

**Empowering secondary school learners to explore risk
perceptions and the role of gender among young people
in the context of HIV/AIDS**

By

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**Dissertation submitted in fulfillment of the requirements for the
degree**

Doctor of Education

In the School of Educational Studies

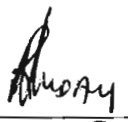
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2006

DECLARATION

I, ***Ronicka Mudaly***, declare that this thesis is my own work. It is being submitted for the degree of ***Doctor of Education*** at the ***University of KwaZulu Natal***, Durban, South Africa. It has not previously been submitted for examination at any other university.



Ronicka Mudaly

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Date



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Date

DEDICATION

This work is dedicated to the memory of:

- **My Mother-in-law, Mrs Mathevi Mudaly**
- **My Grandmother, Mrs Govindamah Naidoo**
- **My Aunt, Mrs Mooniamah Naidoo**

ACKNOWLEDGEMENTS

My journey through this research has been a blessed one, with unconditional support from many people who believed in my ability to persevere even in the face of many of life's daunting challenges.

I express my sincere gratitude to the following people:

- My Spiritual Masters, **Swami Sahajananda** and **Swami Sivananda**, for making all good things possible in my life.
- My promoter, **Professor Reshma Sookrajh**, whose strength of character, wisdom, patience and academic excellence have been an inspiration to me.
- My husband, **Dr Vimolan Mudaly**, whose encouragement and assistance in the production of this work was boundless.
- My beautiful daughters, **Shavani** and **Deveshnie**, who uncomplainingly managed their lives at school and in the home without much assistance from me.
- My parents, **Ronnie** and **Silvy Naidoo**, for believing in my potential for success.
- My father-in-law, **Loganatha Mudaly**, for his unreserved support in all aspects of my life.
- My sister, **Monica Govender**, who spent long hours editing this work and who has encouraged me to succeed.
- My brother, **Nunda Naidoo**, whose ability to influence other peoples' lives positively even through minimum interaction with them, has always amazed me.
- My sister, **Rita Mudaly**, who served as the mother of my children during my busy schedule.
- My domestic assistant, **Angel**, whose name epitomizes her role in my life.

ABSTRACT

The challenge that confronts South Africa's emerging democracy is that an increasing percentage of its population is being infected with HIV/AIDS daily. The socio-political impact of the disease has resulted in the development of a variety of macro-level interventions. Despite these initiatives, there has been no decline in the spread of the epidemic. The increasing prevalence of HIV infection among young South Africans in particular, has necessitated an exploration into their risky sexual behaviour. A closer study of the social fields of practice, where knowledge is not only produced, but is constantly contested, negotiated, reproduced and embedded, is suggested.

This study uses the principles of feminist theory to focus on gender roles and the related issues of power and risky behaviour. The central argument of this work is that the traditional construction of sexuality, which encourages sexual aggression and promiscuity among young men, alongside female sexual passivity and ignorance, are gendered factors which fuel the spread of HIV/AIDS. In order to examine young peoples' perceptions of the role of gender and risky behaviour, I engaged young people, who were already in the field, to conduct the research.

An exploration into the processes of enabling young people to conduct research, while linking the production of meaning to the possibility of human agency and transformative social action, formed an evolving methodology in this work. The research was designed to provide young people with a space for active engagement, participation, immersion and reflection, en route to becoming researchers.

Young researchers who conducted research in their youth communities served as deep insider researchers, who possessed an awareness of the slogan systems and semiotics which operated within the cultural norms of the community. The young researchers conducted the inquiry by using a multiplicity of methods, which included visual methodologies, individual interviews and questionnaires. They solicited most of the data from a wider group of 15 to 19 year old African and Indian learners. These learners, who were mainly from a lower socio-economic background, attended the co-educational school, in the province of KwaZulu Natal in South Africa.

The findings of this study reveal how young researchers become empowered by acquiring increased competence in doing research and achieving a greater understanding of the influences of gender and power on risky behaviour.

The research report offers methodological insights into the training and enablement of young people as researchers. It reveals how catalytic validity enables a transformation in the young researchers, who, having achieved a heightened understanding of the purpose of the research, actively participated in the research process. The study is significant because it reveals the gradual effacement of the main researcher from the research process, as a natural consequence of engaging young researchers to solicit, generate and interpret data. These new insights evolved as a result of taking the risk of allowing oneself, as a main researcher, to “get off track” and to enter uneven social spaces by doing research differently.

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CHAPTER ONE

An Introduction

Young People: An important resource in response to the HIV/AIDS pandemic

1.1. Introduction

During the past two decades, the HIV/AIDS pandemic has constituted a crisis of unprecedented proportions globally. Africa, in particular, has been especially affected with more than 23 million people estimated to be HIV positive (CODESRIA: 2003). While HIV/AIDS affects all sectors of the population, it has had a particularly powerful effect on young Africans. Approximately 50% of Africans are less than 18 years old. This makes Africa the most “youthful” continent in the world. Greater knowledge and understanding of the lives of young Africans is required in order to examine the course of the HIV/AIDS pandemic among them.

I have a personal interest in the lives of young people because I have worked with them in the capacity of a secondary school educator during the past two decades. The statistics presented in the preceding paragraph have implications for the African continent in general and for my country, South Africa, in particular. The rationale for my study revolves around the following three issues, namely:

- The link between education and the HIV/AIDS pandemic
- Risky behaviour and young people
- Enabling young people in HIV/AIDS research

I use literature to support my discussion of these three issues.

1.2. Education and the HIV/AIDS pandemic

Education is a crucial factor in preventing the spread of HIV/AIDS, given the large number of deaths that might still be prevented, the importance of effective education cannot be overstated.

Each year, however, there are increasing numbers of people who become newly infected with HIV. This reveals that education, over the past two decades, has been either unable to transmit the dangers of HIV, or that people who have learned about the disease are unable or unwilling to act to prevent themselves from becoming infected.

1.3. HIV/AIDS Research in Educational Settings

A glimpse into the current landscape into the nature of HIV/AIDS research in educational settings reveals three broad areas of investigation, namely, projective studies, knowledge, attitude and practice studies and impact studies (Baxen et al 2004). A brief discussion of each of these studies follows.

Projective studies

Many of these studies are commissioned by the World Bank and project the impact of HIV/AIDS to include:

- a decrease in the demand for education as orphans leave school.
- a decrease in the number of educators, administrative and management personnel who leave school / work due to HIV/AIDS-related conditions.

Knowledge, attitudes and practice studies

The most vulnerable group for HIV/AIDS (14 to 24 year olds) is targeted with "effective" prevention strategies. These studies are based on the following assumptions:

- A positive link exists between knowledge and behaviour.
- The individual, on the one hand, and social and cultural practices in which HIV/AIDS is embedded, on the other hand, are not linked
- Educators have the capacity, skill, training and personal motivation to articulate deeply private topics in a public space.
- Educators are deliverers of an uncontested body of knowledge about HIV/AIDS in a space (for example, the school) which is unproblematic.

- Sexual identity is separate from the larger issues of power and gender.

These assumptions have created gaps in HIV/AIDS intervention strategies and are worth exploring.

Impact studies

The primary focus of many studies is the impact of HIV/AIDS on the economic and health sectors of the society.

Cohen (2002), in Baxen et al (2004:12) describes several factors which prevent safe sex behaviour in the context of educational programmes. These include poverty, feelings of fatalism, disempowered women/ girls, images of masculinity which favour promiscuity, exchange of sex for material compensation, culturally defined control over women, and polygny¹.

Baxen et al (2004:21) conclude that most studies do not consider the discursive social and cultural fields of practice, where knowledge is not only produced, but is also contested, negotiated, reproduced and embedded. They go on to state that issues of power, gender and sexuality are deeply connected to the construction of safe sex negotiation within relationships, and are largely neglected. My study aims to address these issues, by focusing on the traditional constructions of gender with the resultant disempowerment it generates and its interrelatedness with risky sexual behaviour in an environment where HIV/AIDS is rampant. The incidence of HIV/AIDS is explored in order to shed light on why South Africa is seen to be at its epicenter.

Despite HIV/AIDS prevention campaigns, there has been a huge number of new infections, particularly in Sub-Saharan Africa. Policy makers and researchers have recommended the use of the school as an intervention site as one of the ways of addressing the HIV/AIDS pandemic, and is discussed below.

The increasing number of young people who engage in sexual intercourse during their school-going years is affirmed in the National Policy for HIV/AIDS for learners and educators document (1999). Coombe (2000:3) concurs with this policy document by

¹ Encouragement to have multiple sexual partners

stating that many adolescents are sexually active at the age of 12, but that few practice safe sex. Badcock-Walters (2002:95) adds to this view by asserting that one third of all HIV infected South Africans are infected during their school years. He goes on to say:

This confirms schools as a high risk environment but also suggests that it is the key strategic ground on which the battle to mitigate the impact will be won or lost.

Kirby et al (1994:118) conform with this view by asserting that virtually all young people attend school before initiating sexual intercourse, and that this makes schools well placed intervention sites. Potsonen et al (1999:480) and Kelly (in Baxen et al, 2004) agree that schools are among the best sites for educational efforts for adolescents about HIV/AIDS. The concern for sexually active young people being infected with HIV is highlighted in the Life Skills and HIV/Aids programme document (A. M Educational Consultants, 1999:104). In my study, I explore perceptions of risky sexual behaviour among young people.

1.3. Risky behaviour and young people

A study² of young South Africans was undertaken by the University of Witwatersrand Reproductive Health Unit to explore the spread of HIV/AIDS among them. {Young people, in my work, refers to those between 15 and 25 years old, unless otherwise stated}. Nearly one in every four South African women between 20 and 24 years old are testing positive for HIV, according to this study (Reproductive Health Unit, 2004). In the same study, it was found that one in 14 men in the same age category tested positive for HIV. A distinct gender disparity in infection and mortality statistics is evident. The study goes on to reveal that while 94% of the South African youth surveyed indicated that they knew how to avoid infection with HIV, they persisted in engaging in risky behaviour.

The gap between HIV/AIDS awareness on the one hand, and continuation of risky sexual behaviour by young people, on the other hand, has been highlighted in several

² A survey was conducted by the University of Witwatersrand's Reproductive Health Unit in partnership with the Medical Council of South Africa to explore the trends of HIV/AIDS in the South African context. A sample of 11 904 South African young people completed questionnaires and donated oral fluid for an HIV test.

studies (Reproductive Health Unit, 2004, Richter³ 1996) and warrants further investigation, which form a part of my study. Sixty two percent of the young people who tested positive for HIV had indicated that they believed they had not been at risk for contracting the virus. These statistics prompt many questions, some of which this research attempts to address. Is high risk sexual behaviour among young people borne of a sense of low personal risk for infection with HIV? How can young people protect themselves from HIV if they believe that they are not potentially at risk for infection? Are South African youth living in denial of HIV/AIDS and its impacts? Can the nihilistic attitude of South African youth be attributed to a crime-ridden society where violence is the order of the day and "life is cheap"?

The study conducted by the University of Witwatersrand Reproductive Health Unit (2004) revealed that although one in four women tested positive for HIV by the age of 22, 96% of 15 year olds tested negative for the virus. It is evident, therefore, that hope to stem the HIV/AIDS epidemic lies with young adolescents.

The link between risky sexual behaviour and HIV/AIDS has not been solely a South African concern; indeed, it has been studied by several researchers throughout the world. Rivers and Aggleton (1999), for example, assert that young people are particularly vulnerable to HIV infection. Baylies et al (2000) state that in addition to being the most vulnerable group, adolescents are also the least controllable group in terms of HIV/AIDS. Adler and Rosengard (1996:32-33) point out that sexual intercourse is being initiated at increasingly earlier ages, with multiple partners. This, they say, has resulted in an increase in teenage pregnancies and STDs. In addition, they shed light on the troubling shift from STD prevention which occurs when many adolescents move from coitus-dependent methods⁴, mainly male condom use, to coitus independent methods, mainly oral contraceptives (1996:51).

The problem is that HIV/AIDS remains an uncommon diagnosis among adolescents. Such surveillance data, according to Kirby et al (1994:117) and di Clemente (1996:17),

³ Richter conducted a survey among urban South African youth about reproductive health issues. Findings of the study revealed that the incidence of risky sexual behaviour among these youth was on the increase, and were presented to the South African Medical Research Council.

⁴ Methods which are used immediately prior to sexual intercourse, for example, male partner putting on a condom

is not a useful marker for assessing the transmission of HIV among adolescents. The long latency period between HIV infection and the manifestation of AIDS-related diseases leads to the conclusion that a large number of adolescents who are infected as teenagers only experience disease symptoms when they are in their 20's (Kirby et al 1994, diClemente 1996, Gutierrez et al 2000).

It is necessary to explore ways in which meaningful, effective research can be conducted among young people in order to obtain a deeper understanding of their sexual behaviour in the context of HIV/AIDS. I propose to do this by training and engaging young people to serve as researchers in this field.

1.4. Enabling young people in HIV/AIDS research

It is my contention that research about HIV/AIDS among young people needs to be age-appropriate and sensitive to the youth culture. This can be achieved if the researchers themselves are young people who are in synch with the youth culture. I contend that unequal power relations exist between adult researchers and young people who are being researched, and that this causes young people to provide inaccurate, biased responses.

According to Goodyear et al (2003), young people whose self knowledge makes research more age-appropriate should work with adults as equal partners in research projects. They assert that although young people assist in information gathering, youth participation in research remains a relatively undeveloped field of practice. AVERT⁵.org (2005) support the view that youth involvement in HIV/AIDS has, for too long, been confined to education about HIV transmission, answering questions and handing out condoms. This study aims to transcend these barriers by contributing towards this field of practice through creating a space in which young people can develop as researchers in the context of HIV/AIDS.

The concern about the spread of HIV/AIDS among young people is not purely a South African or even an African one; it is shared by developed countries, like the United States of America. In March 1996, the then United States President, Bill Clinton,

⁵ AVERT is an international AIDS charity. AVERT.org publishes information on HIV and AIDS.

requested a report⁶ on young Americans who are infected or affected by HIV/AIDS. The following recommendations from this report can be applied to any country, including South Africa.

- Young people must become a bigger part of the research process into HIV/AIDS research, prevention and care.
- Young people are an important resource in the Nation's response to the epidemic and government, medical and community leaders can learn a great deal by listening to their voices.
- Young people should be included in all HIV/AIDS prevention community planning councils to articulate their unique perspectives on the best methods of addressing their needs for prevention programmes.

In my study, I explore how young people can be trained to carry out research in HIV/AIDS education. The reasons for engaging young people in the process of research are:

- (i) To enhance the individual development of young people and to encourage their active involvement in decisions that impact on **their** lives.
- (ii) To build capacity in young people to serve as researchers generally and in the field of HIV/AIDS risk perceptions and the role of gender specifically.
- (iii) To provide young people with the space to articulate ways in which the HIV/AIDS pandemic can be stemmed among youth, that is, to provide space for grassroots activism in HIV/AIDS prevention education.
- (iv) To promote youth leadership and empowerment in HIV/AIDS research.
- (v) To shift the focus of youth issues in communities to include the development of opportunities rather than only on delinquency and disease prevention and treatment.

⁶ This report was requested by President Bill Clinton and written after numerous interviews were conducted with young people who are affected by HIV/AIDS, as well as with professionals who are engaged in HIV research, prevention and care.

It is with this in mind that I have formulated the research questions for this study.

1.5. Research questions and a brief outline of remaining chapters

My primary research question is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

The following two sub-questions were formulated to respond to the main research question:

- 1. To what extent do young people respond differently to peers than to adult researchers?*
- 2. What impact does participating in an HIV/AIDS-related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

I developed an organizing frame based on the themes of young people's perception of sexuality, their knowledge and skills about HIV/AIDS, their perceptions about gender and sexuality and their risky behaviour, to respond to the two sub-questions. The following research probes, which the co-researchers investigated, were developed around these themes:

- *What are young peoples' perceptions of sexuality?*
- *What are young peoples' views of their knowledge and skills about HIV/AIDS?*
- *How do young people relate to gender perceptions about sexuality?*
- *Why do young people engage in risky sexual behaviour?*

The co-researchers were volunteers who were engaged to carry out research activities, which were shaped by the research probes, among other young people. In keeping with the tenets of participatory action research, the co-researchers and I worked in a collaborative effort to investigate the construction of sexuality among young people within the context of HIV/AIDS. The co-researchers performed their enquiry by using instruments, methods and tools for analysis which were designed around the research probes.

A feminist lens is used to examine the discourse about power and gender and how these two issues are linked to risky sexual behaviour in chapter two. Chapter two is entitled

Extending the discourse: interconnectedness between power, gender and risk. The first part of this chapter, part A, includes statistical and descriptive information about HIV/AIDS in South Africa. The discussion then focuses on the prevalence of the disease among adolescents in particular. The developmental period of adolescence as well as its association with risky behaviour is explored. I then embark on an indepth review of literature which reveals the relationship between power, gender and risk in the context of HIV/AIDS. Part A ends with exploring the link between sexuality education and HIV/AIDS. The second part of chapter two, part B, includes a discussion on the earlier theories of HIV/AIDS prevention, namely, the Theory of Reasoned Action, the Health Belief Model, the Social Representations Theory and the Information, Motivation and Behavioural Skills Model. After a critical analysis of these theories, I discuss the more recent theories which have been proposed, namely, the Empowerment Theory and Feminist Theory. The chapter ends with an argument for HIV/AIDS education to be embedded primarily in the feminist theoretical framework.

I call chapter three *Enabling Young Researchers: Ignition, Co-drivers, The Checkered Flag and Beyond*. This chapter symbolically uses events on a motor car racing track to outline the ways in which feminist research methodology as well as participatory action research have been used to train young people to serve as co-researchers in my study. The co-researchers determined the sites for data collection and they chose the candidates for the interviews. They also determined the nature of data to be generated, to some extent, and these activities formed the “ignition” process in my work. The collection and generation of data was done exclusively by the co-researchers (co-drivers). The checkered flag and beyond is symbolic of the return of the co-researchers from the field to reflect on the research process and to analyse some of the data. The attempt to reduce power differentials between the researcher and he researched, the mutual creation of data between the research participants and myself from which a collaborative partnership was born and the reflexive critique which was exercised by the participants in this work, are central to this chapter.

Chapter four is called *The Journey: From learners to co-researchers*, because it is characterized by the insertion of methodological insights as well as the enablement of the co-researchers as a consequence of methodological issues and the process of data

collection. The learning outcomes of the three main research activities which involved the co-researchers, namely, the use of visual methodology, the administration of questionnaires and conducting interviews, are detailed. A detailed reflection on the training process of the co-researchers is included.

In chapter of findings of this study, chapter five, I use *power* as a tool for analysing young peoples' perceptions about gender and risky sexual behaviour. This chapter incorporates an intersecting discussion of qualitative and quantitative analysis of the questionnaires and the interview transcripts. It is enriched by journal entries which signal increasing enablement of co-researchers.

Enabling young people through photovoice: "I did not only take the shots, I called the shots" is the title of chapter six, which details the use of photovoice⁷ by the co-researchers in the fight against HIV/AIDS. It reflects ways in which visual images can be used to impart information about socioculturally significant issues. The chapter ends by my reflection on how the co-researchers' heightened awareness of the social construction of sexuality paved the way for their greater maturity and a sense of proactive purpose in the struggle against HIV/AIDS.

The final chapter (chapter 7) is entitled *Young People: On Becoming Researchers in the field of HIV/AIDS*. It details the enablement of the co-researchers in the study. The chapter focuses on methodological insights which resulted from working with young researchers. In addition, it sheds light on the almost inevitable consequence of the effacement⁸ of the main researcher (myself) from the study. The chapter offers an intersecting discussion of contextual and theoretical insights and ends with a guide for engaging young people in research.

⁷ Photovoice refers to the creative process of using photography to enable researchers to reflect on and express their ideas about an issue. In my study, the co-researchers explored the concept of sexuality using photovoice. They generated five themes to express their understanding of sexuality in their context.

⁸ A concept borrowed from M Gardiner, national co-ordinator of a Community Education Forum Project (CEPD). The project essentially sets up spaces to construct a forum (from the community) which gets enabled to work with schools in the community according to their own agenda. The main researchers feel a sense of effacement as the community education forum evolves its "own" research agenda.

