urgency for more contextual based research among young women in various contexts in relation to perceptions on female sexuality and sexual behaviour. Though key similarities were noticed in the findings of this study, variations in perceptions and behaviours existed from one participant to another as participants as a result of participants coming from different homes and leading different lifestyles at the university. Henceforth, it is imperative for more similar studies to be replicated for comprehensive contextual understanding on female sexuality and sexual behaviour in contemporary South Africa.

Secondly, in line with further research on young women, female sexuality and HIV and AIDS, the study highly recommends the use of alternative innovative and participatory

methodologies. As elaborated, this study used bodymapping, an art-based methodology. Bodymapping was effective in deriving in-depth data through its use of other means of expressive styles accommodating participants unable to verbally articulate their views. Such is crucial for sensitive topics like sexuality. Bodymapping also aids in self-reflective processes enabling an individual dig deeper within self, becoming aware of one's motivations, decision making processes, behaviours and how that impacts one's life. Bearing in mind the complexity of sexuality, residing in an individual yet heavily impacted by immediate people and the society at large, bodymapping is not simply a data collection tool but can be a means to self-awareness aiding in the empowerment process.

Lastly, the study suggests that research be conducted among young men, specifically on their perceptions of female sexuality in contemporary South Africa and how that impact their sexual conduct and interactions with young women. The study highlighted the significant role young men play in young women's decision making and sexual behaviours in relationships. It is therefore imperative to assess how they perceive female sexuality, to derive insights on whether there are changes or not and how that in turn impact their behaviours in heterosexual relationships.

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Appendix 1: Bodymapping Workshop guide

Hello participant, thank you once again for agreeing to participate in this study. No amount of words can express the weight of my gratitude and appreciation for your support, willingness and time. May God bless you for facilitating the completion of my master's study.

This bodymapping exercise forms the first phase of the data collection exercise. This guide comprises a brief definition of bodymapping, definitions of key terms as per the study and step by step instructions to enable you complete the exercise. Note that I am available on whats app in case you have any questions or need clarification.

What is Bodymapping-Bodymapping is an art based research methodology used to collect data in participatory action research. Bodymapping involves the creation of bodymaps i.e. diagrams which represent part or all of the body, drawn on paper or on the ground - to examine participant's knowledge, perceptions and interpretation of various topics, issues or phenomenon.

Study topic: University of KwaZulu-Natal female students' perception of female sexuality and influence on sexual behaviour and HIV and AIDS prevention.

Study Key terms defined:

Female Sexuality: qualities, attributes and characteristics of a woman in the parameters of sexual conduct, behaviour, encounters and relationships, for the purpose of this study with members of the opposite sex.

Gender: a process of creating distinguishable social statuses for the assignment of rights and responsibilities based on one's sex.

Sex: biological status of being male or female.

Culture: meanings, values, ways of life shared by particular nations, groups, classes.

What you will need for the exercise: An A4 paper, pen, pencil. Optional: Colouring pencils if you have any (It's fine if you do not have any colouring pencils).

Introduction

On an A4 paper draw a diagram resembling a map of a human body i.e. your body. (This should be a medium sized drawing, to enable you have enough space outside, to write or draw your responses. Also note that the drawing does not have to be perfect or fancy. I will forward examples of bodymaps to your WhatsApp to give you an idea of a body map). Choose a colour to represent you and paint around the outline of your bodies (optional if you have colour pencils). Give your map a face with ears, eyes, mouth etc.

On top of the paper, write your name, where and when you were born. Add any family details, details of your school, community etc

1) Part one

a) Write down some of culturally endorsed gender related challenges that women face in sexual relationships/romantic relationships in your community? (Write Outside the body,

preferably the upper area, just below your details. Preferably use a pen for writing even drawing so it can be visible when captured using a camera).

b) Write down some of culturally endorsed gender related challenges that directly affect you in sexual/ romantic relationships or through your immediate family or friends? (Write outside the body, preferably the upper part, just below your details).

2) Part Two: What do I see?

a) How do you see and define female sexuality? (Draw or write your definitions. This could appear anywhere outside the face, near the eyes. Use arrows if possible to show it's linked to eyes)

b) What characteristics, traits or qualities, if any, do you associate with female sexuality?

c) Who or what (this can be the community, family, peers, church, university context etc) would you say influence your current views on female sexuality? (This could appear anywhere outside the face, near the eyes. Use arrows if possible to show it's linked to eyes).