There are seven appendices which are included in this work. The first, which is appendix A, comprises consent forms to all research participants, fulfills part of the ethical requirement of informed consent. A historical overview of the research site, including socio-political perspectives on the area which is regarded as “an island surrounded by a sea of industry”, follows in appendix B.

I insert a sample copy of the questionnaire in appendix C. Appendix D includes details of statistical analysis of the questionnaires. A part of this data is not directly inserted into the text, but is converted to graphical representations in chapter five. I choose visual representations to make their interpretation easier, and to provide what I consider to be a clearer, more textured presentation. I use thick data selectively in order to generate thick discussion, which is based on a careful selection of the statistical information. I exclude the presentation of data in the text which do not offer new insights into risky sexual behaviour among young people. I select data which, in the views of the co-researchers and I, represent new and different descriptions of young people in the context of HIV/AIDS. On a lighter note, my decision to include all the statistical analysis in appendix D derives from Schratz and Walker’s (2003:126) translation of Umberto Eco’s sentiment that *Writing a piece of research means having fun, and doing the work is like slaughtering a pig, as the Italians say: “you don’t throw anything away!”*

The interview schedule represents an instrument which was a collaborate effort between the co-researchers and I, and forms appendix E. One transcribed interview per co-researcher is presented in appendix F. These transcripts are useful because, in addition to presenting raw data, they include a summary of biographical details of the interview participants.

The last appendix, appendix G, details a selection of the journal entries of the co-researchers. It provides an intimate account of the lives of some of the co-researchers and captures their thoughts as the project progressed.

The following chapter, chapter two, contains a critical review of literature, with emphasis on issues of gender and risk among young people in the context of HIV/AIDS.

In addition, the traditional and modern theories for HIV/AIDS prevention are analysed. The choice of the feminist theory to plan this study is justified.

CHAPTER TWO

Literature Review

Extending the discourse: interconnectedness between power, gender and risk

2.1. Introduction

In this literature review, I shall use a feminist lens to extend the discourse about constructions of gender roles, issues of power and gender and their connectedness to unsafe (risky) sex, poverty and its link to sex for material gain. The chapter is constructed in two parts. In Part A, I begin by examining statistical data to describe the incidence of HIV/AIDS globally, in Southern Africa and in South Africa. I then go on to explore the political background against which the disease has spread among South Africans in general and adolescents in particular. The gendered nature of HIV/AIDS and its influence on risky sexual behaviour is discussed. Part A concludes with a description of sexuality education in South African schools. Part B includes an exploration into psychological, social and emancipatory theories and models which are applicable to AIDS intervention programmes. The ways in which my study becomes embedded in the feminist theoretical framework, together with the selective application of psychological theories, are detailed.

PART A

2.2. HIV/AIDS in South Africa: A Country in Crisis

The urgency to address the spread of HIV/AIDS necessitates a glimpse into the statistical data of its incidence in Southern Africa in general and South Africa in particular. The current and projected statistics are used to provide an insight into the consequences of the HIV/AIDS pandemic.

van Graan (2003) asserts that the struggle against apartheid in South Africa was a struggle for “human dignity, for life, for democracy, for non-racialism, for gender equality ...” and he goes on to say that the same struggle is still with us in the form of this country’s battle against HIV/AIDS.

Coombe (2000), who worked on a projection study for the course of HIV/AIDS in South Africa, provided the following summary of her findings:

Table 2.1: The Consequences of the HIV/AIDS Pandemic in South Africa (SA)

Year	1999	2005	2010
Percentage of SA workforce HIV positive	11.5%	20%	22.5%
Percentage of SA workforce AIDS sick	0.4%	1.65%	2.7%
New AIDS cases per annum	145 256	466 365	625 180
Number of AIDS orphans	153 000	1 000 000	2 000 000
Life expectancy of SA females (years)	54	43	37
Life expectancy of SA males (years)	50	43	38

This information reveals that the HIV/AIDS pandemic will cause a decline in all sectors of South African society. In this work, Coombe asserts that economic growth will become slower due to a decrease in the number of skilled workers; job absenteeism will increase because of illness or illness of family members and poverty will deepen. A greater number of children will be orphaned (as is reflected in Table 2.1) and will be more likely to engage in criminal activities as a survival strategy. In short, South Africa will experience a reversal of the gains which were made during the last decade.

More recent data reveals the number of people worldwide living with HIV/AIDS in 2004 was estimated to be 35.9 million. A glimpse into the spread of the HIV/AIDS pandemic in sub-Saharan African countries is necessary, not to generate a comprehensive analysis, but instead, to compare the statistical information about South Africa to other African countries.

Table 2.2 Summary of the extent and effect of HIV/AIDS in Sub-Saharan countries at the end of 2003:

Country	Adults	Adult Rate %	Women	Children	AIDS Deaths Among Adults & Children	Orphans due to AIDS
Angola	220,000	3.9	130,000	23,000	21,000	110,000
Benin	62,000	1.9	35,000	5,700	5,800	34,000
Botswana	330,000	37.3	190,000	25,000	33,000	120,000
Burkina Faso	270,000	4.2	150,000	31,000	29,000	260,000
Burundi	220,000	6.0	130,000	27,000	25,000	200,000
Cameroon	520,000	6.9	290,000	43,000	49,000	240,000
Central African Republic	240,000	13.5	130,000	21,000	23,000	110,000
Chad	180,000	4.8	100,000	18,000	18,000	96,000
Congo	80,000	4.9	45,000	10,000	9,700	97,000
Cote d'Ivoire	530,000	7.0	300,000	40,000	47,000	310,000
Dem. Republic of Congo	1,000,000	4.2	570,000	110,000	100,000	770,000
Djibouti	8,400	2.9	4,700	680	690	5,000
Eritrea	55,000	2.7	31,000	5,600	6,300	39,000
Ethiopia	1,400,000	4.4	770,000	120,000	120,000	720,000
Gabon	45,000	8.1	26,000	2,500	3,000	14,000
Gambia	6,300	1.2	3,600	500	600	2,000
Ghana	320,000	3.1	180,000	24,000	30,000	170,000
Guinea	130,000	3.2	72,000	9,200	9,000	35,000
Kenya	1,100,000	6.7	720,000	100,000	150,000	650,000
Lesotho	300,000	28.9	170,000	22,000	29,000	100,000
Liberia	96,000	5.9	54,000	8,000	7,200	36,000
Madagascar	130,000	1.7	76,000	8,600	7,500	30,000
Malawi	810,000	14.2	460,000	83,000	84,000	500,000
Mali	120,000	1.9	71,000	13,000	12,000	75,000
Mauritania	8,900	0.6	5,100		<500	2,000
Mozambique	1,200,000	12.2	670,000	99,000	110,000	470,000
Namibia	200,000	21.3	110,000	15,000	16,000	57,000
Niger	64,000	1.2	36,000	5,900	4,800	24,000
Nigeria	3,300,000	5.4	1,900,000	290,000	310,000	1,800,000
Rwanda	230,000	5.1	130,000	22,000	22,000	160,000
Senegal	4,000	0.8	23,000	3,100	3,500	17,000
South Africa	5,100,000	21.5	2,900,000	230,000	370,000	1,100,000
Swaziland	200,000	38.8	110,000	16,000	17,000	65,000
Togo	96,000	4.1	54,000	9,300	10,000	54,000
Uganda	450,000	4.1	270,000	84,000	78,000	940,000
United Rep. Of Tanzania	1,500,000	8.8	840,000	140,000	160,000	980,000
Zambia	830,000	16.5	470,000	85,000	89,000	630,000
Zimbabwe	1,600,000	24.6	930,000	120,000	170,000	980,000
Total Sub-Saharan Africa	23,100,000	7.5	13,100,000	1,900,000	2.2 million	12,100,000

Adapted from UNAIDS : 'Report on the Global HIV/AIDS Epidemic, July 2004'

The incidence of HIV/AIDS in sub-Saharan countries in that period accounted for 23.1 million adults (UNAIDS 2004). South Africa has a disproportionately large number of people who are infected with HIV. This makes the HIV/AIDS prevention campaign a national priority. The findings of Coombe's (2000) study, represented in table 2.1,

projected one million orphans by the end of 2005. Actual data obtained by UNAIDS (table 2.2) reveals that that number was surpassed in 2003.

According to Coombe (2000), the South African government and its partners have "taken action" to combat the HIV/AIDS pandemic in the following ways:

- (i) The Department of Health has implemented the HIV/AIDS/ STD strategic plan for South Africa for the period 2000 to 2005. This is monitored by the HIV/AIDS and STD Directorate of the Department of Health
- (ii) Health information on HIV/AIDS is systematically collected and recorded. The Metropolitan Life Doyle model has been used to predict the course of the pandemic.

It can be deduced from Coombe's description of government intervention that statistical data will be available to monitor the course of the HIV/AIDS pandemic. However, the literature abounds with views which articulate the discontent over claims that the South African government is not doing enough to contain the HIV/AIDS pandemic, as presented by Ewing (2002), Dorrington et al (2002) and Badcock-Walters (2002).

Dorrington et al (2002:18-19) assert that poverty, unemployment and overcrowding are factors which drive the epidemic. These authors allude only to the physical circumstances of HIV/AIDS people. Issues of infidelity, breach of trust, adultery and a lack of faithfulness between partners, have been ignored. They go on to blame the previous National Party government for mismanaging the epidemic. They insinuate that the previous government may have conspired to spread HIV/AIDS among black people. Eleven years have sped past since the ushering in of the new democratic order in South Africa (1994 – 2005). This period, in my opinion, has been marked by a shamelessly stubborn reluctance on the part of government to deal with the epidemic in South Africa.

According to Dorrington et al (2002:49) the government is unwilling to introduce MTCT (Mother To Child Transmission) prevention medication. If the government allows this medication to be administered to babies born from HIV positive mothers, this would swell the orphan population by 200 000 by the year 2015.

Anti-fungal HIV/AIDS medicines which were donated by Pfizer was not distributed to clinics and hospitals due to administrative bungling, according to Ewing (2002:89). In the meantime, poor households have had to pay for medicines, which should have been supplied to them free of charge.

Ewing (2002:90) explains that recently, the government announced that it ...

...has placed a moratorium on setting up new homes for (AIDS orphans) children and is concentrating on foster care and ...is concentrating on empowering the community to care for AIDS orphans.

Ewing (2002:90-91) emphasises that co-ordination of the efforts alluded to in the above excerpts at national, provincial and grassroots levels are practically non-existent. This has resulted in non-delivery of assistance to these orphans.

Badcock-Walters (2002:97-98) contends that the government has abdicated its responsibility to HIV/AIDS people by looking towards members of the community to care for HIV/AIDS orphans. The absence of a formal social security system for HIV/AIDS affected and infected households is troubling. Ewing (2002:85) adds that bureaucratic barriers make those grants, which are available, difficult to access. She asserts that many government employees' attitudes (those of nurses, officials who issue birth certificates and blue clinic cards, for example), are best described as devoid of compassion and friendliness. This sends a clear signal to HIV/AIDS orphans and their caregivers that they are burdensome to society.

2.3. Dissident views on HIV/AIDS

In addition to these difficulties, President Mbeki's dissident stance that HIV/AIDS is primarily a disease of poverty, which is associated with a dysfunctional immune system due to poor nutrition, has added confusion to the South African society, where, according to Greathead (2002:90), one person is infected with HIV per minute. The President's views caused an outcry among local and international scientists. According to Strausbaugh (2002), President Mbeki appointed an AIDS Advisory panel to investigate different views

on the causes of HIV/AIDS. The panel comprised two distinctly different groups. One group said that HIV/AIDS is contagious, sexually transmitted, caused by HIV and not by poor economic status and that (antiretroviral) drugs are saving people from an early death. The opposing (dissident) group argued that HIV/AIDS is not contagious, is not sexually transmitted, is caused by low economic status which is linked to poor nutrition, and not by HIV, and that drugs (antiretrovirals) are killing people. Strausbaugh asserts that this resulted in a "schizophrenic report". The confusion which these opposing views created among South Africans is made clear by the following cartoon, which appeared in *The Sunday Times* (8 May 2005).

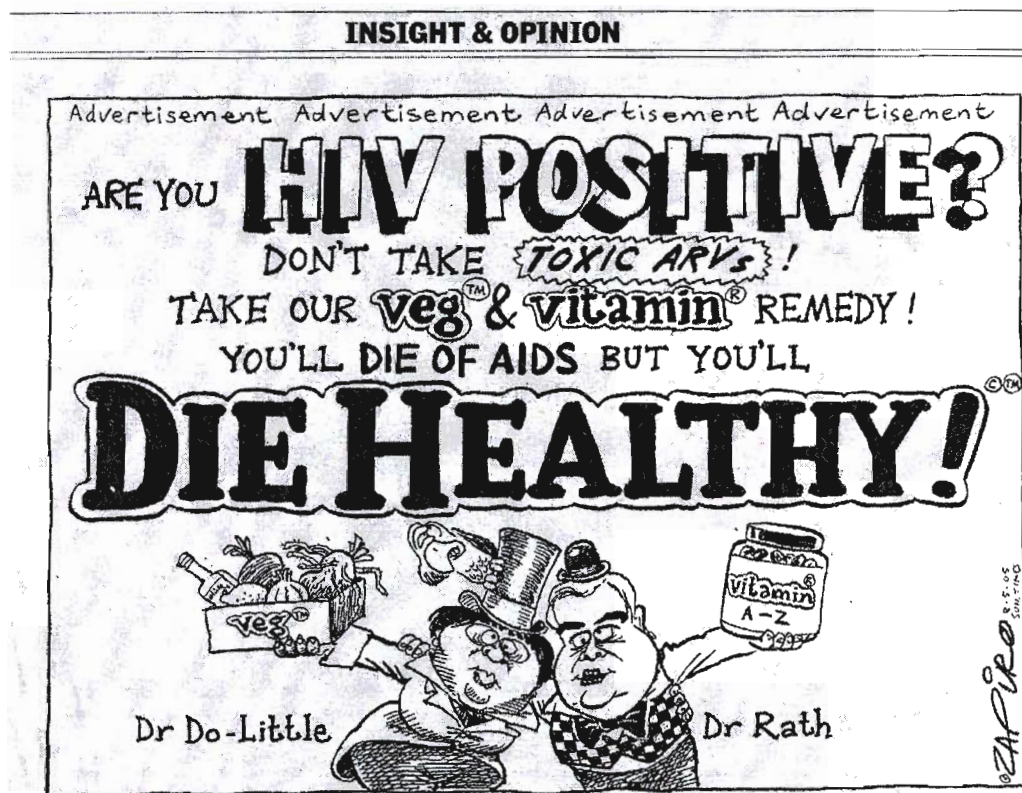


Figure 2.1. Cartoon depicting mixed messages to South Africans about managing HIV infection. (Cartoonist: Zapiro)

The woman (on the left) in the cartoon represents the Minister of Health, Dr Manto Tshabala-Msimang, who the cartoonist names Dr Do-Little. This is symbolic of the

widespread belief among South Africans that the Minister has been ineffective in her delivery of services in the context of HIV/AIDS. On the right is a man who Zapiro associates with scientists (with dissident views) who claim that HIV/AIDS should not be managed by using anti-retroviral drugs. They suggest that the key to responding to the disease is good nutrition.

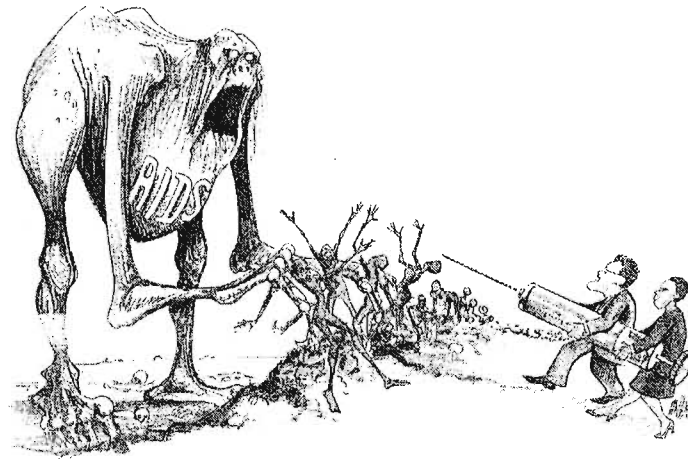
Certain groups of scientists joined world leaders in their suggestion to President Mbeki to oppose the views of “dissident” scientists. President Mbeki responded in a letter dated 03 April 2000. In the letter, the President questioned the established authority (western scientific world) on their views about HIV/AIDS. He called the prohibition of dissent against the established scientific view that HIV causes AIDS “intellectual intimidation and terrorism” which argues that the only freedom we have is to agree with what they (western scientists) decree to be established scientific truths. It appears to me that while the fire of HIV/AIDS rages and burns South Africa, intellectuals argue about what started it.

What emerges from the preceding views is a lack of commitment by the South African government to deal effectively with the HIV/AIDS pandemic. The World Bank report (1997:20) clearly states the importance of commitment by the government and its willingness to invest in early prevention strategies as central to containing the pandemic. Poor management of orphans will result in long term financial costs, with an increase in juvenile crime and reduced literacy. Without significant, effective interventions and changes in sexual behaviour, Dorrington et al (2002:48) state that 15% of all children who are under the age of 15, will be orphaned by the year 2015: **this country will inherit an orphan generation** (my emphasis).

The seriousness of the HIV/AIDS pandemic in South Africa, on the one hand, and the government's continued responses of denial, on the other hand, can be summed up by the following excerpt (*Sunday Times*, 27 July 2003)

WARNED: *South Africa, by the World Bank, that HIV/Aids could devastate its economy, slashing GDP by 50% over three generations. The national Treasury dismissed the bank's report.*

The fears about HIV/AIDS which pervade South African society and the imagined strategies to control the pandemic are represented by the following cartoon which appeared in the *Sunday Times*, a national newspaper on 13 March 2005.



Uniting against Aids

Figure 2.2 Cartoon depicting the South African government's intention to make 2005 the year which sees the turning point in service delivery in respect of HIV/AIDS

(Cartoonist: Allan)

The ineffective strategies which have been employed by political parties have affected all South Africans, including young people, whose risky sexual behaviour will be explored in my study.

2.4. HIV/AIDS and Southern African Adolescents

In her paper, Mitchell (2000) states:

For no generation of young people more than this current one has the fact of sexuality - particularly the risk factors as a result of the HIV/AIDS epidemic - been under scrutiny. ... Young people between 10 and 24 years of age account for more than half of new infections after infancy worldwide. The largest percentages of these new infections are in the SADC⁹ region. And while young women between the ages of 15 - 19 within this geographic region are the hardest hit, this is very clearly an issue that is of concern to young men and young women.... There has never been a more serious challenge to ideas of gender relations, notions of masculinities, our understanding of sexuality and sexual practices, the role of the youth in social change.

The spread of HIV/AIDS among young people in general, and women in particular, has been alarming. In an effort to understand reasons which underpin the rapid spread of HIV/AIDS, alluded to by Mitchell, I explore the perceptions about the period of adolescence, by examining the following views:

- Adolescence is a period of high risk and low responsibility.
- Adolescents' perception of partner risk.
- The cognitive avoidance theory applied to adolescents.

Adolescence: High risk; low responsibility

Adler et al (1996) perceive the stage of adolescence as ...

... a discontinuous period in development, a time when young people are influenced by raging hormones to the point of being impulsive, rebellious and continually being occupied by sexual thoughts.

A common construction of adolescence is that it is a period of high risk and low responsibility (Rivers et al 1999, Le-Clerc-Madlala 2002). Despite the alarming statistical data and the warnings about the rapid rate of infection with HIV among young people (Mitchell 2000, diClemente 1996), they continue to engage in risky behaviour. One reason for engaging in risky sexual behaviour, cited by Morris et al (1996:57), is the feeling of invulnerability to HIV/AIDS among adolescents, which is based on the following:

⁹ Southern African Developing Countries

- Adolescents' experience with previously risky behaviour (for example, unprotected sex) which has had no negative outcomes (for example, acquiring an STD) makes them believe that all the warnings about HIV/AIDS are over-exaggerated. They do not consider the latency period for HIV/AIDS (Adler et al 1996:52; Morris et al 1996:63).
- Young people believe that if they are familiar with their partners in general, and if they believe they know their partner's sexual history, they are not at risk for HIV/AIDS. Many young people trust that their partners are not infected with HIV. They do not realise that by perceiving their partners to be safe in terms of HIV, they are placing themselves at elevated risk.

Adolescents: The implicit personality theory of partner risk

Fisher and Fisher (1996:113) applied the IMBM¹⁰ (Information, Motivation and Behavioural Skills Model) to college students to promote HIV/AIDS prevention behaviour. They found that sexual partners are assessed for risk in relation to the implicit personality theory of partner risk. Young people expected high risk partners to possess qualities which include provocative dress, being over-anxious for sex and abuse of alcohol and drugs.

Some students perceived themselves as relatively invulnerable to HIV/AIDS regardless of their sexual behaviour. Their reasons for feeling safe in terms of HIV/AIDS included that they had one sexual partner only, they did not engage in homosexual behaviour and they did not use drugs.

The study by Fisher and Fisher (1996:113) revealed that students who engaged in unprotected sexual intercourse subscribed to the following beliefs:

- (i) Condoms are associated with mistrust in sexual relationships.
- (ii) Negotiating safe sex is problematic because individuals feel uncomfortable discussing the use of condoms.

¹⁰ IMBM is a model proposed by Fisher and Fisher (1992) and is designed to reduce AIDS risk through elicitation research, population specific intervention and evaluation.

In keeping with this view, a medical doctor, Rafael Campo (2003:578) says that some of his young patients hold the following perspective:

Why insist on a condom when it is much easier not to ... and the reasons to go on living are not so clear anyway?

Campo (2003:578) asserts that the cumulative hopelessness among young people fuels the HIV/AIDS epidemic.

- (iii) Alcohol impairment reduces the ability to verbalise desire for safe sex.

Morris (1996:91) asserts that young people who experience passionate love¹¹ with a partner who is not in a monogamous sexual relationship, have a diminished capacity to make realistic analyses regarding the health risk of the sexual partner. An individual who depends on passionate love in order to acquire a sense of well being will tolerate negative behaviour of the partner and will be unlikely to negotiate safe sex strategies. Morrell et al (2002:13) sum up this view by asserting that *Love is associated with trust and a sign of trust is to have unprotected sexual intercourse*. The link between love, trust and unprotected sex was also a finding in Reddy's¹² (2003) study.

The ways in which young people assess their partners' risk for transmitting HIV, as well as the barriers to safe sex negotiation, suggest that they are an at risk group for sexually transmitted diseases in general and HIV/AIDS in particular.

Adolescents: Cognitive avoidance

Some young people, according to Morris (1996:63) choose to deny threatening information about HIV/AIDS: this is referred to as *cognitive avoidance*. They re-direct their attention away from highly threatening information. A popular slogan in South Africa is "Living with AIDS". This may be construed as HIV/AIDS being associated with life, and not with death. A biased perception that HIV/AIDS is not fatal can become internalised.

¹¹ Strong feelings of sexual desire, fantasy, idealization of partner

¹² Reddy (2003: 112-113) studied sexual identity constructions among adolescents and reported her findings in an unpublished thesis entitled "Troubling Sexualities".

This view is affirmed by Campo (2003:575), a medical doctor, who writes about his 17 year old female patient, whom he calls Palomita. Palomita was a high school student who had been diagnosed with herpes. Dr Campo also treated her boyfriend, whom he refers to as Edgar, and who had tested positive for HIV. The doctor tried to talk to Palomita about HIV/AIDS and safe sex. Her response is worth quoting because her sentiments are probably shared by many young people:

People think bad of him (Edgar), cause they say he (is) dealing in drugs. I tell them "No way, you shut your stupid mouths. He (is) good to me, and besides, he (is) cleaner than you is." Sure, he got his other girls now and then, but he pick them out carefully... That (is) his right as man of the house. No way he gonna give me laSIDA (HIV/AIDS). We too smart for ... that shit. We trust each other. We communicate...

Palomita tolerates her partner's polygyny because she trusts him and feels he is an ideal partner. Her feelings of passionate love for him diminish her capacity to analyse her sexual relationship with him as a risky one. Her socialization into the belief that Edgar's masculinity justifies multiple sexual partners endangers her health and her life. Risky behaviour is linked with the gendered patterns of the social construction of sexuality, which is explored.

Pattman (2002:39), who studied the construction of sexual identities of 14 women and 18 men at the University of Botswana, provides the following insight on young women whose boyfriends cheated on them. In his study, the women did not construct their boyfriends as deceitful; instead, they felt that their boyfriends were stupid for not being able to hide their promiscuous behaviour. These young women believed that they had to endure what they perceived to be acceptable norms in the life of a hegemonic male. This is an example of women's agency in supporting ideals of dominant masculinity, which, in this case, leads to a dangerous sexual strategy.

2.5. HIV/AIDS: Gender and Risk

The HIV/AIDS pandemic is increasingly being understood as a health development issue which is strongly affected by gender. The Amnesty International report (2004) looks at a rights-based approach to gender-related aspects of HIV/AIDS prevention and treatment as a

more effective response to the pandemic. According to this report, the economic and social inequality of women and girls make them more vulnerable to HIV infection. Shahzadi et al (2001:2), in their review of the Sara Communication Initiative¹³ (SCI), assert that one of the fundamental causes of HIV/AIDS in Sub Saharan Africa is gender inequity. African societies view their daughters as children who are "just passing through the home". Consequently, less care is invested in them by their families. Girls perform subservient roles and lack basic skills such as the ability to communicate their wishes assertively, to think critically, to negotiate safe sex strategies, to make decisions, and to solve problems in social relationships.

According to Bandura (1994:27), women and girls have a lower sense of self-efficacy to negotiate safe sex practices. White (1999) describes the society that young women live in as one which is a ...

... socially stratified system maintained by racism, economic inequality, poverty, sexism and violence.

Brown (in Kumar 2000) asserts that the rate of HIV/AIDS infection among South African women is four times greater than that of their male counterparts.

In South Africa, statistical research data suggests that HIV/AIDS is a gendered disease which will claim more lives of women in the future. In 1997, women comprised 41% of the global population living with HIV/AIDS; in 2004 this figure had risen to 47% of all people living with HIV/AIDS and 57% of HIV/AIDS people in Sub Saharan Africa (UNAIDS 2004). The group with the highest risk for HIV/AIDS is young South African women who are between the ages of 15 and 25 years.

¹³ Sara Communication Initiative (SCI) was founded by UNICEF and John Hopkins University. It is a communication strategy which aims to bring about a transformation in the situation of female African adolescents, to enable them to think critically and creatively and to communicate assertively with a view to developing safe sex behaviour. SCI addresses issues of concern to the Convention on the Rights of the Child (CRC) (UNICEF, 1990) and the Convention on the Elimination of Discrimination Against Women (CEDAW) (United Nations, 1979)

A study conducted by the University of Witwatersrand Reproductive Health Unit (2004) revealed that 31% of the South African women surveyed indicated that they were coerced into their first sexual encounter. AVERT.org (2004) report that this kind of coercion is a common occurrence in many countries. The report by the Reproductive Health Unit (2004) adds in South Africa, 20% of HIV positive women were infected within one year of their first sexual encounter. For many of these individuals, their partners were on average four years older than them. This made saying "no" to sexual intercourse and negotiating condom use difficult.

These subtle forms of social exclusion disempower women and young people and fuel the spread of HIV/AIDS.

2.5.1. Relationship between gender, risk and disempowerment

Coombe (2000) asserts that the HIV/AIDS pandemic thrives on sexual violence, male domination, resistance to use condoms, low status of women in society, high levels of STDs and social norms which encourage polygny. Disempowerment among young people makes them more vulnerable to HIV infection. In this section, I offer an in-depth view of the relationship between gender, risk and disempowerment by exploring the following:

- Gender and power relations: the social construction of gender identities, in ways which inscribe male dominance and female sub-ordination, and how this serves to disempower women in safe-sex negotiation.
- Dominant masculinity: the portrayal of physical, sexual and economic power as core attributes of masculinity, and how these gendered factors increase the spread of HIV/AIDS.
- Violence and crime: acts of domestic violence, rape and sexual slavery as well as the culture of violence borne of the global perception of women/girls as properties of sexual partners.
- Condoms: the socially gendered expectation that men control sexual decision-making in general, and condom use in particular, as well as non-negotiation about condom use.

- Silence around sex: this section offers an insight into the historical development of a “mute sexuality” and its implications for present day youth, for whom it is not socially acceptable to talk about sex publicly, and how this fuels unsafe sexual practices.
- Economic status: the relationship between financial dependence (of women on men) and the resultant disempowerment (of women), especially in sexual decision-making.
- Human biology: this section explains why women/girls are physiologically more vulnerable to HIV infection than men/boys.
- Sexually transmitted diseases: the detection of symptoms of sexually transmitted diseases, as well as accessibility (or the lack of accessibility) to treatment for these conditions.

2.5.1.1. Gender and Power Relations

Shahzadi et al (2001), in their review of the SARA Communication Initiative, say that gender-based socialization of boys and girls continues to create power imbalances in sexual relationships that put young women at a disadvantage.

According to Lorber (2003:100-101), gender inequality involves the devaluation of women and the social domination of men, and this is embedded in social history. She explains that it is produced and maintained by identifiable social processes and built into the general social structure and individual identities deliberately, so that women, as a group, can continue to be the subordinates of men, as a group. Lorber adds that the moral imperatives of religion and cultural representations establish and maintain the boundary lines among genders and ensures that what is demanded, what is permitted and what is disallowed for people in each gender is known and followed by most.

Infidelity among married women is socially unacceptable and even viewed as a crime, in certain countries. Extramarital sexual relationships among men, however, is almost socially acceptable and to be expected. A woman who adheres to the dominant ideals of femininity

by remaining faithful to her husband will not necessarily be safe from HIV if he infects her. This applies to women in both developed and developing countries (AVERT.org. 2004).

Kumar et al (2000) refer to Gomez, who states that according to the socially accepted idea of femininity, young women are not expected to be sexually assertive; in fact, they are expected to resist sexual advances from men. A young woman who is perceived to be sexually knowledgeable by her peers is often labelled a "bitch" or a "whore" or "an easy lay", that is, she is viewed as being sexually promiscuous. According to Holland and Thomson (1998), in the dominant femininity script an...

... empowered, independent young woman with her own active sexual desires, who seeks sexual pleasure and sexual safety on her own terms ... is sexually and socially deviant

Socially appropriate behaviours serve to constrain young women and to disempower them in negotiating safe sex. Socio-cultural norms foster female sexual passivity, sexual innocence and sexual ignorance to the extent that safe sex negotiation poses a real challenge to young women (Suarez-Al-Adam et al 2000).

The literature reveals that the pursuit of conventional femininity is a dangerous sexual strategy for young women. Safer sex demands that young women be empowered to express their own sexual desires and manage sexually risky behaviour. This is construed as unfeminine and deviates from conventional ideas of masculinity and femininity.

Holland, Ramazanoglu, Sharpe and Thomson (1999) cite research which shows that sexual practices cannot be altered by simply educating people about risky behaviour. In order to transform social and sexual relationships young people need positive messages about sexuality; they argue that if sex is presented as both enjoyable and safe, this could enhance young peoples' confidence to communicate about sex. Holland, Ramazanoglu, Sharpe and Thomson propose that ideas of conventional masculinity and femininity be problematised and explored. They emphasize the need for young men to be challenged to think about men's behaviour and their expectations of women, in an effort to promote safe sex.

This view is supported by the following excerpt of the executive summary of the UNAIDS Year 2000 Strategy on Men and AIDS report:

All over the world, women find themselves at special risk of HIV because of their lack of power to determine where, when and whether sex takes place. What is perhaps less often recognized is that cultural beliefs and expectations also heighten men's vulnerability... Men are also less likely to pay attention to their sexual health and safety, and are more likely to inject drugs, risking infection from needles and syringes contaminated with HIV...

The preceding excerpt increases the urgency for both, young men and young women, to reconstruct their sexual identities as a way towards safer sex behaviour.

While I do not intend to underplay the oppression of women in society, I recognize the factors which are inscribed on the social template for masculinity (polygyny, unprotected sexual intercourse, drug abuse) and which perpetuate male disempowerment and men's vulnerability. My work does not aim to ignore men and their vulnerability to HIV infection in the presence of a myriad of pressures to conform to notions of the hegemonic male. I choose to discuss mainly the disempowerment of women because a statistical analysis reveals that women form the group which is most vulnerable to HIV/AIDS in the South African context. According to the results of the Nelson Mandela/ HSRC 2002 survey of HIV/AIDS (Statistics SA, 2005), the national prevalence of HIV infection among women was 12.8%, while the infection among men was 9.5%. (The survey sampled people living in households and hostels throughout South Africa and provided HIV infection rates by age, race, sex and province and included information on knowledge, attitudes and behaviour). Similar predictions of disproportionate rates of infection among women and men were made by the Actuarial Society of South Africa (ASSA), according to Statistics SA (2005). The ASSA released a model in 2002 named ASSA2002, and based on this model, projected HIV/AIDS infection and mortality, to be higher among women than among men of the same age group from the year 2005 to the year 2020.

2.5.1.2. Dominant Masculinity

Young men and young women need to reflect on the gendered identities which they inhabit daily in order to prevent risky sexual behaviour. Pattman (2002:35), who studied student

identities, found that consuming alcohol is an important marker of the hegemonic male. In his study of students at the University of Botswana, he found that male students talked openly about heterosexuality, commented loudly about the bodies of women, engaged in unprotected sexual intercourse with prostitutes and in play-fighting as defining attributes of their male culture. Their actions were viewed by other young men who did not engage in such behaviour as “a fantasy of male hedonism”. Sexual power, physical power and economic power were perceived to be hegemonic attributes of masculinity.

The sexual cultures of youth are characterised by the portrayal of young men as sexually active and aggressive, asserts Gomez, who is cited by Kumar et al (2000). Heterosexual experience generates status and sexual affirmation from young men's peers. Sexual passivity, innocence and ignorance are not "normal" masculine traits. Moore S et al (1996) and Holland and Thomson (1998) assert that young men who are not sexually active and who do not have multiple female sexual partners are often subjected to ridicule. Hegemonic masculinity in heterosexual relationships supports the idea of men having multiple sexual relationships with women. Social encouragement of promiscuity among young men, coupled with male sexual aggression alongside female sexual passivity and ignorance, are gendered factors which increase the spread of HIV/AIDS (Moore S et al 1996, Holland and Thomson 1998). The distinct gender disparity and high incidence of mortality among women from HIV/AIDS, alluded to by the Reproductive Health Research Unit report (2004) in section 1.3, shows how the construction of gender along axes of differentiation has impacted on South Africans in particular.

Campo (2003:578) sums up dominant masculinity in the following excerpt on Latino men:

Our wives must be as pure as we believe our own mothers to be, and yet we pursue our mistresses with the zeal of matadors about to make the kill. Brute force is excused as a necessary means by which Latino men must exert control over weak-willed women, and it is by no means a secret that in the shadow of the AIDS epidemic lurks another senseless killer, domestic violence...

2.5.1.3. Violence and Crime

Another factor which contributes to the spread of HIV/AIDS is the sexual abuse of women. Most South African women are at a higher risk of contracting HIV because the South African society is a patriarchal one where women have little control over their sexual activity. Dorrington et al (2002:17) stated that in 1998, South Africa was found to have the highest per capita rate of reported rape in the world. This view is echoed in the report by AVERT.org (2004). Greathead (2002:98) supported this information by reporting that one woman or girl is raped per minute in South Africa. AVERT.org (2004) reports that commercial sex workers also experience violence at the hands of the Madams¹⁴ in brothels.

It appears that violence against women and girls on the one hand and HIV/AIDS on the other are interdependent. Gender perceptions, low socio-economic status of women and traditional ideas of femininity underpin acts of sexual violence.

AVERT.org (2004) reports that in certain African countries, it is believed that sex with a virgin can cure HIV infection. This results in the rape of young girls. In this report, it is stated that rape is also used as a method of ethnic cleansing in certain African countries (for example Somalia and the Democratic Republic of Congo) where there is social strife or war. In these countries, women of the “wrong” ethnic group are raped with the deliberate intention of infecting them with HIV.

The violation of women is not always overt. Women, inside and outside of a monogamous relationship, are constrained on the issue of the use of male condoms in heterosexual relationships.

2.5.1.4. Condoms: Is it on when it is not on?

Cornell et al (2004:7S) sum up the reasons for the elusivity of condom use by women when they assert that this heterosexual relationships are influenced by culture and gender roles related to perceived trust, sexual negotiation, communication and power. De Oliveira

¹⁴ “Madams” refers to women who manage brothels and employ sex workers.

(2000) argues that a young woman, who insists that her partner use a condom, or who presents her partner with a condom, is perceived to be sexually experienced and sexually promiscuous. She is viewed as sexually deviant, a "whore". De Oliveira adds that the threat of acquiring a "bad" reputation is real for such a young woman. Therefore, young women often choose to remain sexually submissive where the use of male condoms is concerned. This increases their risk for contracting HIV/AIDS.

Garcia-Moreno and Watts (2000) emphasise that among many young men, condom use is viewed as unmanly, and associated with homosexual activities. The use of condoms may be unpopular during heterosexual intercourse because it is damaging to the masculine heterosexual identity, especially among a young man's peers. According to Garcia-Moreno and Watts:

.... it is socially accepted and expected that men control the sexual decision-making, including the use of the male condom, within heterosexual relationships.

AVERT.org (2004) concur with this view by reporting that in relationships where women have no power, they are unable to insist on use of condoms and to protect themselves against HIV/AIDS. The request for the use of condoms results in women being accused of infidelity or being beaten. These forms of oppression form a barrier which prevents women from articulating their desire for safe sex. It condemns many women to silence.

2.5.1.5. Silence Surrounding Sex

Foucault (1991:1-19), in his *History of Sexuality*¹⁵, asserts that silence about sex became the rule from the 17th century up to the present time. He adds that the relationship between sex and power in terms of repression is that if sex is condemned to silence, then anyone who speaks about it appears to be deliberately transgressing the established norms or laws. He associates the imposed silence about sex by way of censorship with the repressive nature of present day society. The reasons for silencing talk about sex, according to Foucault, is that, for a long time, sex has been associated with sin. He mentions Catholic teachings which increased the importance of penance to ...

¹⁵ This text documents the increasing scrutiny to which sexuality is exposed in modern times, and explores the evolving social, economic and political forces that have shaped our attitudes to sex.

...all the insinuations of the flesh: thoughts, desires, voluptuous imaginings, delectations, combined movements of the body and the soul...

Foucault (1991:20) argues that people were obligated to confess violations of the laws of sex by meticulous self-examination of one's words, thoughts and actions. This, he perceives, was a scheme for transforming sex into discourse. For Foucault, the value of discourse about sex is to regulate sex to achieve political and economic goals of the ruling party in a society. The process of policing sexuality paved the way for legal sanctions against minor perversions. Irregular sexual behaviour was associated with mental illness for which medical treatment was administered; a pathologizing of sexuality emerged. This surveillance of sex, according to Foucault, is to ensure that sexuality is economically useful and politically conservative.

This historical development of "mute sexuality" has implications for present day youth. It is not socially acceptable for young people to talk openly about sex, especially when they are newly acquainted during early sexual encounters (De Oliveira:2000). This veil of silence creates uncertainty among partners about whether or not sexual intercourse will materialise. If a young man ventures to mention the use of condoms, he might be regarded as being "forward" by a young woman and might face rejection. A young woman, on the other hand, who suggests the use of condoms, might be viewed as sexually experienced and as having a "bad" sexual reputation, by her partner. Therefore, young people choose to remain silent about safe sex. This silence, however, is filled with traditional ideas about femininity and masculinity and compromises the needs, desires and sexual safety of young people. It leads to unplanned, unprotected sex, where the young man's masculine sexual identity is intact, and the young woman maintains a "proper" sexual reputation (De Oliveira 2000, Suarez-Al-Adam et al 2000).