3) Part Three: What do I hear?

a) What dominant notions have you heard from the community pertaining to female sexuality specifically in line with?

a) Discussion of sex by young women either with parents and partners

a) Position of women in relationships with members of the opposite sex

c) Sex and young women i.e. purpose, when and how?

b) What dominant notions have you heard from the university context i.e. peers, books, academic forums etc pertaining to female sexuality in line with:

a) Young women discussion of sex with parents, partners and peers

a) Position of women in relationships with members of the opposite sex

c) Sex and young women i.e. purpose, when and how?

This could appear outside your bodymap, anywhere below the ears on the bodymaps or anywhere on the neck side, if possible use arrows pointing to ears for easy reference.

Part four: What do I feel?

Moving to the outside of the middle section of your map, either write or draw images about:

a) How do you feel about dominant notions of female sexuality common in your community especially in line with whether they empower or de-power young women?

b) How do you feel about dominant notions of female sexuality common within the university context especially in regard to whether they empower or depower young women?

Part five: What do I understand?

Moving to the outside of the lower part of your body map, write or draw

a) What do you understand is your role/position in a relationship in regards to decision making?

b) Do you think you have the responsibility to negotiate for sexual terms and conditions in a relationship? Why so?

Part Six: What am I doing? (10 minutes, this can appear anywhere close to the outside of the leg section of your map. Please use arrows for easy reference)

a) Why do you / would you pursue romantic relationships? Are the relationships sexual or not?

b) Are you able/would you be able to negotiate for terms and conditions in a relationship i.e. say no to sexual pleasure if not interested or request for condom use ?

Part seven: What can I do next?

What do you feel you should do in order to take control of your sexuality as a female and protect yourself vulnerability to HIV/AIDS in your relationships? (Write close to the feet)

Draw or write ways in which you feel would help you in the future?

Part Eight: Colour in your body map (Optional)

Appendix 2: One on one semi-structured interviews guide

One on One semi structured interview guide

- 1) What qualities, traits or attributes, if any, do you consider as characteristics of a woman in romantic/sexual relationships with members of the opposite sex?
- 2) Personally, what do you consider as appropriate sexual behaviour for a woman?
- 3) Who do you think should take a leading role in a romantic/ sexual relationship? Why?
- 4) What or who would you say has influenced your views indicated in the questions above.
- 5) What are some of the four dominant qualities and behaviours of female sexuality dominant in your culture?
 - a) What does your culture say about when and why women should have sex?
 - b) Would you say you follow the norms and values associated with a good woman in your culture?
- 6) List at least four dominant ideas on qualities and attributes of a female in romantic /sexual relationship dominant within the university? How do you feel about them?
- 7) Do you think the university context has impacted your current views of female sexuality? If yes, how?
- 8) Have the ideas of female sexuality around the university affected your behaviour in romantic relationships? How? Has the effect been positive or negative?
- 9) are you or have you ever been in a relationship with a member of the opposite sex? If yes, what were/ are your reasons for pursuing romantic relationships?
 - a) Are or where the relationships sexual or not? And why is that so?
- 10) Do you think you are in a position to make, influence and enforce decisions in a romantic/ sexual relationship? Mention one scenario you have successfully done that? What would you do if you would ever face resistance?
- 11) Have you ever or do you think you can say no to sexual advances from your partner if you do not want or are not ready to engage in sexual intercourse? What would you do if your partner threatens to leave?
- 12) Have you ever or do you think you can request or negotiate with your partner for condom use? If yes, what if you do if your partner does not want to use condoms?
- 13) Have you ever or do you think you can request your partner to undergo HIV/AIDS testing? Why? What would you do if your partner refuses?
- 14) What do you think is your role as a woman when it comes to HIV and AIDS prevention for you or your partners?

15) So far, give practical examples on how you are and have been able to exercise that role?

Appendix 3: Study consent form

Date: 10 April to 17 April 2020

Greetings,

My name is Tamanda Chipu Masambuka (218084049), a master's student at the Centre of Culture, Communication, Media and Society (CCMS) at the University of KwaZulu-Natal.