Young South Africans live in a patriarchal society where there is little tolerance for women's sexual rights, according to the Reproductive Health Research Unit report (2004). This becomes especially problematic since older members of many South African communities endorse these norms. Jegede (1997:7) explains that in African culture, elder members of the community are perceived to be the "repository of knowledge". Jegede et al

(1995:18) assert that according to the socio-cultural predictor of authoritarianism among people of African descent, elders' points of view may not be challenged and must be accepted without question.

The following quotation from the UNICEF Report (undated) entitled *Mozambique: Schools Provide Safe Space to Talk about Sex*, supports Jegede's (1997) assertion:

Fifteen year old Carrini ... especially welcomed the space in school to talk about HIV/AIDS. She said it is not so easy at home and it became more difficult when her uncle was dying. "When I asked my family whether my uncle was dying of AIDS, I was told it was not my business" said Carrini. "My step-mother said I should respect my elders and not ask things I know nothing about".

This points to the belief held by some parents that sex and AIDS are not topics for discussion with their children. They probably believe that such information belongs exclusively to the world of adults, and they impose the rule of silence on their children. The lack of information from adult family members might cause young people to accept advice and information on sexual matters from their peers. This information may not necessarily be reliable or safe.

Niehaus (2000:391) studied the ways in which masculinity featured as a political issue during the liberation struggle in South Africa, and the management of sexuality by the ANC-led government. His findings reveal that secondary school teachers perceive sex as the apex of all transgressions, and as a highly contagious form of subversion. Niehaus sheds light on how South African teachers regarded the prohibition of adolescent sexuality as entirely possible, and how they sought to exercise power by exorcising sex from schools through the enforcement of elaborate rules about uniforms and "appropriate" forms of conduct between boys and girls.

The social construction of sexuality is not confined to issues related solely to gender; it includes broader social norms and values. The World Bank Report (1997:21) states that withholding knowledge from young people under the guise of "not transgressing cultural and social norms" has given momentum to the spread of HIV/AIDS in Africa. According to Moran (2001:75), the sexual world is viewed by many communities as the domain of adults

only. This has resulted in the conspiracy of silence about sex in the presence of young people.

It is encouraging to note that a review of current South African literature suggests the need to break this wall of silence. Greathead (foreword:2002) who wrote on behalf of the Planned Parenthood Association of South Africa¹⁶ (PPASA), emphasised the importance of equipping young people with relevant information and the skills to make responsible decisions about their sexual activity. These authors assert that knowledge about sex does not tantamount to permission to engage in sexual activity. They add that when children are expected to rely on their peers and the media for information about sex, potentially life-threatening misconceptions and negative attitudes can be perpetuated in the face of the AIDS pandemic. These views are echoed by Bandura (1994:34). Young people are bombarded with sexual information from the media and their peers; both these sources often perpetuate the idea that irresponsible sexual behaviour has no negative consequences.

The importance of providing sex education to the South African youth has been emphasised for many years but at the time of writing this work, formal sex education and HIV/AIDS prevention programs have yet to be implemented in secondary schools.

In addition to young peoples' adherence to a "mute sexuality", another feature which disempowers them in general and young women in particular, is their economic dependence on men.

2.5.1.6. Economic status

The 2004 Amnesty International report states that financially, materially or socially determined dependence of women on men means that women cannot make demands on men to minimize risky sexual behaviour.

¹⁶ An organization which offers youth information services in terms of contraceptive use and distribution, treatment of sexually transmitted diseases and counseling and education in HIV/AIDS. It also facilitates youth training courses in the context of HIV/AIDS.

Kumar et al (2000) assert that women, in Southern African Developing Countries (SADC), endure a lower socio-economic status than most men; this makes them subordinate to men in heterosexual relationships. As a result, many women have resorted to risky sexual encounters to meet their financial and other material needs.

Dorrington et al (2002:18-19) distinguish between two types of female sex workers in South Africa:

1. *Commercial sex workers* who depend on sex for money.
2. *Other sex workers* who depend on sex for favours, for example, to obtain drugs or alcohol.

In many SADC countries, sex is often used to pay for a passing grade at school or for a trading license. Gomez, cited by Mitchell et al (2000), states that when women, in these situations, insist on use of a male condom, then men refuse to pay for sex. Unprotected sex becomes the currency for life's necessities and exacerbates the spread of HIV/AIDS (Gomez, in Mitchell 2000; AVERT.org 2004).

A South African youth magazine named *S'camtoPRINT* (July 27, 2003) which aims at informing the youth about safe sex and healthy living, contained an article entitled *Selling Sex*. The author describes the role of parents, other relatives and friends who force South African teenagers into commercial sex and take the money which is earned. Coercion into sexual intercourse, therefore, is not strictly by the partner, but significant role players in the lives of young women are also involved.

In most countries, women have extremely narrow career opportunities available to them; women are required to work harder than men even when women are HIV positive (AVERT.org 2004). Arndt (2002:29) extends this view by stating that rural African women perform 90% of all tasks and that they engage in the most strenuous forms of work. Urban African women have to expend their energies on both family and profession needs. March et al (1999:18-19) assert that the gendered division of labour changes from one society and culture to another and is influenced by external circumstances. These researchers state that

in most societies, gender power relations are skewed in favour of men. They shed more light on this assertion by distinguishing between two types of work, namely:

(i) Productive work (Production)

This involves the production of goods and services for financial income which is recognized and valued as work by individuals and societies.

(ii) Reproductive work (Reproduction)

This includes the care and maintenance of the home and family. The tasks which are involved include cooking, washing, cleaning, bearing children and taking care of children. This work, which is done mostly by women, is normally unpaid, and although it is necessary, it is not valued as work.

March et al (1999:19) conclude that as a result of women's low status in the community, women's activities are valued less than those of men; this in turn perpetuates women's low status as a part of a vicious cycle and serves to devalue women. A woman, who is devalued on the basis of her gender, lacks the power to negotiate safe sex strategies with her partner. Furthermore, women's anatomy also increases their vulnerability to HIV infection.

2.5.1.7. Human Biology

Unprotected vaginal intercourse doubles or triples women's risk for HIV/AIDS infection, compared to the risk for their male counterparts (Kumar et al 2000, AVERT.org. 2004, Gutierrez et al 2000, Shahzadi et al 2001). This is due to a larger exposed surface area of the vagina and labia in women, compared to the exposed surface area in men. Although infected semen contains a higher concentration of the HI virus than female sexual secretions (Amnesty International report, 2004), men to women transmission of the virus is more efficient than women to men transmission. In young girls, when the vagina and cervix are still developing, the reproductive tract is more vulnerable to infection.

Dorrington et al (2002:18-19) point out that in South Africa, the "dry sex scourge", which involves use of chemicals to dry out the membranes of the vagina and thereby increase the sexual pleasure of the male partner, has been highlighted because it makes women more

vulnerable to the HI virus. This indicates how the construction of gender results in the importance of the male sexual experience superceding the need for safe sex practices in this society. Biological factors put women at higher risk for sexually transmitted diseases in general and HIV/AIDS in particular.

2.5.1.8. Sexually Transmitted Diseases

Detection of symptoms of sexually transmitted diseases, for example, sores, is more difficult among women than among men. This allows the disease to progress rapidly in women, making them more vulnerable to HIV/AIDS infection (UNAIDS 1999). According to Piccard, cited by Kumar et al (2000), since 1997, sexually transmitted diseases, especially among women between the ages of 15 and 19, has been on the increase in South Africa. Dorrington et al (2002:18-19) add that many South African women are too poor to access suitable, affordable treatment for STIs (Sexually Transmitted Infections). The World Bank report (1997:20) revealed that the inability to address this last factor has played a significant role in the spread of AIDS.

Female sex workers are socially criminalized in certain countries; these women experience great difficulty in accessing suitable health care. This stigmatization increases their risk for HIV/AIDS and other STDs (AVERT.org. 2004). What emerges is that globally, HIV/AIDS is a disease which exacerbates existing gender inequalities.

The above descriptions (2.5.1.1 to 2.5.1.8) show how the discursive and social fields of practice, where knowledge is produced and embedded, have served to create a gendered pattern of the spread of HIV/AIDS. They also highlight how issues of power, gender and sexuality are inextricably linked to sexual practices, as alluded to by Baxen et al (2004) in section 1.2.

In an effort to stem the spread of HIV/AIDS, UNAIDS (1999) and the World Bank (1997) have proposed that education programmes be designed with a view to creating safe sex behaviour, especially in schools.

2.6. Schools, Sexuality Education and HIV/AIDS

In section 1.2, the role of effective education in the struggle against HIV/AIDS was discussed. Coombe (2000:3), Badcock-Walters (2002:95), and Potsonen (1999:480) concur that many young people are infected during their school years and they view schools as well placed intervention sites. This is in keeping with the core set of interventions which have been recommended by the World Bank (1997:20), and are discussed in section 2.6.1. Section 2.6.2 details how race-based resource inequalities in South African schools have impacted on counseling services. It also sheds light on teacher abuse of learners as a barrier to trust. Sexuality education in the context of HIV/AIDS is discussed in section 2.6.3 as an evolving process.

2.6.1. The World Bank on HIV/AIDS intervention

According to the World Bank (1997:11)

The education sector has a key role in promoting and maintaining the critical behaviour change agenda and must take these factors into account when planning. Educators must seek every opportunity to include HIV/AIDS prevention in schools and training curricula at all levels.

This view is supported by UNAIDS (1999) cited in the World Bank Report (1997:20).

The World Bank assessment on HIV/AIDS in Africa report (1997:20) has shown that successful interventions are characterised by the following features:

- A strong commitment by the government and other sectors to the epidemic.
- Investments by governments in early prevention strategies.
- A comprehensive, multisectoral effort which addresses factors which increase the likelihood of infection and those which relate to care, treatment and support of HIV positive people. This includes the education sector which should become actively engaged in HIV/AIDS prevention programs for the youth.

The report recommends that the core set of interventions to reduce the spread of HIV/AIDS among young Africans should include changing behaviour using peer education, drama and the mass media, diagnosing and effectively treating sexually transmitted infections (STIs),

and making condoms and voluntary counseling and testing (VCT) affordable and accessible.

2.6.2. *Schools, counselors and educators*

In many SADC countries, schools might offer a more youth friendly approach than clinics and hospitals, in HIV/AIDS related matters. School counselors may play a vital role in this regard (Mitchell:2000). In most South African schools, the role of counselors has been phased out due to financial constraints in the Department of Education. The absence of such a supporting service has exacerbated the spread of HIV/AIDS among South African youth.

Contemporary South African schools vary because communities have inherited schools which were either advantaged or disadvantaged during the era of apartheid. Race-based resource inequalities have created pervasive contrasts in township/suburban and urban/rural school environments. Schools which service affluent communities may afford the services of a counselor. Most South African schools lack the financial resources to afford this service. However, in the year 2006, it is envisaged that Life Orientation¹⁷ programs will become compulsory in secondary schools. The South African public can hope that this will herald the return of school counselors.

Mitchell (2000) notes that in certain SADC schools, learners do not trust their educators. She cites several reports which reveal that definite barriers to trust exist among certain female learners and their male educators, because some male educators sexually abuse their female learners.

Mitchell's view is extended by an author who called herself "Angry Young Woman" in an HIV/AIDS awareness magazine for South African youth, *S'camtoUNCUT* (May 2004).

¹⁷ Life Orientation will form an integral part of the Further Education and Training curriculum in the year 2006, as part of the National Curriculum Statements, which represent the flagship of education in South Africa

“Angry Young Woman” explains that when girls commit misdemeanours or fail at school, some teachers blackmail them with sex in exchange for the teacher’s silence.

A new silence about sexuality at schools has emerged in the South African context. More light is shed on this by Niehaus (2000:405), who conducted a study of secondary school learners in the Lowveld schools of South Africa. His findings revealed that this new silence sustains a delicate balance where secondary school learners are, more recently, being permitted to have sex on condition that they ignore the sexual misdemeanours of male teachers with female learners. Male teachers and prefects in some of these schools were viewed as post-colonial bureaucrats, who “arrogate to themselves excessive rights to take women (secondary school learners), and have practically unlimited rights over them”.

2.6.3. Sexuality education and HIV/AIDS in secondary schools

Sexuality education, according to Adler et al (1996:50) and Baxen et al (2004) includes school courses which focus mainly on biology and health information, and which is in isolation from safe sex behaviour. They point out that adolescents need to learn how to negotiate physical and interpersonal challenges in order to practice safe sex behaviour. Kaufman et al (2002) researched the impact of education on young peoples' engagement in risky sexual behaviour and stated the following:

Our findings suggest that schools have ample latitude to promote the knowledge, understanding and skills to enable young people to make responsible decisions about their sexual behaviour

Reddy (2003:19-21) provides the following useful account of sexuality education in South African schools:

- In 1991, a government committee was formed to support an AIDS education program.
- In 1992, AIDS education kits, which were financed by the government, were released.
- In 1993, these AIDS education kits were withdrawn because it was too expensive and did not meet the needs of individual communities.

These events occurred in school environments where educators were not trained to deal with issues of sex and sexuality, according to Reddy (2003:19-21).

- In 1997, the government introduced the *Life Skills* and *HIV/AIDS Education* programs. Reddy (2003) cites Crew who criticized this initiative for being over-prescriptive in its approach.
- In 1999 the Department of Education developed a Corporate Plan, where, according to Coombe cited in Reddy, the following objectives were emphasized:
 - *Raising awareness about HIV/AIDS among educators and learners*
 - *Integrating HIV/AIDS into the curriculum*
 - *Developing models for analyzing the impact of HIV/AIDS on the education system.*
- In 2000, the Minister of Education proposed a more holistic approach to HIV/AIDS and sexuality education which included gender equity at schools, strategies for conflict resolution, developing self esteem among learners and securing schools against violence.

The emergence of HIV/AIDS has altered the nature of and need for discourses about sexuality. Education departments in countries across the world have viewed sexuality education as an avenue to control and reduce the spread of HIV/AIDS (Castro-Vazquez 2002:468). The Children's Charter of South Africa contains an article that states that children have the right to education on issues such as sexuality and HIV/AIDS.

A critical review of literature suggests that HIV/AIDS education has been grounded in double standards and has perpetuated gender and power disparities. Gender imbalances and other social inequalities have been perpetuated through the discourse on HIV/AIDS education. This is evident by the following assertion of Monbusho cited in Castro-Vazquez (2002:468):

Japanese schools seek to maintain sexual equality between young men and women by means of sex education, where students are made aware of their sex roles...

According to Castro-Vazquez (2002:468) HIV/AIDS education in Japan is taught in a way that encourages "compulsory heterosexuality" through which "genders and desires are

naturalised". "Good manners" form the foundation of sexual behaviour between men and women where girls are not expected to articulate or even hear the language of sex. Education socializes children into belief systems which legitimize unequal opportunities in society. A review of the literature shows that social inequality in the form of adherence to traditional gender ideologies have shaped HIV/AIDS education programs.

2.6.4. Concluding remarks

The intersecting influences of a lack of resources, together with sexual misconduct (usually between male teachers and female learners at school), as well as the myriad of problems which beset programmes which were aimed at inaugurating sexuality education in South African schools, comprise some of the challenges for HIV/AIDS intervention strategies at schools. These challenges are exacerbated by the deliberate manipulation of HIV/AIDS education programmes by some departments in their quest to perpetuate power and gender disparities. An in-depth look into how social transformation be effected by re-creating schools as democratic institutions, based on the ideals of equality of opportunity, justice and human freedom, the pillars of post-apartheid education constitution in South Africa, would be useful in developing sexuality education programmes. The development of HIV/AIDS intervention strategies, as part of education programmes to reduce the risk of transmission, are based on several theories, which are discussed in the second part of this chapter.

PART B

2.7. Theories of HIV/AIDS Prevention

In the absence of a vaccine against HIV/AIDS, many theories and models, which aim to transform behaviour of individuals, as well as social constructions of gender, have evolved. diClemente (1996) concurs with Morris (1996) and Fisher and Fisher (1996) by contending that the use of drugs and alcohol, as well as behaviours which include multiple sex partners and the inconsistent use of condoms among sexually active adolescents are associated with their increased risk of infection. The research on risky sexual behaviour among young people has, in the main, been grounded in psychological theories, which are discussed. These include, among others, the Theory of Reasoned Action (TRA), Health Belief Model

(HBM), Social Representations Theory (SRT), Information, Motivation and Behavioural Skills Model (IMBM).

These theories aim at changing the landscape of young peoples' sexual decision-making in order to reduce risky sexual practices. The psychological models propose that peoples' intentions can be used to predict their behaviour and reflect their attitudes. Attitudes, according to psychological theories, are moulded by two factors. Firstly, they are shaped by beliefs about the likelihood and value of consequences of a particular action. Secondly, they are influenced by social norms regarding behaviour. The psychological theories facilitate our understanding of intra-individual factors which relate to HIV/AIDS prevention. They also propose the process of elicitation research, to prevent assumptions about young peoples' sexual decision-making being made by the adult researchers. Elicitation research involves the elicitation of information from young people themselves, without being modified by (adult) researcher perceptions. However, these psychological models do not consider the discursive social and cultural fields of practice, where, according to Baxen et al (2004), knowledge is not only produced, but is constantly contested, negotiated, reproduced and embedded. Psychological theories also neglect issues of power, gender and sexuality which inform safe sex negotiation and practices.

More recent theories, namely, the Empowerment theory and Feminist theory, focus on how gender interacts with class and race to generate inequalities within a society, which results in risky sexual practices. Both these theories view power through a contextualized gender lens. The feminist theory is directly applicable to my study because it proposes a deconstruction of existing gender ideologies (which, among other things, promotes unsafe sexual practices) in favour of reconstructing new ones. Feminist theorists (Weiler, 1995: 24 and Maher, 2001: 20-30) exhort educators to become aware of the power of race, sexual preferences, gender and class in the oppression of women. They emphasise the transformative potential of education as a means to achieving social justice. Feminist engagements call for issues of social power and identity to be examined in the classroom, and for inequalities to be viewed as social constructions, and not as rigid identities. Feminist theorists encourage researchers to create a space in which research participants

can be transformed into researchers to investigate and resolve problems that affect them (research participants). This theory has direct relevance for my work because I engage young people to serve as researchers, in an effort to respond to the central research question which is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

What follows is a critical review of each of these theories, which have been formulated or modified, to create a framework for intervention strategies in the context of HIV/AIDS.

2.7.1. The Theory of Reasoned Action (TRA)

The Theory of Reasoned Action (TRA), postulated by Ajzen (1980) has been used to develop models for reduction in HIV/AIDS risky behaviour. This theory is based on the assumption that people are rational beings who are capable of using information systematically. It rejects the view that human social behaviour is controlled by “unconscious motives and overpowering desires”. A rational model of behaviour is associated with the TRA. Adler et al (1996) explain that this model proposes that the ability to make a suitable decision depends on the choices one has, namely:

- (i) the range of decisions available.
- (ii) consequences of making a decision.
- (iii) likelihood of a consequence becoming a reality should a decision be taken and action followed.

The TRA offers useful insights into intra-individual factors which underpin behaviour. However, it neglects the broader societal influences of race, class and gender which impact on the HIV/AIDS pandemic. The TRA involves clinically measuring attitudes to predict intentions and behaviours. It is based on the assumption that people maintain consistency from their beliefs through to their attitudes, intentions and behaviour. This theory does not cater for dissonance between these variables. Proponents of this theory disregard other variables which may influence the strength of attitudes, for example, the presence of other people, or the skill to execute a behaviour. The TRA draws on tenets of Behaviourist theory which, according to Higgs (1995) proposes that if future behaviour can be predicted, it is possible to control present behaviour and change it according to patterns of behaviour

which are more desirable. Although I find this theory interesting in developing psychological models to prevent risky sexual behaviour, I view it as being highly reductionist in nature.

2.7.2. The Information, Motivation and Behavioural Skills Model

Fisher and Fisher (1992; 1996) conducted an extensive, critical review of literature on HIV/AIDS prevention interventions and found that most interventions adopted an informal conceptual base and lacked elicitation research. According to them, by not accessing the target group's pre-intervention information base, their AIDS risk reduction motivation and behavioural skills, most interventions tantamount to "shooting in the dark". The focus of interventions was found to be a change in general patterns of behaviour instead of increasing an individual's inclination to practice risk-reduction strategies. Many programs offered highly scientific information (for example, destruction of T cells), which is not directly related to HIV/AIDS prevention behaviour (for example, using a condom every time for sexual intercourse). Finally, they found that evaluations of interventions were rare.

According to Fisher et al (1992; 1996), the basis for questions which shaped intervention was the intuition of the researcher. They found that informational interventions among adolescents were likely to produce an increase in HIV/AIDS knowledge, while interventions which focused on information, motivation and behavioural skills issues were more likely to produce an increase in AIDS prevention behaviour. In addition, interventions which began with elicitation research were the most effective.

Fisher and Fisher (1996) argue that since HIV is transmitted through certain types of behaviour, it can be prevented by behavioural change for example, avoiding risky behaviour like unprotected sexual intercourse. They cite the following conceptual frameworks which have been proposed:

- (i) Health Belief Model (also referred to as HBM) by Rosenstock et al (1994)
- (ii) The Theory of Reasoned Action by Fishbein et al (1994) and Ajzen et al (1980)
- (iii) Social Cognitive Theory by Bandura (1994)

- (iv) Information, Motivation, Behavioural Skills Model (also referred to as IMBM) of AIDS Risk Behaviour by Fisher et al (1992).

Fisher et al (1996) propose the use of the IMBM to design, implement and evaluate successful AIDS reduction intervention programs for adolescents. Elicitation research which is followed by group specific interventions and ends with evaluation of the intervention is the basis of the IMBM. According to this model, the three fundamental determinants of AIDS risk reduction are:

- (i) Information regarding AIDS transmission and prevention.
- (ii) Motivation to practice low AIDS risk behaviour.
- (iii) Behavioural Skills which comprise AIDS preventive actions.

These constructs are viewed as highly generalised determinants of HIV/AIDS preventive behaviour.

The IMBM may be represented as follows:

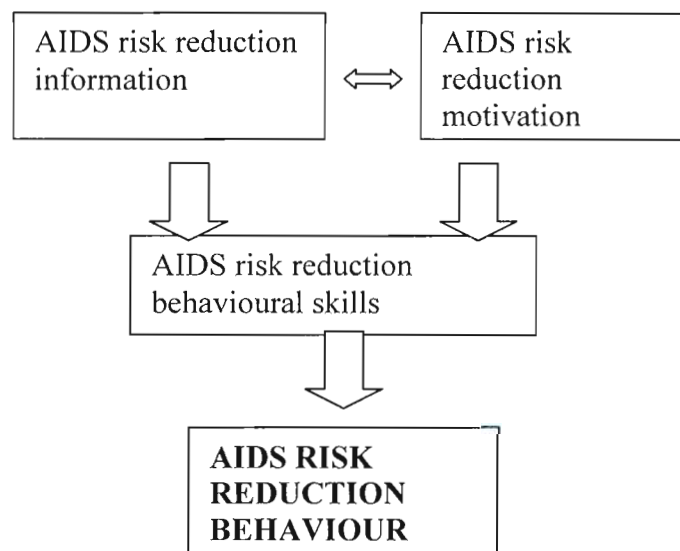


Figure 2.3. Information, Motivation and Behavioural Skills Model (Adapted from Fisher et al, 1992)

According to this model, a target population must be identified and intervention must be tailored to suit the context and needs of this target population. The three steps in using the IMBM, according to Fisher et al (1996), involve:

(i) *elicitation research*

- Intended to identify deficits in AIDS risk reduction information, motivation and behavioural skills in current AIDS prevention program with a view to remedying/modifying/extending/replacing current program.

(ii) *population specific intervention*

- Intervention to remedy deficits in AIDS risk reduction information, motivation and behavioural skills which emerged from elicitation research

(iii) *evaluation research*

- Used to determine whether intervention has resulted in changes in AIDS risk reduction information, motivation, behavioural skills and behaviour.

I use this model in my data collection design by including elicitation research as an integral part of this work. The model is applicable to my study because it proposes population specific interventions, which forms a part of my recommendations. I view the elicitation research process as a strength of this model, because it does not depend on an adult researcher, whose views about young peoples' sexuality might be inaccurate on account of the generational gap, to provide information about what young people do and do not know. Instead, it proposes elicitation of this information from young people themselves; this feature makes the model different from previous ones where the knowledge or skills base of young people is assumed. In order to obtain more candid information about risky sexual behaviour among young people, I engaged co-researchers, who are young people, to elicit this information. This involved training of research participants to serve as researchers, that is, to conduct research in their own communities about issues which are of significance to them. The process of enabling marginalized groups (in this case, young people) to conduct research for themselves, while linking the production of meaning to the possibility of human agency and transformative social action, is among the proposals of feminist researchers like Ellsworth (1989: 307) and Gore (1992: 62). These proposals resulted in my selective use of feminist and psychological theories to serve as frameworks for the design of my work.

2.7.3. The Health Belief Model (HBM)

The Health Belief Model was first developed in the 1950's, in response to the difficulty in stemming the spread of tuberculosis. During the subsequent decades, it has been modified to explore a variety of health behaviours, including risky sexual behaviour in the context of HIV/AIDS. The variables of this model are wide-ranging, and are outlined below (after Glanz, 2002):

- (i) Perceived threat which consists of two parts, mainly:
 - Perceived susceptibility: One's subjective perception of the risk of contracting a health condition.
 - Perceived severity: Feelings concerning the seriousness of contracting an illness.
- (ii) Perceived benefits: The believed effectiveness of strategies designed to reduce the threat of illness.
- (iii) Perceived barriers: The potential negative consequences that may result from taking particular health action (includes physical, psychological and financial demands).
- (iv) Cues to action: Events, either bodily (example, physical symptoms of a health condition) or environmental (example, media publicity) that motivates people to take action. Cues to action is an aspect of the HBM that has not been systematically studied.
- (v) Other variables: Diverse demographic, sociopsychological and structural variables that affect an individual's perceptions and thus indirectly influence health-related behaviour.
- (vi) Self-Efficacy: The belief in being able to successfully execute the behaviour required to produce the desired outcomes.

My investigation focused on the perceived risk of young people for HIV/AIDS. The perceived benefits and perceived barriers in terms of safe sexual practices were also explored by the co-researchers. I used this theory as a tool for interpreting some of the findings in my study. A detailed investigation of the reasons which underpinned respondents' subjective perceptions of threats, barriers and benefits (as outlined above) was

undertaken. I used the HBM to advance my understanding of young peoples' perceptions of risky sexual behaviour in an HIV/AIDS environment.

I believe that in South Africa, the media has played a pivotal role in informing citizens of the cost and benefits of making decisions in terms of their sexual activity. Yet the HIV/AIDS pandemic continues to spiral out of control. Morris et al (1996:59-60) state that a campaign which is driven by a fear of a disease, can contribute to psychological denial, that is, fear motivates the occurrence of an escape response. People try to protect themselves from frightening information by not allowing it to filter into their consciousness. In doing this, denial helps people maintain a sense of well-being in the face of an overwhelming threat of a disease like HIV/AIDS. This might point to the reason why, in the study undertaken by the University of Witwatersrand Reproductive Health Unit (refer to section 1.3), 62% of the respondents believed they were not susceptible to HIV infection.

2.7.4. The Social Representations Theory (SRT)

The value of Serge Moscovici's Social Representations Theory as impinging positively upon contemporary social psychology has been acknowledged by Ibanez (1994). Walker (1999) also cites Moscovici's Social Representation Theory and indicates that it provides an explanation for how social representations are formed, mutate and survive. Borrowing selectively from the Social Representations Theory, Schoeneman et al (2002), in their paper entitled Social Representations of AIDS, apply it to the way in which people develop knowledge and stereotypes about diseases such as HIV/AIDS when they ...

... interact with each other and with cultural ideologies to form the negotiated understandings that make up socially constructed reality.

According to this theory, the social representations of HIV/AIDS and other unfamiliar phenomena are formed through two processes, namely:

- (i) **Anchoring:** new social phenomena are named, classified and compared with familiar social phenomena. Metaphoric anchors to characterise HIV/AIDS as a disease as well as HIV/AIDS infected people include death, plague, evil,

punishment, homosexuality, sexually transmitted diseases, urban areas, victim and perpetrator.

(ii) **Objectification:** this is a process by which unfamiliar social phenomena are transformed into concrete and objective common-sense realities. Objectification involves the following:

- **Figuration:** a concept like HIV/AIDS is transformed into an image, for example, a picture of an HIV/AIDS person which emphasises degeneracy, sexual transgression, isolation and suffering.
- **Personification:** involves the association of HIV/AIDS with a person, for example, a celebrity who has succumbed to the disease.
- **Ontologizing:** the concept of HIV/AIDS is made into something real and concrete, for example, photographs which are taken using electron microscopes to show HIV attacking T cells.

I applied the Social Representations Theory selectively to my study. This theory has relevance for my work because I used visual methodology as one way of generating data. The processes of anchoring and figuration became exemplified in my study when the co-researchers took photographs to express their perceptions of sexuality. In their analyses of these photographs, they associated adolescent sexuality with rape, sexually transmitted diseases, death and the plague. They believed that they would be viewed as being guilty of sexual transgression if they sought voluntary testing and counseling services for HIV/AIDS.

I found certain aspects of these psychological theories useful in my research design. They also enabled me to obtain a greater understanding of the data which was generated. The Theory of Reasoned Action and the Information, Motivational and Behavioural Skills Model, which have been used to explain HIV/AIDS risk behaviour, are built on the foundation of peoples' beliefs, which are perceived to be static. The influence of culture and society in shaping and changing these beliefs is not considered in these models. Herein lies the inability of such models, which when used on their own, to be successful in their

attempts to stem the HIV/AIDS pandemic, according to Gutierrez et al (2000) and Zimmerman et al (1997).

What is needed, according to Anderson (in Gutierrez et al 2000), is a framework which articulates the barriers that different people face in the course of their everyday lives. In short, efforts to prevent HIV infection must be explored within broader social contexts. Gutierrez et al (2000) argue that current efforts towards developing theories and models for HIV/AIDS prevention have focused mainly on individual-level factors as a means of facilitating change in behaviour. They assert that Fishbein and Ajzen's theory of reasoned action (1980), Rosenstock's health belief model (1994) and Bandura's social cognitive theory (1994) are based on "the common assumption that individuals have control over the behaviours they perform and that these behaviours are as a result of rational cost/benefit analysis". Gutierrez et al (2000) assert that the strength of these theories lies in their ability to facilitate our understanding of intraindividual factors related to HIV/AIDS prevention. The weakness of these theories is that they do not consider sexual behaviour as an "inherent dyadic interaction", and they neglect the power dynamics between men and women. The interplay of race, gender, and class involves structural, interpersonal, and individual factors, which were ignored when developing these theories (Gutierrez et al 2000; Zimmerman et al 1997).

The rapid pace at which the HIV/AIDS pandemic has spread among young women has caused researchers to draw on tenets of psychological as well as social theories. It follows that theories of HIV/AIDS prevention, which are sensitive to the social and gendered dynamics of the disease, need to be explored. Two such theories are the empowerment theory and feminist theory.

2.7.5 Empowerment Theory

In a move which goes beyond an intra-individual perspective to one that informs how an understanding of power-and-empowerment are critical elements of HIV/AIDS prevention for heterosexually active adolescent women, Gutierrez et al (2000) propose a gendered understanding of HIV/AIDS prevention. According to Gutierrez et al (2000), women live in

an environment where inequality is built on ideas about gender. Gender interacts with race and class, and in this way, disadvantages women. Inequalities within a society silence women and their expression of sexuality (refer to section 2.5.1.5). This endangers their health, especially in an environment where HIV/AIDS is rife.

Fay, Friere and Guteirrez, cited in Zimmerman et al (1997) propose the use of the theory of empowerment to explain how, through social interaction, individuals can increase their own power. For Gutierrez, Pindehugues and Solomon, in Zimmerman et al (1997), empowerment

... is a means of addressing the problems of relatively powerless population, and by mediating the role (which) powerlessness plays in creating and perpetuating social problems.

Gutierrez, in Zimmerman et al (1997) distinguishes three kinds of power. Firstly, *personal power* which involves experiencing oneself as a capable and effective human being. The implications of personal power for HIV/AIDS prevention involves women's understanding of ways in which they can take control of their own health status by engaging in safer sex behaviours. Secondly, there is *interpersonal power*, which refers to the ability to influence others with social power. In the context of HIV/AIDS prevention, it could, for example, involve developing skills to negotiate relationships with health care providers. Thirdly, is the issue of *political power*, which, according to Parent, in Zimmerman et al (1997), is the ability to influence allocation of material resources. Factors which influence adolescent women's health will be access to food, shelter, protection from violence, etcetera.

On political power, March et al (1999:10) state that specialist teams, for example, government ministries, can be established to signal government's acknowledgement of the importance of women's issues. They cite Byrne and Laire who assert that national machinery in respect of support of women's issues have often proven to be weak, under-resourced and vulnerable to changing political fortunes.

Empowerment theory views power as an inverse function of dependence. This has implications for many women in Africa who are denied the right to own land in certain countries, thereby ensuring their dependence and the resultant powerlessness.

I use the empowerment theory which I find useful in so far as it views power through a contextualized gender lens, that is, a clear understanding of the ways in which gender, culture, race, class and development issues interact in contributing towards safe sex behaviours. A criticism of this theory is that it seeks to statistically measure and quantify degrees of empowerment, that is, it reduces people to quantifiable objects of investigation. According to Higgs (1995) this type of quantitative mode of research is based on the narrow view of science.

I wanted to base my work on a theory which provides an understanding of how the issue of gender shapes power relations which impacts on the sexual decision making process of young people. I did not wish to reduce people in my study to quantifiable objects of investigation; instead, I wanted to empower young people to explore gender-based inequalities which contribute significantly to the spread of HIV/AIDS. Having said this, I maintain that psychological theories of HIV/AIDS prevention offer valuable insights and models, some of which I have used selectively in my research design. In order to explore how issues of power, race, gender and class impact on the decisions of young people in the context of HIV/AIDS, I looked primarily to poststructural feminist theory to inform my study.

2.7.6. Feminist Theory

I begin this discussion by exploring the concepts “feminism” in general and “African feminism” (in section 2.7.6.1) in particular. The controversial discourse about feminism among African women, which results in anti-feminist positions in Africa, are interpreted. In section 2.7.6.2, I go on to examine the links between feminism and HIV/AIDS. Finally, I look at how schools construct students and sexuality as part of a broader discussion on feminism and education.

At the outset, I want to explore what the concept of “feminism” means for different people. Arndt (2002) cites the following definitions of feminism:

- *... an emancipatory movement whose goal is transformation of gender relationships.*
- *... is a worldview, a way of life of men and women who actively oppose existing gender relationships based on discriminating hierarchies.*

For some women, and men, the term "feminism" alludes to something which is outside of normality; this generates negative reactions towards feminism as a movement. The “first wave” women’s movement at the beginning of the nineteenth century marked the beginning of liberal feminism. The “second wave” women’s movement, during the 1960’s, saw the beginning of radical feminism. Classic Marxist feminism emerged from the 1970’s and more recently, postmodern and poststructural feminism, according to Weiner (1994). Each of these feminisms is discussed in detail in section 2.7.6.3.

Moore et al (1993) argue that each of these groups claim the label “feminist” and campaign for the improvement of the lives of women. However, the locus of difference among them is the definition of politics. Radical feminists and poststructural feminists understand their work to be political and they make an effort to change structures of power. They disagree, however, about the best ways which may be utilized to achieve that end. For radical feminists, political action is based on the precepts of identity politics. Identity politics, which has been popularized by Marxist struggles, conceptualizes the identity of a group as individuals with a common cause and a unified voice. The object of such politics is to liberate this identity from the negative forces of power which oppress it. Radical feminists, then, aim to liberate women from the negative forces of patriarchy and men. The poststructuralist feminists argue that the radical feminists’ concept of identity is based on the assumption that all women share a common identity. “Woman” was assumed to be a self-sufficient, complete way to identify those that feminism represents. Poststructuralists argue that before feminists could say they represented women, they had to decide on who counted as women and what the interests of those women were. These decisions, made by straight, white, middle class women of power, created a female subject whose desires were

those of straight, white, middle class women. This, according to poststructuralists, made feminism speak only for a privileged few who were granted visibility, voice and authority.

Voices from the margins of feminist circles protested the exclusivity represented by the expressed goals of the movement. African women, whose lives are complicated by issues of racism and sexism, argue that a feminism which assumes a unity of female subjectivity risks defeat and disguises exclusion as universality. More light is shed on this by exploring African feminism.

2.7.6.1. African Feminism

According to Arndt (2002), the discourse on feminism among African women is riddled with controversy, because of the following reasons:

- (i) Feminism is often misunderstood as a concept being promulgated by “aggressive women who try to be like men, dress carelessly and abandon essential feminine attributes”.
- (ii) Feminism is equated with a hatred of men, a non-acceptance of African traditions, fundamental rejection of marriage and motherhood.
- (iii) Men and women feel threatened to lose what they have always known and practiced as “normality”.
- (iv) There is a belief that feminism has been “imported” into Africa from the decadent white world to ruin good relationships between African men and African women.
- (v) An African woman who calls herself a feminist is viewed as one who “denies her African identity, African history, and is a victim of colonization of thought and consciousness”.

hooks (undated), cited in Moore et al (1993), adds to this last view by indicating that feminisms, in general, reflect the dominant tendency in Western patriarchal minds to mystify women’s reality by insisting that gender is the sole determinant of a woman’s fate. She goes on to say that for as long as any group defines liberation as gaining social equality

with ruling class white men, they have a vested interest in the continued exploitation and oppression of others.

As a result of these anti-feminist positions in Africa, many African women do not wish to be regarded as feminists. But these women acknowledge the under-representation of women in socially significant positions of power in economic, educational and political sectors of society. These women identify themselves as “womanists”. Arndt (2002) defines a womanist as a person who “... is committed to the survival and wholeness of entire people, male and female”.

Arndt (2002) states that womanists view African women as a powerless group, with low self esteem, whose experiences of oppression are different from those of other women in the world. Womanists want men to change from their superior sexual standpoint. In my opinion, womanists and feminists are people who share similar goals; the only difference is that the former group limits itself solely to African women.

I view the concept “womanist” as one which is underpinned by a separatist ideal based on gender and race. While this may create disunity in women’s movements across the globe, it is reassuring that social inequalities are issues which African women are intent on addressing, whether under the banner of feminism or womanism.

I agree that a womanist is a woman who is an African feminist and I cautiously suggest that patriarchy’s sacrosanct and largely untroubled grid has “naturally” engulfed many African women who find themselves on the wrong side of several binaries, for example, male/female, European/African, strong/weak, and rich/poor, and that these positions have increased the internal conflict experienced by these women when they engage with feminist theory.

2.7.6.2. *Feminism and HIV/AIDS*

Harrison (2000:8) argues that the discourse on HIV/AIDS presents "a challenge to hegemonic masculinity". I concur with this view and I contend that HIV/AIDS education should be explored in a context in which gender power relations are deconstructed.

Taylor (1995:7) states that there has been an increasing sensualization of women's bodies since the 1920's, which has resulted in the following:

- The ideal identity for an older woman is to be a "perfect" wife and mother.
- The ideal identity for a younger woman is to be the "perfect" sex object.
- Femininity corresponds with passive sexuality where a woman is looked at and touched.
- Masculinity denotes active sexuality which involves looking at and touching women.

The "natural" entitlement of men to women's bodies, coupled with women's compliance, has implications for the spread of HIV/AIDS.

Literature exhorts feminists to help girls to reflect critically on their futures, by deconstructing existing gender ideologies and reconstructing new ones (Taylor 1995:12; Holland et al 1995:275). One way in which this may be done is through a "critical interrogation of their inner histories and experiences", according to Giroux cited in Taylor (1995:14). Exploration of personal histories and life experiences allow girls to develop a strong identity as women. Everyday experiences may be reconstructed and reflected upon using photography; this can help girls explore women's experiences within their families. They may also obtain information by interviewing older women in their families. In this way, young women may engage in discourses which position them differently in terms of current ideology about adolescent femininity.