You are being invited to consider participating in a study exploring University of KwaZulu-Natal female students' perceptions on female sexuality and impact on sexual behaviour specifically in line with HIV and AIDS prevention. The aim and purpose of this research is to understand female students' perceptions of ideal qualities and attributes characterizing young women in the parameters of sexual relations, conduct and encounters in heterosexual relationships within the context of the University of KwaZulu-Natal. Particular attention will be given in exploring the comparison or differences between ideologies of female sexuality within the university context to those presented in communities where students come from. Furthermore, the study will explore how female students navigate through the key ideologies in the formations of their on perceptions on female sexuality and how that in turn impact sexual behaviours in heterosexual relations and implications on HIV and AIDS prevention choices. Such knowledge is essential in contributing to the body of literature aimed at empowering young women to take charge of the sexual aspect of their lives as a way of protecting themselves from vulnerability to sexual oriented ills for instance HIV/AIDS.

The study is expected to enrol eight female students from Howard campus, University of KwaZulu-Natal. It will involve the following procedures; firstly participants will be recruited on voluntary basis. Thereafter participants will undergo an art based exercise which will involve the use of drawing, writing and any form of representation the participant is comfortable with to explore and express views and perception pertaining to female sexuality. As a result of the Corona pandemic, the exercise will be done individually in the comfort of participants' homes. In this case the researcher will email participants the art based exercise guideline containing detailed instructions in carrying out the exercise. The researcher will also be readily available online and on the phone to facilitate the exercise and respond to questions, clarifications or any queries during the exercise. Upon completion of the exercise, participants will be requested to take photos of their art based exercise product and forward it to the researcher.

The bodymapping exercise will be followed by a one on one discussion on any day/time of the participants' convenience. The one on one discussion will enable participants to unpack key issues from the art based exercise and also share insights and experiences on female sexuality. The one on one discussion will be conducted preferably on zoom. However phone calls, Skype calls or even whats app calls may be used if that is more ideal for the participant. Note that as participants you will not be forced to share personal stories or experiences you are not comfortable to share.

The duration of your participation if you choose to enrol and remain in the study is expected to be one hour for the art based exercise and less than 45 minutes for the one on one discussion. Note that participation is voluntary and you are free to withdraw from the study at any stage, for any reason. If you decide not to be in this research study there will be no negative consequences.

In case you agree to take part in the study, there will be no immediate and direct benefit to you, but your participation is likely to help me find out more on, if and how the University of Kwazulu-Natal context impact on female students 'perceptions on female sexuality and implications on sexual behaviour with a special focus on HIV and AIDS prevention. Henceforth, you will not be provided with any payment to take part in this research.

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee (approval number: HSSREC/00000483/2019).

In the event of any problems or concerns/questions you may contact the researcher at +27767345114 or email tamamasambuka@gmail.com or the UKZN Humanities & Social Sciences Research Ethics Committee, contact details as follows:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

Govan Mbeki Building

Private Bag X 54001

Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557- Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Consent to participate in research.

I have been informed about the study entitled University of KwaZulu-Natal female students' perception of female sexuality and influence on sexual behaviour and HIV and AIDS prevention to be conducted by Tamanda Masambuka (218084049).

I understand the purpose and procedures of the study i.e. firstly participants will be recruited on voluntary basis. Thereafter participants will undergo an art based exercise which will involve the use of drawing, writing and any form of representation to explore the topic of female sexuality. That will be followed by a one on one discussion to enable participants unpack key issues from the exercise and also share insights and experiences on female sexuality. Note that as participants you will not be forced to share personal stories or experiences you are not comfortable to share.

I have been given an opportunity to ask questions about the study and have had answers to my satisfaction.

I declare that my participation in this study is entirely voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to.

If I have any further questions/concerns or queries related to the study I understand that I may contact the researcher at 27767345114 or email tamamasambuka@gmail.com .