Weiler (1995:24) adds to the discourse on feminism by describing feminist educators as being aware of the influence of the power of race, sexual preference, physical ability and age to divide teachers from students, and students from one another. Teachers possess

authority by virtue of greater knowledge and experience. She cites similarities between Freirean and feminist pedagogies which include:

- Coming to a consciousness of oppression (consciousness raising).
- A commitment to end that oppression.
- A desire for social transformation and social justice.

Weiler (1995:29-30) examines the transformative potential of education to achieve social justice. For her, consciousness-raising involves examination and discussion of women's experiences and feelings of sexuality, work and family. This is done by women sharing information in a leaderless group. Reliance on feeling and experience in consciousness-raising groups is fundamental to the development of a feminist knowledge of the world; this can be a basis for social change. Women's accounts of their lives have forced reconceptualizations of sexual relationships and the nature of power. Feminists emphasise the illegitimacy of men's power over women and are aware of the power of women over one another (Weiler 1995:35; Holland et al 1995:277). Weiler (1995:38) hastens to caution readers about the assumption that sharing of experience will generate solidarity and a theoretical understanding based on a common women's standpoint. Tensions which arise from different life histories, from privilege, oppression and power as they are lived out by teachers and students in the classroom, need to be recognised and validated.

In order to change power relations, one needs to first understand power relations, hence the need for consciousness-raising, according to Holland et al (1995:277). They assert that feminist policies which empower young women are favoured over masculinist policies that reaffirm sexuality as an area of control. Holland (1995:287) states that feminists play methodological, moral and political roles in struggling to ensure that as much of women's experience as possible can be grasped and that appropriate policy recommendations be drawn from their experience.

2.7.6.3. Feminism and Education

A review of the history of feminism in education suggests that different feminisms have prioritized different aspects of women's struggle against oppression. Weiner (1994:52)

identified three perspectives of feminism which, in her opinion, had the greatest impact on education, namely:

- (i) Liberal feminism which she called “Equal Rights in Education”.
- (ii) Radical feminism which she termed “Patriarchal Relations”.
- (iii) Marxist feminism which she referred to as “Class, Race and Gender: Structure and Ideologies”.

Weiner (1994) agrees with hooks (1984) who argues that feminist thought is always “theory in the making” when Weiner says that “amoeba like” changes in feminism due to the shifting nature of terminology make it always open to re-examination and new possibilities. As a theory in the making, which is constantly influenced by ideological and political value positions, feminism is resistant to any single, dominant discourse.

According to Weiner (1994:53-54), the “first wave” women’s movement, at the beginning of the nineteenth century, resulted in patterns which led to greater access of women to education and professions and to wider employment in general. This marked the beginnings of liberal feminism in education. The “second wave” of the women’s movement, which began during the 1960’s, generated ideas which characterize radical feminism. Radical feminism is characterized by the use of the concept of “patriarchy” to analyse principles which underlie women’s oppression in general and their oppression in the field of education in particular. An assumption of radical feminism is that in order for women to become conscious of male domination, they would have to undergo a process of “women-focused re-education”. Radical feminism in the 1970’s and 1980’s addressed the need to create a knowledge base that illuminated issues which concerned women, for example, women’s health, abortion, male violence and reproductive rights.

During the 1980’s, socialist feminists attempted to incorporate ideas about women’s oppression and patriarchal relations into classic Marxism, while focusing on the complex interplay between gender, culture and society (Segal 1987). Hekman (1990:12) sheds more light on the development of feminism in education by discussing the development of postmodern feminism towards the end of the 1980’s. Postmodern feminism aimed to deconstruct philosophical claims generally by questioning “foundationalism and

absolutism". Hekman adds that in terms of education, postmodern feminism challenges one of the defining characteristics of modernism, namely, the male-centred (andropocentric) definition of knowledge.

Arnot et al (1987) assert that the different feminist perspectives have generated different research questions for education. Liberal feminists have focused on research studies about girls' underachievement in the schooling system and in education in general. They have highlighted, among other things, sex-stereotyping in optional subject areas and in careers advice, the bias in the way assessment tasks are set and marked and sex differences in school staffing patterns. Liberal feminists aim to work within the current educational system to achieve change in terms of equality of educational opportunity rapidly and with minimum disruption. Liberal feminist educators utilize terms such as access, choice, disadvantage, under-representation and underachievement, and produce a discourse which, Weiner argues, is unlikely to make too many demands on the (largely male) educational status quo.

Radical feminists concern themselves with the male domination of society and the nature of school knowledge. According to Weiner (1994:67), they examine the patriarchal process of schooling and power relations between the sexes in the classroom. They are unlike liberal feminists because they prioritise the role played by sexuality in the oppression of women and girls in the schooling process. Radical feminist educators assert that the influence of heterosexuality and hierarchy combine to create the dominant male/subordinate female dualism. They contend that educators can re-educate society into non-sexist behaviours and practices. This view holds that education can only be transformative if it shifts the school knowledge and educational culture from its male baseline. Radical feminist educators examine the links between male power, sexual violence, masculinity and femininity. The frequently used terms within radical feminist discourse, according to Arnot et al (1987), include patriarchal relations, domination and subordination, oppression and empowerment, woman and girl centredness; these terms signal radical feminists' fundamental criticism of educational practice.

Griffin (1985) asserts that Marxist feminists examine the degree to which education and schooling have produced sexual inequality. These researchers focus on how gender and power relations are continually reproduced in schooling and the formation of gendered class grouping in the schooling context, for example, the process by which working class girls and boys become working class women and men. The Marxist feminist discourse is characterized by the following frequently used concepts: capitalism, production, reproduction, class, gender and patriarchal relations. Weiner (1994:68) argues that the Marxist feminist discourse has not been influential for classroom practitioners because it campaigns for change in the broader society.

Black feminists have severely criticized the endemic nature of racism and sexism in schooling. Brah et al (1985) assert that instead of looking to white teachers' explanations of the general underperformance of black girls and women in education based on a "clash of cultures", black feminist educators expose the pathologization of black family culture. The terms which are utilized in black feminist discourse include antisexism, antiracism, black disadvantage, institutional racism and stereotyping.

Jones (1993:158) calls for a femininity approach to classroom research to shift away from the "disadvantage" focus. Jones suggests that a more progressive pedagogy could lead to studies which examine ways in which girls are *variously* positioned in the classroom. Walkerdine (1990) adds to this discourse by alerting educators to the "fiction" of the progressive classroom – of freedom, democracy and safety - where there is a denial of hierarchical power relations and inequality.

Lather (1991:82), whose interest lies in postmodernism and poststructuralism, calls on the female educator/researcher to become "self-reflexive". She also argues for the displacement of hierarchies as the ordering principle of research. (In the next chapter, I discuss my attempts to minimize the hierarchical principles inherent in educational research by engaging co-researchers to participate in the fieldwork and the analysis of data.) For Lather, researchers and educators need to constantly think against themselves as we "struggle towards ways of knowing which can move us beyond ourselves". Postmodern and

poststructuralist feminists encourage the promotion of a critical awareness of their positioning within educational discourses.

Delamont (1990) in Youdell (2005:250) suggests that schools serve not only to enforce dominant sex and gender roles but that they do so in ways which are more rigid than those present in wider society. Youdell also cites Epstein and Johnson (1996) who emphasise the uncomfortable relationship between schooling and sexuality, where schools and sexuality are constructed as fundamentally discrete, and teachers and students are constructed as intrinsically non-sexual. This, according to Nayak and Kehily (1996), in Youdell (2005:250), serves to perpetuate homophobic practices and the ongoing constitution of heterosexual masculinities in the school.

Literature exhorts feminist educators to translate explanations for gender relations into transformative action in the classroom. Class, race, gender and sexuality are integral structures in the school environment, according to Holland et al (1995:xiii). Taylor (1995:3-6) asserts that the school may be used as the site for reproducing gender relations or the site for intervention and change.

For Maher (2001:20-30), feminist engagements allow for issues of social power and identity in the classroom to be raised. This paves the way for the particular nature of gender relationships, which are encoded in progressive education, to be uncovered. Feminist theory demands that the essentialized dichotomies between female and male be deconstructed and that the scientifically based ideas of “normal behaviour” as a means of promoting and controlling the development of docile citizens, be challenged.

Maher (2001:20-30) calls for a power analysis in the classroom in order to see inequalities as a matter of social constructions, rather than fixed identities. Maher’s power analysis is significant in my study, because HIV/AIDS intervention programs which are blind to gender, class, race and culture, will be ineffective. Agendas for HIV/AIDS prevention efforts risk reproducing these blindnesses if they ignore issues of inequality.

Feminist St Pierre (2001:141) explores the value of theory in producing people (as opposed to people producing theory) by re-stating Butler's (1995) question: *how is it that we become available to a transformation of who we are, a contestation which compels us to re-think ourselves, a reconfiguration of our "place" and our "ground"?* She reflects on Butler's view about deconstruction, which is not to negate or dismiss, but to call into question and redeploy that which was previously not authorized. For Butler (1995) cited in St Pierre (2001:151) agency is to be found at junctures where the network of power/discourse becomes open to resignification. These feminist insights into how a subject can be reconstituted have significance in my study because I created spaces for the co-researchers (who were my students) to reflect on sexuality among youth, through the process of conducting research, using the school as the main research site. My research design enabled them to exercise power in creative ways which resulted in their enablement to critically re-interpret data as a result of the reconfiguration of their "ground".

2.8. Conclusion

In part A of this chapter, I have discussed the incidence of HIV/AIDS in Southern African Countries and in South Africa to provide a context for my study. I have cited research to explain risky sexual behaviour among young people. A critical review of the link between gender relations and risky behaviour, which exacerbates the spread of HIV/AIDS, was presented in section 2.5.1. I explored the development of sexuality education (in section 2.6) and expressed the potential for this type of intervention to serve as a tool for transforming existing gender relations. This was followed by a discussion of the theories for prevention of HIV/AIDS, in part B. This section (2.7) detailed psychological theories and ways in which they were selectively applied to my research design.

In the mode of reflexive inquiry, I offered a critique of the psychological theories. Their strengths and weaknesses were analysed. Among their strengths were the in-depth analyses of ways in which intra-individual factors impact on behaviour, and the recommendation for the use of elicitation research and population specific intervention programs. The tenets of the Health Belief Model (in section 2.7.3) were used to assist me to achieve a contextualized understanding of the perceptions of risky sexual behaviour among the

respondents in my study. The weaknesses of the Theory of Reasoned Action and the Information, Motivation and Behavioural Skills Model for HIV/AIDS prevention included the highly experimental methods which were used in clinically measuring behaviour, as well as the ways in which issues of power, gender, race and class were neglected. This necessitated the adoption of a theory which would address a gendered understanding of HIV/AIDS prevention in an environment where gender interacts with class and race issues and disempowers women. I found that the discourse on HIV/AIDS prevention, which suggests that education should be explored in a context in which gender power relations are deconstructed, as part of a feminist theoretical framework, applicable to my study. The understanding of power relations and the transformative potential of education to achieve social justice are central themes of the feminist theory which informed my analysis of data. It is for these reasons that I used feminist theorizing in education specifically, and, to a lesser extent, psychological theories, to inform my study.

In the next chapter, I examine how young people at schools can be empowered to generate knowledge about HIV/AIDS among adolescents, using feminist research methodology. I do this in response to the central research question of this study which is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

CHAPTER THREE

Research Methodology

Enabling Young Researchers: Ignition, Co-drivers, The Checkered Flag and Beyond

3.1. Introduction

My study is informed by feminist research methodology, as well as participatory action research. Through an analysis of feminist research methodology, I found that its value lay in the theoretical understandings of tensions which arose from different life histories, from privilege, power and oppression as they are lived out by educators and learners in the classroom. Feminist policies validate, recognise and attempt to understand power relations, then work towards changing power relations.

I begin this chapter by a discussion of qualitative and quantitative modes of inquiry, and I provide a rationale for electing to apply mainly qualitative methods to my work. I then go on to justify my choice of methodology by engaging separately with themes in the two main frameworks which I use in this work: feminist research methodology and participatory action research. This is followed by a discussion of the feminist critique of the notion of empowerment, as it is promoted in liberatory pedagogics. A discussion of feminists' perspectives about using "student voice" in the name of ending oppression of silenced groups, is presented. The research site, the research participants, as well as the training schedule for the co-researchers, are described. I conclude this chapter by repeating my call for engaging youth in researching issues like HIV/AIDS, which directly affect their lives, in direct response to the central research question asked in this study, which is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

3.2. Qualitative and Quantitative Modes of Inquiry

Before I discuss my choice of methodology, I present the broad descriptions which underpin qualitative and quantitative inquiry. I refer to Smith and Glass (1987:25), who caution researchers about using methodology as dogma. For Roberts (1996:245), both qualitative and quantitative methodologies have evolved out of different needs. While the quantitative paradigm aims to provide data about statistically significant correlations, the qualitative approach attempts to glean an understanding of the intentions which underlie human behaviour. The quantitative researcher is positioned as a passive observer and an outsider to the research. Feminists have argued that as a researcher, one brings one's own values, experiences and bias into the research situation; therefore they assert that the researcher could not claim a value-free, neutral position in any research situation.

I used quantitative methodology to a limited extent and qualitative methodology more extensively to enable me to work with highly adaptable instruments, which made it possible for me to immerse myself in the social setting to an extent, and to develop a relationship of trust and respect, especially with the co-researchers. I was an active participant in and an "insider" to the part of the research which involved training the co-researchers.

The co-researchers became what Edwards (1999) calls *deep insiders* to the research when they conducted interviews with people of their own age group, and took photographs to address the research questions. In contrast with "get in, get the data, get out" research, deep insider research offers the benefit of the researcher possessing an awareness of body language, semiotics and slogan systems which operate within the cultural norms of the research participants (Edwards, 1999). There is no need for the deep insider to learn the native talk – the lingua franca - of the research participants. The co-researchers, as deep insiders, were able to share meanings through idiosyncratic local slogans and body language, despite the fact that they were not communicating with the research participants as colleagues, but were observers and questioners of the research participants.

The notion of deep insider researchers applied to my study at two levels. At the first level, I view myself as a deep insider researcher because, as the main researcher, I designed the

study around research questions and sub-questions which I formulated. The data collection instruments were determined by me. In addition, I determined the general strategies to be employed during the process of training the co-researchers. At the second, and perhaps more significant level, were the co-researchers. They were deep insiders in so far as they responded to the research probes by modifying the interview schedules, selecting the interview candidates and conducting the interviews. They selected the interview sites and chose the probes (section 3.3) which directed the interviews. The co-researchers also administered the questionnaires. The research participants interacted exclusively with the co-researchers. A major part of the generation and analysis of the data through the use of photo-voice was undertaken by the co-researchers.

Seale (1998:207) says that the implied goal of an objective social science is seen as a sham, brought about to hoodwink respondents into exploitative social relationships. He cites Oakley (1981) who indicates that feminists can respond to this “sham” by ensuring that the relationship between the interviewer and interviewee is non-hierarchical. When the interviewer invests his or her identity into this relationship, an element of trust is forged. This trust makes it possible for the respondents to speak about more intimate matters than they would otherwise, and to give a candid account of their experiences instead of a distorted version. It is with this in mind that the co-researchers, who were the interviewees’ peers, were engaged to conduct the interviews.

The feminist model of qualitative research allowed me to look at women's relationships and their interactions with others, to reveal aspects of male control in the social construction of sexuality. Olesen (1994:162) says that feminist research raises awareness of the exclusion and silencing of women in many realms, and conceptualises this as problematic. She asserts that feminist research guards against replicating old disciplinary practices which contribute to women's subordinate status. The feminist mode of qualitative inquiry draws attention to power relations and the need for a researcher to be reflexive about her/his views. Hall and Stevens (1991:16) add that feminist research methodology problematises taken for granted situations; it allows for difficult and uncomfortable

questions about women's contexts to be raised, and it stresses the importance of subjectivity.

Olesen (1994:166) states that feminist qualitative work assumes the intersubjectivity between the researcher and research participants, and the mutual creation of data. The research participants, according to her, are always doing research since they, along with the researcher, continually construct meanings that form data which will be interpreted. The feminist qualitative models are of great relevance to my work since they "facilitate work where the participants become researchers, in the interests of empowering the participants to do research for themselves on issues that are of interest to them". *This model is used because it does not view the training of participants to serve as traditional field workers, but instead, to work as core-researchers, which, in my project, translates as co-researchers.* The rationale for engaging co-researchers necessitates a closer analysis of feminist qualitative research methodology.

3.3. Feminist Qualitative Research Methodology

Skeggs (1994a) views the following three areas as being central to what constitutes feminist research methodology.

(i) Ontology: what is knowable?

In my study, I explore what is knowable in terms of, firstly, the critical question which informs the study, and which is: how young people can become enabled to conduct research about risky sexual behaviour. Secondly, I explore what is knowable in terms of research probes which formed the organizing frame for the co-researchers to investigate, and which are:

- *What are young peoples' perceptions of sexuality?*
- *What are young peoples' views of their knowledge and skills about HIV/AIDS?*
- *How do young people relate to gender perceptions about sexuality?*
- *Why do young people engage in risky sexual behaviour?*

The co-researchers conducted several research activities; the findings of these activities provided the impetus for me to respond to the following two sub-questions:

1. *To what extent do young people respond differently to peers than to adult researchers?*
2. *What impact does participating in an HIV/AIDS-related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

(ii) Epistemology: how do we know what is known and what is the relationship between the knower and the known?

What becomes known depends on the relationship between the knower and the known. McHoul (1998:31-34) interprets Foucault's epistemic viewpoint to be that whatever can be known, is both permitted and constrained by representational possibilities at that moment in time. Representational possibilities are shaped by who wants to know. An adult, who wants to know about the sexual decision-making of young people may not be able to obtain candid information because of the barriers created by the intergenerational gap. It is for this reason that I trained secondary school learners to serve as co-researchers (and become the knowers) to solicit information about young people's sexual decision-making (what is known).

(iii) Methodology: how do we get to know?

Through the engagement of young people to research other young people, we can get to know about their sexual decision-making. I refer to these young researchers as co-researchers¹⁸. Skeggs (1994a) asserts that the way in which these questions are answered during the research process will reveal the theoretical position held by the researcher. Skeggs (1994b:77) asserts that feminist research begins with the premise that the nature of reality in western society is unequal and hierarchical. Blaikie (1993) cites the following quotation about feminist science by Fee (1986:47):

One in which no rigid boundary separates the subject of knowledge (the knower) and the natural object of that knowledge; where the subject/object split is not used to legitimize the domination of nature; where nature itself is conceptualized as active rather than passive, a dynamic complex totality requiring human cooperation and

¹⁸ I trained 10 secondary school learners, whom I refer to as co-researchers, to solicit information about sexual decision-making among young people, who shared their age group.

understanding rather than a dead mechanism, requiring only manipulation and control. In such feminist imaginings, the scientist is not seen as an impersonal authority standing outside and above human nature and concerns, but simply a person whose thoughts and feelings, logical capacities, and intuitions are all relevant in the process of discovery.

Feminist research challenges the legitimacy of research that does not empower oppressed, and otherwise invisible groups. Brunskell (1998:40) says that feminist work is always based on a search to identify power relations within a society in which males dominate and women are subordinate. My study is designed to reform power relations, not only those between women and men, but also those between the researcher and the researched.

Feminist theories highlight power differences between the researcher and the researched, which may be summarised as follows:

Table 3.1: Power differences between the researched and the researcher (Adapted from Holland 1995:284)

Researcher	Researched
More educated	Less educated
Older	Younger
Higher social class	Lower social class
Better command of language	Poorer command of language(especially among young people when they discuss sexual matters)
Powerful	Powerless

These differences in power (alluded to in table 3.1) can inhibit disclosure by the researched and can compromise that which is knowable. I refused to "research down" by soliciting information from younger, disadvantaged, marginalised groups. I elected to dissolve these barriers to some extent by involving learners in this work. I trained learners to collect a part of the data. They also contributed to design of some of the instruments. This exercise was also aimed at empowering learners to research sexual behaviour of young people.

Usher (1996) discusses the emancipatory element of research which should empower all participants. She lists some of the principles of feminist research which include:

- (i) *The acknowledgement of the pervasive influence of gender as a category of analysis and organisation.*

My study involves a detailed analysis of perspectives of male and female participants about adolescent sexuality.