If I have any questions or concerns about my rights as a study participant, or if I am concerned about an aspect of the study or the researchers then I may contact:

HUMANITIES & SOCIAL SCIENCES RESEARCH ETHICS ADMINISTRATION

Research Office, Westville Campus

Govan Mbeki Building

Private Bag X 54001

Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557 - Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Additional consent, where applicable

I hereby provide consent to:

Audio-record my interview / focus group discussion YES / NO

Video-record my interview / focus group discussion YES / NO

Use of my photographs for research purposes YES / NO

Signature of Participant

Date

Signature of Witness

(Where applicable)

Date

Appendix 4: Ethical clearance letter



04 March 2020

Ms Tamanda Chipo Masambuka (218084049)
School of Applied Human Sciences
Howard College Campus

Dear Ms Masambuka,

Protocol reference number: HSSREC/0000483/2019

Project title: Modern and empowered: Exploring female students perception of sexuality and its influence on sexual behavior at the University of KwaZulu-Natal, Howard College campus

Degree : Masters

Approval Notification – Full Committee Reviewed Protocol

This letter serves to notify you that your response received on 24 February 2020 to our letter of 11 November 2019 in connection with the above, was reviewed by the Humanities and Social Sciences Research Ethics Committee (HSSREC) and the protocol has been granted **FULL APPROVAL**.

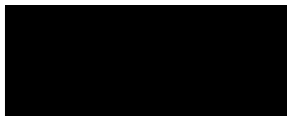
Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. **PLEASE NOTE:** Research data should be securely stored in the discipline/department for a period of 5 years.

This approval is valid for one year until 04 March 2021.

To ensure uninterrupted approval of this study beyond the approval expiry date, a progress report must be submitted to the Research Office on the appropriate form 2 - 3 months before the expiry date. A close-out report to be submitted when study is finished.

HSSREC is registered with the South African National Research Ethics Council (REC-040414-040).

Yours faithfully



Professor Urmilla Bob
University Dean of Research

/ms

Humanities & Social Sciences Research Ethics Committee
UKZN Research Ethics Office Westville Campus, Govan Mbeki Building
Postal Address: Private Bag X54001, Durban 4000
Website: <http://research.ukzn.ac.za/Research-Ethics/>

Founding Campuses:  Edgewood  Howard College  Medical School  Pietermaritzburg  Westville

INSPIRING GREATNESS

Appendix 5: Gatekeepers letter



14 August 2019

Tamanda Chipo Masambuka (SN 218084049)
School of Applied Human Sciences
College of Humanities
Howard College Campus
UKZN
Email: Govendere1@ukzn.ac.za

Dear Tamanda

RE: PERMISSION TO CONDUCT RESEARCH

Gatekeeper's permission is hereby granted for you to conduct research at the University of KwaZulu-Natal (UKZN), towards your postgraduate degree, provided Ethical clearance has been obtained. We note the title of your research project is:

"Modern and empowered: Exploring female students' perception of sexuality and its influence on sexual behavior at the University of KwaZulu-Natal, Howard College campus".

It is noted that you will be constituting your sample by handing out questionnaires and/or focus group with female students on the Howard College campus.

Please ensure that the following appears on your notice/questionnaire:

- Ethical clearance number;
- Research title and details of the research, the researcher and the supervisor;
- Consent form is attached to the notice/questionnaire and to be signed by user before he/she fills in questionnaire;
- gatekeepers approval by the Registrar.

You are not authorized to contact staff and students using 'Microsoft Outlook' address book. Identity numbers and email addresses of individuals are not a matter of public record and are protected according to Section 14 of the South African Constitution, as well as the Protection of Public Information Act. For the release of such information over to yourself for research purposes, the University of KwaZulu-Natal will need express consent from the relevant data subjects. Data collected must be treated with due confidentiality and anonymity.



ERIC NJABULO ZUMA
FOR: GOVERNANCE & ADMINISTRATION
OFFICE OF THE REGISTRAR
UNIVERSITY OF KWAZULU-NATAL
UNIVERSITY ROAD
CHILDERN HILLS, WESTVILLE, 3623

Office of the Registrar

Postal Address: Private Bag X34001, Durban, South Africa

Telephone: +27 (0) 31 260 8005/2205 Facsimile: +27 (0) 31 260 7524/2204 Email: registrar@ukzn.ac.za

Website: www.ukzn.ac.za



Founding Campuses: ■ Edgewood ■ Howard College ■ Medical School ■ Pietermaritzburg ■ Westville