- (ii) *The deconstruction of traditional commitments to truth, objectivity and neutrality*

Patti Lather (1992:125) explains that modernistic assumptions of truth, objectivity and "correct readings" are positioned as ensnared in phallogentric rationalities by postmodernists. Van Manen (1992:2-4) adds that commitment to truth, objectivity and neutrality are the cornerstones of natural sciences. Van Manen distinguishes between human science scholarship and natural science scholarship. He asserts that the preoccupation of natural science with objective methods is "antithetical to the spirit of human science scholarship". While natural science focuses on the "objects of nature", "things" and the "way in which objects behave", human science focuses on "persons" that have a "consciousness" and "act purposefully in the world". Human sciences value the meaning of lived experience over factual truths. The human science researcher is an "insider" who influences the research process, unlike the researcher of natural science who claims to be value-free and neutral in the research process. Feminists argue that no researcher practices research outside of her or his system of values and that no social science method can ensure that knowledge is produced independently of these values.

- (iii) *The utilisation of a multiplicity of research methods*

A variety of methods and instruments were used to gain an insight into adolescent sexuality in my study (refer to table 4.1, 4.2 and 4.3 in Chapter 4).

- (iv) *The involvement of the researcher and the people being researched.*

My study required collaboration between the researcher and the research participants, to the extent that some of the participants served as co-researchers.

- (v) *The deconstruction of the theory/practice relationship*

Participatory Action Research (PAR) methodology, used in my study, required the constant influence of theory on practice; practice in turn shaped the theory which continued to influence practice in a cyclical transformation.

The link between participatory action research and feminist methodology is that both involve collaborative inquiry and are emancipatory in nature; both **transform research participants into researchers** and this is the goal of my study.

3.4. Participatory Action Research (PAR)

Brown et al (2003:62) speak to the desire to shift research into a democratic dialogue, in which the explicit goal of the research is to respond to the quests/challenges of communities with a view towards progressive action. They assert that this “commitment to community” is one of the reasons why several researchers have incorporated feminist theories into participatory or collaborative forms of knowledge.

According to Schratz and Walker (1995:123), there is often a temptation to view social research as a “special case, deficient in its grip on objectivity when concerned with science”. They go on to state that the pursuit of scientific objectivity does not offer any tangible solution to problems which arise in social research. The adherence to scientific objectivity is largely defined by powerful interests within scientific and research communities, positioning it directly in the political process. Schratz and Walker further argue that scientists are reluctant to allow public participation in research because this would threaten to dismantle the social structures and power relations which make the scientific enterprise possible. They believe that the collapse in faith in objectivity as a key to science, by the general public, opens avenues to new approaches in social science which is characterized by subjectivity. For them, research is essentially a social activity and cannot be removed from social life. They advocate the use of theory in ways which extend our capacity to see the world differently and to act differently in order to bring about positive social change.

Schratz and Walker (1995:14) assert that reflexivity is the main focus of a researcher who is engaged in democratic research. They contend that the purpose of democratic research is not to tell truths about the world, but instead, to open up spaces which allow us to think about how our worlds may be changed. They state: *if we are to find ways to make research democratic then we have to find ways to break the mould that confines research to a highly*

elected group of specialists.... This is in keeping with the views of Riecken et al (2004) who assert that the traditional concepts of research are based on the perception that research is the implementation of specialized forms of knowledge held and used by an educated elite. For those who stand outside the periphery of such know-how, research is seen as the domain of experts.

Riecken et al (2004) conducted research on two classes of Aboriginal youth and their teachers for the purpose of researching health and wellness among youth. They also argued for the ethics of voice in qualitative research. Their findings show how the methodologies of participatory action research can simultaneously democratize and demystify research as a means for understanding and changing the world. Their work is particularly valuable because they are reflexive about the merits of participatory action research. They are critical about the goal of participatory action research which claims to actively involve research participants as co-equals, because they caution the researcher about power differentials which cannot be negated. The danger of participatory action research, according to these researchers, is that by defining others as marginalized or silenced, it subjugates at the same time that it creates the we/them dichotomy.

Despite these criticisms, the participatory action research methodology was used by Riecken et al (2004) to inform their study. The reasons were that participatory action research

- is critical of conventional research methods;
- has the ability to dissolve hierarchical relationships between the researcher and the researched, to some extent; and
- is open to multiple forms of representation.

These are among the reasons why elements of participatory action research (PAR) increasingly influenced my work. O'Brien (1998:6) situates action research in the paradigm of praxis. He states the following on action research:

That knowledge is derived from practice, and practice informed by knowledge, in an ongoing process, is a cornerstone of action research.

He cites four streams of action research viz. Traditional Action Research, Contextual Action Research, Radical Action Research and Educational Action Research. I locate my study in Contextual Action Research and the Radical Action Research streams. Contextual action research stresses that participants work as project designers and co-researchers. In my study, a group of learners were trained to serve as co-researchers. Radical action research focuses on emancipation and the overcoming of power imbalances. It includes tenets of PAR and Feminist Action Research which strive for transformation by strengthening marginalised groups in society.

Haworth et al (1999:1) quote Donaldson and Sanderson on the collaborative partnership in PAR:

The work of collaboration differs from solo work because it is accomplished, not first in one person's mind, and then the other's, but on the loom between them, in the centre of their joint space ...

In order to operate our "loom", I had to, at times, transfer ownership for the study to the group of co-researchers. The delineation between my role, as the researcher, and the role of the learner researchers, as co-researchers, became blurred. Although the learner's role of co-researcher dominated at times, the original identity of the learner continued to influence her/his actions.

A pillar of PAR is trust; a mutual trust between myself and the co-researchers had to be established. This was not difficult because the co-researchers were volunteers who displayed a genuine interest in the work. They asked for advice collectively and individually, and readily offered constructive criticism especially after they listened to the first few interviews. It was evident that as the project progressed, the co-researchers became increasingly relaxed and felt more confident. This type of methodology was in keeping with what Haworth et al (1999:2-3) foreground as issues of vision and voice, where the researcher has a particular vision for the study (theory) which must be balanced with voices of the research participants (practice).

Sessions for joint reflection between the co-researchers and I were held in a shady, grassy patch of the school garden. The fact that neither myself, nor the co-researchers, was in our "own territory" helped to balance the roles in this collaborative venture.

PAR, also known as collaborative inquiry, emancipatory research and action learning, are all variations of the same theme. PAR involves a group of people who identify a problem, take action to resolve it and evaluate the success of their efforts. If the evaluation reveals unsatisfactory results, new, improved actions are taken to try to resolve the problem again.

According to O'Brien (1998:2):

Action research ... aims to contribute both to the practical concerns of people in an immediate problematic situation and to further the goals of social science simultaneously. Thus, there is a dual commitment in action research to study a system and concurrently to collaborate with members of the system in changing it in what is together regarded as a desirable action. Accompanying this twin goal requires the active collaboration of researcher and client, and thus it stresses the importance of co-learning as a primary aspect of the research process.

The primary goal of PAR in this study, is turning the people involved into researchers. I trained volunteer learners to participate as co-researchers to facilitate capture of data and to assist in the design of data collection instruments. PAR has a social dimension involving research in the real world situation to solve real problems. I sought to use PAR as a methodology to excavate silences which surround HIV/AIDS, especially among young people. To get into the hearts and minds of learners, I used people who were already there, i.e. learners themselves.

3.5. Relationship between PAR and Feminist Research Methodology

Participatory action research and Feminist research methodology share several goals, which are examined in this section.

3.5.1. Feminist research and principles of PAR

I locate my work in the following six principles of PAR, cited by Winter in O'Brien (1998:4), and I expand on the ways in which some of these principles are related to feminist research. These principles are *reflexive critique* (section 3.5.1.1), which involves a critical

reflection on the research processes and issues, while fully cognizant of the biases which a researcher brings into an enquiry; *dialectical critique* (section 3.5.1.2), as it is influenced by rules which govern the limits and forms of expressibility, conversation, memory and reactivation; *collaborative resource* (section 3.5.1.3), which explains how the co-researchers and I worked together to generate meaning, *risk* (section 3.5.1.4), which is born out of doing research differently from previously established ways; *plural structure* (section 3.5.1.5), which points to the need for a multiplicity of data collection strategies, commentaries and critiques; and *theory, practice and transformation* (section 3.5.1.6), which explains how theory and practice inform and refine each other during the process of transformation. A more detailed discussion of these PAR principles and their relatedness to feminist theory follows.

3.5.1.1. Reflexive critique

Reflexive critique allows people to reflect on processes and issues, and to make explicit the interpretations and assumptions on which judgements are made. Haworth (1999:4) suggests collective and solitary reflection to stimulate creative solutions to problems. The co-researchers maintained journals to record their thoughts as the project evolved. In this way, solitary reflection was facilitated. Regular meetings were held with the co-researchers to discuss, advise and critique issues involved in the research during collective reflection sessions.

Feminist researchers like Olesen (1994:158) are aware of the charge that a researcher brings her own bias to an inquiry. She adds to the view that a researcher should be reflexive about her project by fully disclosing her views, thinking and conduct during the project. Scheper-Huges (1992:28) makes the following comment about the researcher in the field:

We cannot rid ourselves of the cultural self we bring with us into the field any more than we can disown the eyes, ears and skin through which we take in our intuitive perceptions about the new and strange world we have entered.

Olesen (1994:158) encourages reflexive critique by cautioning researchers that if they do not take into account the often hidden structure and relations of oppression of the researched, there is the danger that the researcher may unwittingly replicate androcentric

perspectives. For Usher (1996) the reflection on issues of power in research (whose research, research for whom and research in whose interest) as well as the need to address the emancipatory element of educational research by ensuring that research is empowering to the research participants, are vital elements of feminist research. Cohen et al (2000:35) add to this view by alerting researchers to the question of the legitimacy of research that does not empower oppressed or invisible groups. For them, a feminist research agenda emphasized issues of empowerment, voice, emancipation, equality and the representation of marginalized groups.

3.5.1.2. Dialectical critique

Social reality is validated consensually through shared language. In order to understand how dialogue can validate social reality, I turn to Foucault in McHoul (1998:30). He focuses on how the set of rules at a given period in a society defines:

- The limits and forms of expressibility.
- The limits and forms of conversation.
- The limits and forms of memory.
- The limits and forms of reactivation.

For Foucault, a discourse is whatever constrains and whatever enables writing, speaking and thinking within historical limits. His argument is that whatever we can imagine, let alone put into practice, is both permitted and constrained by the representational possibilities which we can use at a particular time. Foucault emphasises the material set of conditions which enable and constrain the socially productive imagination.

In my work, I learned that statements were not fixed, unchanging facts, but that certain rules governed their functioning. I was cognisant that rules governed what it is possible to know. In my training of the co-researchers, I emphasised that statements function in relation to power relations, to which Foucault alluded.

3.5.1.3. Collaborative resource

The participants in a PAR project are co-researchers. This principle presupposes that each person's ideas are equally significant to create interpretive categories for analysis. For

O'Brien (1998:5): *It strives to avoid the skewing of credibility stemming from prior status of an idea-holder.*

I do not claim that the co-researchers were equal partners in my project, nor do I claim that all views were accepted as equally valuable. I am aware that the different forces which shape the co-researchers' experiences influence their contributions to this work. In my view, if I were to elicit responses directly from learners and claim that this is a way of addressing oppression of marginalised groups, I would be underestimating the (teacher/learner) power relations in the structure of a school. To expect that learners in a school will readily reveal their current and past sexual activities to a teacher/researcher (myself), even when they are encouraged to "speak", grossly under-estimates sexual politics in the school. I sought to minimise the influence of power relations and sexual politics by training learners to work as co-researchers and elicit responses from other learners.

Liberatory pedagogics exhorts us to encourage marginalized groups to make public what is personal and private, but feminists like Luke (1992:37) argue that this does not alter the gendered structural divisions which inform what people say. Feminist research is critical of giving "voice" to those who are commonly silenced, for example, working-class girls and boys, to address class oppression; girls and boys of different racial and ethnic backgrounds, to address racial oppression; girls in general, to address gender oppression. To address that oppressed triad: race, class and culture, by opening up a forum for oppressed people to express themselves, is seen as an "add the oppressed and stir" strategy, which, according to Olesen (1994:159) and Luke (1992:36) do not redress issues of inequity. Feminists like Luke argue that to see this as a counter-hegemonic, emancipatory move against systemic class culture reproduction, is to ignore the "epistemological horizon" where the "masculinist logic" of the human male is firmly inscribed.

Luke (1992:35) asserts that students be given the analytical tools with which to understand the forces that shape their experience; the first step of which is encouraging students to articulate their experiences and sense of self.

3.5.1.4. Risk

PAR changes previously established ways of doing research. In my work, the handing over of parts of the project to co-researchers, involved the risk of co-researchers driving the project in ways which I might not have intended. I chose to work with co-researchers because I viewed the learners' direct involvement in the research process as a way of allowing them to transform and to become agents of transformation in a society which is plagued by HIV/AIDS. Middleton (1993:142) also emphasises personal and professional risks which one faces when using feminist research pedagogy. Issues of subjectivity and reliance on "personal experiences" are antithetical to scientific approaches. This concern is shared by Olesen (1994:163) who questions whether "experience is an untenable focus of feminist investigation when it is continually mediated and constructed from unconscious desire". Middleton suggests that risks can be reduced by giving our practice a strong theoretical base.

3.5.1.5. Plural Structure

The research embodies a multiplicity of views, commentaries and critiques, leading to multiple possible actions. Several instruments (photographs, reflective diaries, interview schedules, questionnaires) were used to generate various views about risky sexual behaviour among young people in my study. The report which is generated is not a factual, final conclusion; instead it supports ongoing discussion among collaborators.

3.5.1.6. Theory, Practice, Transformation

Peoples' actions are based on theoretical assumptions and hypotheses in research settings. When the results of peoples' actions are interpreted, theoretical knowledge is enhanced. Theory and practice are intimately intertwined during the process of transformation.

3.5.2. Roles of Participants in PAR

Haworth et al (1999:5-9) highlight certain responsibilities in PAR projects. I find their analogy of a racing car event in describing the roles of the participants useful, and I apply it to my study. The elements of collaborative action research include:

Ignition

Who generates the idea?

Hamilton cited in Haworth et al (1999:5) argues that the research participants are the ideal people to start the vehicle of action research. In my opinion, this is not necessarily the best option. The age, degree of maturity of the participants, as well as the nature of the issues under investigation, may not create the opportunity for research participants to kick start the process of action research. Secondary school learners who were the participants in my study had time constraints and often lacked the ability or opportunity to articulate their ideas in a way that could have sown the seeds of a research project. In this study, I formulated the critical questions which drove the vehicle of action research. Some of these questions arose out of a critical review of literature; others arose out of the co-researchers' visual images of their perceptions of sexuality.

Co-drivers

How can we work collaboratively, so that we all benefit from this work?

The planning, observing, acting, reflecting and re-planning cycle required involvement and commitment of all participants. During these processes, the co-researchers became increasingly enabled to conduct research activities; this signaled interventionist action. The co-researchers and I made ourselves available for each of the reflective sessions which were held. The co-researchers were not available outside school hours. I met with them during their "free" periods and during the lunch breaks. The consistent contact and support was essential for successful navigation of the PAR cycle. The co-researchers (co-drivers) selected the interviewees. They determined the duration, time and venue for interviews. During this part of the research project, I (the driver) allowed the co-drivers to plot the direction of the course of the project.

The Checkered Flag and Beyond

Who will report on the project?

The final research report included the co-researchers' reflective journals. Although the co-researchers participated in a major part of the work, I had the overall view of the work as it evolved; the final report was therefore written by myself. Collaboration in the research process is seen as an emancipatory move against class and culture reproduction. Encouraging and empowering silenced, marginalized groups is a step in the direction of

decreasing power differentials between the researched and the researcher. Feminists are critical about the concept of empowerment and they caution researchers to be aware of the power differentials that can be perpetuated in the name of empowerment.

3.6. Empowerment or oppression?

Feminists critique the notion of empowerment which assumes that the agent of empowerment has greater power than those who are to be empowered. Oppressive power differentials emerge. In the context of a school, a teacher-researcher, like myself, will be constrained to empower learners because of the hierarchical structures which exist. Feminists encourage researchers to reflect on their internalised oppressions of classism, racism and sexism, and to understand how these generate views which are different from those of research participants.

Gore (1992:56) observes that the term "empowerment" presupposes the following:

- (i) an agent of power, for example, a teacher
- (ii) someone to empower, for example, a learner
- (iii) the notion of power as property
- (iv) some kind of desirable end state

She explains that teachers are constrained to empower learners because of their location in a patriarchal institution and their social status. I concur with this view. It is precisely for this reason that I engaged co-researchers to work with learners.

Orner (1992:99) asserts that power differentials are highlighted when the empowering authority, the teacher (or researcher, as is the case in my work), who knows the study, attempts to empower students (or research participants), who do not know the study. A teacher or a researcher who wants to free students from the oppression of being silenced, cannot her/himself be free from her/his own learned or internalized oppressions of, among others, classism, racism and sexism. Orner's view made me reflect on my understanding of the research participants' motivation, behaviour and experience, as constrained by my

brown skin¹⁹ and middle-class privilege. In addition, my institutional role as an educator, and my role as a researcher, would always weight my views differently from those of the research participants.

Researchers like Gore (1992:58) do not view power as possessed by an individual; they see power as something which circulates and is never appropriated as a commodity. Individuals, they say, are vehicles of power, not its point of application. Gore's (1992:62) analysis of the Foucauldian concept of empowerment is that it seeks to exercise power in an attempt to help others exercise power.

Ellsworth et al (1989:307) explain that *the vision for empowerment is for "human betterment", for increasing the possibilities of making oneself present as part of a political and moral project that links the production of meaning to the possibility of human agency and transformative social action*. This serves as an essential point in my study which evolves around an enabling methodology, since it seeks to enable the co-researchers to work towards transformative social action.

Gore (1992:67) says that feminist pedagogy embodies the concept of power as energy, capacity and potential, not as domination. She adds that power is productive, not repressive. The problem arises when the agent of empowerment assumes to be already empowered, and therefore locates her/himself apart from those who are to be empowered. Arrogance can underlie the claim of what the empowered (us) "can do" for the disempowered (them). She exhorts researchers to acknowledge that our agency has limits; that we might incorrectly assume what will be empowering for others. Orner (1992:87) questions whether the attempt to empower students to articulate their voices is a controlling one, that is, one which demands verbal collaboration.

¹⁹ I am a South African of Indian descent

Gore (1992:67) and Orner (1992:99) call for the teacher-researcher in the school to be reflexive when "empowering" learners. Bright (1987:98) gives the following account of power in the school:

Discussion of the student/teacher relationship must include a frank look at the power of the teacher. Feminists have often avoided the topic of power, preferring structures and situations where power is shared ... regardless of the extent to which a teacher tries to minimise her power, it cannot be completely given away.

This implies that power cannot be completely shared between the teacher and student. A teacher, who serves the role of researcher, needs to be conscious of these power relations.

Shrewsbury (1987:8-9) adds the following thoughts to the notion of power:

Empowering pedagogy does not dissolve the authority or power of the instructor. It does move from power as domination to power as creative energy ... a view of power as creative community energy would suggest that strategies be developed to counteract unequal power arrangements.

The questions which arose in my work were:

- How could I address power imbalances between myself, as a teacher and a researcher, and the students, who were the research participants?
- How could the negative effects of power imbalances be transformed into positive ones?

These questions, together with the influence of the views alluded to by these feminist researchers have been instrumental in my decision to train learners to work as co-researchers, to, in part, counteract unequal power arrangements. Democratic calls for social change from "the ground up" and the need to offer possibilities from which people can act, influenced the engagement of learners as co-researchers in my project.

Empowerment, for Gore (1992:67), suggests the productive capacity of power. Feminist pedagogy has emerged out of a history of progressive schooling where, instead of controlling, constraining and disciplining learners, teachers use their authority to empower. Gore explains that although there is a desire to move from a conception of power as repression to empowerment as a productive energy, the institution (context) in which the

practice is exercised, may militate against it. She concludes that attempts to "give up power" and "share power" in the name of empowerment, must involve seeking ways of exercising power toward the fulfillment of envisioned aims. Self-criticism and humility must be central to such an exercise.

I concede that I do not play the role of a disinterested mediator on the side of the oppressed group. I attempt to understand students' perspectives on HIV/AIDS while confronting my interests of my race, class and gender positions. My attempt to participate in the research participants' struggle for visibility, while not sharing these students' class, race and gender positions, is problematic. Because I could never know the experiences, oppressions and understandings of the research participants, I cannot assume the position of the centre of knowledge or authority about their oppression and "what I can do to help". The research participants and I are located in asymmetrical positions of difference and privilege; this makes dialogue about issues which are of a private nature more undesirable. The engagement of research participants to work as co-researchers evolved as a different way to generate knowledge.

3.7. Student Voice

My work seeks to add perspectives (voices) of students in understanding HIV/AIDS risk behaviour. I believe that the mere act of students articulating their views about this disease is empowering. Orner (1992:75) interrupts calls for student voice in education when she argues that student voice, which claims to empower students, is an oppressive construct, because it perpetuates relations of domination.

In my work, this may point to the domination of the researcher over the researched. This calls for greater scrutiny when researchers request that students "speak" in the name of their own empowerment. As a feminist researcher who is concerned with changing unjust power relations, I encouraged co-researchers to continually examine their own assumptions about their positions, and those of other research participants. I emphasised the "crime" of imposition that we can commit in the name of student empowerment. I was wary of using ways of understanding students' perspectives on HIV/AIDS which were complicitous with

ways of oppressing. (After all, "we", the researchers/co-researchers, who are located as being "more powerful, more knowledgeable, in greater control of the project", call upon "them", the student participants, who are "less powerful, less knowledgeable, in less control of the project", to speak.) I do not believe that the co-researchers and other research participants shared equal power, but I contend that power differences were minimised by engaging the co-researchers.

Orner (1992:79) asks us to be aware of discourses on student voice which are based on the assumption that the student is "a fully speaking, unique, fixed, coherent self". She implores us not to ignore the shifting identities, unconscious processes, pleasures and desires of students, teachers and researchers. Ellsworth et al (1989:77) share this view by stating that one's voice can, at best, be "tentative and temporary, given the changing and often contradictory relations of power at different levels of social life".

Orner (1992:79) emphasises that poststructuralist theories of language see authentic student voice as an impossibility. Poststructuralists view language as a site where subjectivity and consciousness are produced. Weedon (1987:41) concurs with Orner (1992:79) by stating:

... meanings do not exist prior to their articulation in language. Meanings are socially and historically located in discourses. Discourses represent political interests, constant vying for status and power.

This meant that I had to raise the question of authenticity and transparency of language, which is embedded in the calls for student voice to be heard, during the training of the co-researchers.

The discussion about empowering and giving voice to the oppressed questions that which is taken for granted in education in general and in research projects in particular. The importance of involving participants directly in the research process, while being cognisant of power differentials, cannot be over-emphasised. Subjectivities which underlie student voice cannot be ignored. Strategies which are mindful of these concerns, need to be developed in order to allow young people to engage in their own education. In the context

of this work, the call for young people to engage in research around HIV/AIDS is repeated. The next section describes the setting in which the research took place.

3.8. The Research Site, Participants, Instruments and Pilot Study

3.8.1. The Research Site: Siyazama Secondary School

I call the English medium school which was the site of the study, Siyazama Secondary. “Siyazama” is an isiZulu word which translates into “we try”. Personally, I have worked with most learners who, when they entered the school, could neither speak nor write in the English language. They made a concerted effort, together with their educators, to achieve academic success, during the period of five years which they spent at the school. The school has recorded matric²⁰ pass rates of between 97% and 98% during the past three years (2002-2004). This reflects a sense of perseverance of all role players in the school.

The school was located in the southern region of the city of Durban in KwaZulu Natal, South Africa. The following table describes the personnel employed at the school.

Table 3.2. Personnel at Siyazama Secondary

Educators		
<i>Nature of appointment</i>	<i>Number of females</i>	<i>Number of males</i>
Permanent	21	13
Substitute	3	0
Governing body posts	3	1
Non Educators		
Administrators	2	1
Cleaning and Maintenance staff	2	3
Security personnel	0	4

The school was regarded as being “advantaged” because it had, what the Department of Education considered a good infrastructure. In addition, permanent and substitute educators were fully qualified to teach and were registered members of the South African Council of

²⁰ Matric refers to grade 12 which represents the exit year from secondary school

Educators.

A majority of the educators belonged to the teachers' union which was affiliated to the largest trade union in South Africa, the Congress of South African Trade Unions. The administrative staff were fully qualified and carried out several tasks, including those related to reception, secretarial work and financial accountability. The cleaning and maintenance staff were paid by the state and their role functions were determined and monitored by the deputy principals. Members of the security team were employed by the school governing body because the Department of Education viewed security as a responsibility of the school.

Table 3.3. Learners at Siyazama Secondary

Race	Number of females	Number of males	Total
African	457	511	968
Indian	122	127	249
Coloured	17	18	35
Total	596	656	1252

A majority of the learners at the school were on the “wrong” side of several binaries: strong/weak, white/non-white, rich/poor, advantaged/disadvantaged, English-speaking/isiZulu-speaking, suburban/township. Feminist theory that works for social justice and better lives of the oppressed, within supportive groups, informed the research design of the study in which learners from this school participated.

The school had experienced a progressive growth in the number African learners, and a decrease in the Indian learner enrollment since 1999. The increase in the African learner enrollment did not change the curricular or extracurricular programs of the school. The learners were required to pay an annual school fee of R800-00.

I view the school as a site of struggle in the past against the laws which legitimated racial segregation among people. It was also a place where the community planned protests against heavy industrial pollution. Currently, it is a site of struggle against learner poverty

and poor academic ability. This co-educational school was located in the heart of a densely populated residential area on the coast of the city of Durban in South Africa, and was attended by the research participants. (Refer to appendix B for details of the location of the site). The school serviced learners from vastly different socio-economic backgrounds, which became more evident by viewing the dwellings in the vicinity of the school. Some learners resided in tiny blocks of overcrowded flats, others in elaborate homes with manicured lawns and splendid gardens. The learners who lived in the vicinity of Siyazama Secondary were, in the main, of Indian origin.

The school also served the needs of African learners who came from two nearby townships. Many of these learners lived in tiny, semi-detached homes and flats, and were from a lower socio-economic group. Some learners at Siyazama Secondary were desperately poor and used abandoned cars as their homes. A few learners lived in squatter camps (shacks) which were located on the border of the townships.

Buildings which belonged to different religious groups were in the immediate vicinity of Siyazama Secondary. A small supermarket and a liquor store, as well as a hair salon, were located near the school. A busy dual roadway, bordered Siyazama Secondary on one side. This was a major source of noise and air pollution. An international airport was located in a westerly direction, close to the school. A variety of air planes flew directly over the school, creating a deafening noise, which perpetually disrupted lesson programs.

The most disturbing feature of the school area, in my opinion, was the close proximity of industries, which ranged from oil refineries to factories, which produced yeast, sugar and paper. The air was constantly filled with unpleasant odours from gases, many of which were toxic. The choking fumes of the products of sulphur, as well as the stink of a notorious carcinogen, hydrogen sulphide, mingled with the sharp smell of yeast catalysed reactions of alcoholic fermentation, hung in the air all day. The area saw increasing amounts of industrialisation, regardless of appeals from the community about the hazardous effects of pollutants. There were regular visits from city managers and even officials from the Department of Environmental Affairs, to listen to the protests of the people. But the

installation of unsafe furnaces, and other practices which were hazardous to peoples' health, continued. Siyazama Secondary was located an area which was classified as the third most polluted part of the world (refer to appendix B for details).

The legacy of apartheid in South Africa legitimated the development of heavy industrial plants in the heart of an Indian residential area. As people of colour, with no voice and no vote in government elections, this community was forced to live in a place which was perpetually filled with black, particulate pollutants, poisonous gases in the air as well as toxins which occasionally found their way into rivers. At the time of writing this paper, eleven years of a democratic new order in the South African government have passed. There has been no relief to this community from the government; on the contrary, new roads which will pass directly through this community to link the harbour with the city, are being planned

Siyazama Secondary historically served the needs of the Indian community and inherited the infrastructure which was peculiar to Indian schools during the era of apartheid: small classrooms, poor ventilation, small staff rooms, limited, basic resources in the Science and Hotel Keeping subject rooms. A major part of the school was built using cheap asbestos boards instead of more expensive and durable clay bricks. These boards, which formed walls of classrooms, were regularly vandalised and the school was robbed of its limited resources. The response of the principals, who headed the school during the last decade, was to erect concrete fences which were covered with barbed wire, and to protect some classrooms using unsightly metal bars. Limited space for playing sport was available. Facilities were available for three codes of sport: soccer for the boys, netball for the girls, and basketball for separate male and female teams.

At the time of writing this report, Siyazama Secondary had been used as a secondary school for thirty years. Prior to that period, it had been classified as a primary school. During the apartheid era, the school was administered by the House of Delegates, an education department which was responsible for Indian affairs. Legislation, at that time, deemed that only learners of Indian origin would be admitted to the school. The community, at that

time, was home to many stalwarts of the organization which was to play a major role in the demise of the apartheid government, the African National Congress. In 1983, the Ex-Students Society, the Ratepayers Association as well as the staff of Siyazama Secondary, protested about the exclusion of African learners from the school. They made repeated representations to the Department of Education and a year later, Siyazama Secondary admitted learners who were of African descent, into the school. This was a significant milestone in the history of the school learner population because the school learner population became multiracial a decade before the dawning of a new democratic order in South Africa.

3.8.2. *The Research Participants*

The majority of the research participants were in grade 10. They were 15 to 19 year old learners of Indian and African origin. A non-probability sample was selected. The findings of this study were not intended to be representative of wider populations; instead, they were meant to represent the particular population under study. The research site, as well as the participants, were easily accessible because I worked as an educator at the school. The choice of the school was a result of convenience sampling. The generalizability of this type of sample was negligible. It was also inexpensive to collect the required data.

I group the participants into four categories and detail their contribution to the work. Firstly, there were the *co-researchers*, who were 10 volunteers at the heart of the project. They were trained to conduct interviews with interviewees, whom they selected (a further description is offered in section 3.8.2.1). They took photographs to reflect their perceptions about sexuality. This group also analysed this visual data at the beginning and at the end of their involvement in the project, that is, twice within a period of nine months. Their roles are detailed in tables 4.1, 4.2 and 4.3 in chapter four. The second group of respondents were the *interviewees* (refer to section 3.8.2.1 for details). They comprised 10 candidates who were selected by the co-researchers. The co-researchers selected participants whom they believed might be sexually active, and with whom they had been previously associated. There was a great degree of trust between the interviewers and the interviewees. This was critical in order to obtain candid responses and explicit data about the sensitive, private

views on sexuality. The identities of the interviewees remain unknown to me. The only information that I obtained about them was that they were learners at the school, and eight of the 10 candidates were in grade 10. The other two were in grade 12. The third group of participants were 124 grade 10 *learners* who responded to the questionnaires. The questionnaires were administered by the co-researchers in the classroom. Lastly, the fourth category of research participants comprised a sample of thirty learners who assisted in the *pilot* study of the questionnaire.

3.8.2.1. The interview participants

The co-researchers conducted interviews with respondents whom they selected. Interviews were done outside of school times. Pseudonyms have been used to protect the identity of the research participants. The following grid shows a matrix of the participants in this part of the work:

Table 3.4: Participants in semi-structured interviews

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background	Residence	Age in years	Race
1	Interviewer	Isiah	M	Upper middle	Merebank	16	African
	Interviewee	Eliza	F	Lower middle	Lamont	17	African
2	Interviewer	Prim	F	Lower middle	Merebank	16	Indian
	Interviewee	Patsy	F	Lower middle	Chatsworth	15	Indian
3	Interviewer	Luv	M	Upper working	Umlazi	16	African
	Interviewee	Reeves	M	Lower middle	Umlazi	17	African
4	Interviewer	Candy	F	Upper working	Merebank	16	Indian
	Interviewee	Sunshine	M	Upper working	Merebank	16	Indian
5	Interviewer	Kesh	F	Upper working	Merebank	16	Indian
	Interviewee	Moonlight	F	Upper working	Merebank	16	Indian
6	Interviewer	Zuma	M	Lower working	Umlazi	15	African
	Interviewee	Ndu	M	Upper working	Lamont	16	African
7	Interviewer	Kovi	F	Lower working	Merebank	15	Indian
	Interviewee	Raj	M	Upper middle	Bluff	16	Indian
8	Interviewer	Mandy	F	Upper working	Merebank	15	Indian
	Interviewee	Vusi	M	Lower working	Merebank	15	African
9	Interviewer	Nadi	F	Lower working	Merebank	15	Indian
	Interviewee	Vijay	M	Upper middle	Bluff	15	Indian
10	Interviewer	Suri	F	Upper middle	Merebank	15	Indian
	Interviewee	Kurti	F	Upper working	Merebank	15	Indian

Table 3.4 represents the racial, gender and age matrix of the interview participants. Each participant classified her/himself as belonging to either a middle or a working class socio-

economic background. They came from Merebank or the surrounding suburbs/townships. Female is represented by F, male is represented by M. Interviews 1, 3, 7 and 8 took place in a garage or an outbuilding which was on the premises of the interviewees' homes. Interviews 2 and 6 took place in the grounds outside the library. The homes of the interviewees were used for the remaining interviews. Regardless of the venue which was selected, the interviewers reported that the spaces were private, yet offered them a sense of safety.

The co-researchers as interviewers

The co-researchers were successful academically. They served actively in the life of the school. All of them were members of the school environmental club. They participated fully in science and mathematics olympiads (competitions) and expos, and although they were seldom placed in winning positions in co-curricular activities, they continued to try to excel. A few co-researchers engaged in sporting activities. Three of them had steady boyfriends and girlfriends. They listed their idea of having fun as "hanging out at the shopping malls", going to the cinema, watching DVDs and listening to music. In his journal, a co-researcher wrote about how he could not afford to go to the cinema or join the class on school field trips due to the lack of financial resources. It is possible that this situation applied to other co-researchers as well.

Isiah was a young African student who lived in an area which had previously been an "Indian only" district. He came from a conservative family and held strong beliefs in the Christian faith. He achieved excellent academic results and exuded a quiet confidence. Isiah conducted himself with dignity and maturity.

Mandy and Kesh were close friends. They probably worked together for much of this project. Kesh was always enthusiastic, and was prepared to make numerous attempts in order to "get things right" in terms of this project. Both students seemed to enjoy similar socio-economic status and they met each other during social functions out of school. They lived in the same area and both girls belonged to the Hindu faith.

Luv and Zuma, both African students, resided in the African township of Umlazi. Luv was a reserved student who held a serious view about life in general. He associated with one other boy and appeared to enjoy solitary time. Zuma, a natural born student leader, was an extrovert with a level of maturity which was beyond his years. He participated in sporting activities and his good physical form appeared to have made him attractive to girls. His interest in the project was boundless; he collected pamphlets about propaganda in his community. Zuma visited the homes of his neighbours during his vacation and he casually asked them about their perspectives on HIV/AIDS. He was sensitive to the gender discrimination in relation to the disease.

Kovi was an articulate student and possibly the highest academic achiever in the grade. She often attended leadership courses and was a possible candidate for the position of Head Prefect. A conscientious, yet very sensitive student, Kovi displayed a genuine concern for the rate at which HIV/AIDS was spreading among the youth. She was critical of the South African government for not doing enough to stem the disease.

Nadi and Suri were physically attractive. They were the “cool” girls and often associated with older boys and girls at the school. They wore their school uniforms in the most fashionable way and were extroverts. Both girls enjoyed fun and entertainment offered by night clubs. One of them had tried to collect her data in the night club but was not successful.

Candy was everybody’s friend, both young and old. She was able to endear herself to learners and educators alike. A highly responsible student, Candy was entrusted with the role of representing her class on the Council of Learners at the school. Prim was a quiet student who excelled at sport. She played several codes of sport and often, she represented the school in competitions. She appeared to enjoy her private space but was able to relate successfully in the group.

The co-researchers, after having been informed about the nature of the project and the skills they were required to develop, volunteered to become a part of the project. Several

co-researchers had personally known HIV/AIDS positive people; this might have been the reason which drove them to participate in the research. As the project progressed, their interest in the activities increased. They became more sensitive to gender discrimination in the school, in their homes as well as in their wider communities. Their intrinsic motivation to collect data and “belong” to a project which increased as the work developed. They were keen to be informed about my supervisor’s comments on our joint effort, and I shared this information without any reservation.

The Interviewees

Although I have no idea about the identities of the interviewees, I gather from listening to their interviews that they were academically successful and that they enjoyed parties, “clubbing”, visiting the beach and going to restaurants. The interviewees were promised that their identities would remain confidential; this probably encouraged them to speak more candidly. Some of them were very articulate and emotionally charged when they felt strongly about issues. The co-researchers selected learners who were popular among their peers, as interview candidates.

3.8.3. The Pilot Study

Thirty participants were involved in the first pilot study. I explained the purpose of the questionnaire to the group, and they were requested to complete it anonymously. A discussion with this pilot group led to the following changes:

- (i) The format for biographical details in Section A was expanded. It included options from which the participants could choose. It required the participants to place a tick, instead of write in a word, to provide their biographical information.
- (ii) Section B was changed to assess the participants’ levels of knowledge and behavioural skills related to HIV/AIDS.
- (iii) Words were simplified, for example, the word “revealed” was replaced by “shown”. Several research participants did not know the meaning of the word “contraception”. I was keen to determine whether this was a common problem among young people and I chose to retain the word without offering further simplification. South Africa is known to have the most rapid spread of HIV/AIDS in the world, and information about safe sex in general,

and contraception in particular, has been disseminated to the youth. I felt confident, at that stage, that more respondents would understand this term, which had been widely used in informal education efforts to stem the spread of the HIV/AIDS pandemic.

A research analyst was employed to advise me on the final questionnaire. As a result of her suggestions, the following changes were effected:

- (i) The titles for sections B and C were removed. Section B dealt with the research probe which investigated young peoples' perceptions about their knowledge and skills related to HIV/AIDS, while section C represented an inquiry into young peoples' perceptions about gender and risky sexual behaviour.
- (ii) Certain words were highlighted to facilitate easier reading of the information.

While I constructed the questionnaires and the interview schedules, I was mindful of the ethical requirements for this research.

3.8.4. Research Instruments

Photographs, questionnaires and semi-structured interviews were the main research instruments in my study.

3.8.4.1. Photographs

These were taken by co-researchers who were trained in the use of visual technological devices (refer to table 4.1. in Chapter four for details). The photographs were used to generate data in order to respond to the first research probe, which was:

- *What are young peoples' perceptions of sexuality?*

The photographs were then subjected to visual literacy analyses. According to Denzin (1989) in Cohen et al (2000:37), the use of visual techniques serves as one of the methodological principles in feminist research.

3.8.4.2. Questionnaires (Refer to appendix C)

The research questionnaire was developed after the research questions were established (and after an intensive review of literature). The questionnaire was intended to explore the "gaps" in the knowledge and behavioural skills of young people within the context of HIV/AIDS. A doctor in the Education faculty, whose area of expertise was the exploration

of HIV/AIDS among young people, assisted me with the development of the core questions. I worked together with the co-researchers to simplify the language used in the questionnaire. A research analyst assisted me in the final formatting of the questionnaire.

The questionnaire comprised four sections. Biographical data of the respondents was captured in section A; section B was used to solicit responses mainly in terms of the second research probe which was:

- *What are young peoples' views of their knowledge and skills about HIV/AIDS?*

Section C was designed to gather information to respond to the following research probes:

- *How do young people relate to gender perceptions about sexuality?*
- *Why do young people engage in risky sexual behaviour?*

Beliefs and attitudes about sexual decision making were captured in section D. Some of the questions were pre-coded, with pre-specified responses (Seale et al, 1998:131). To avoid imposing my meanings on the respondents, I included probes as well as open questions, which were used, firstly, to gather qualitative data and, secondly, to be coded into categories to be amenable to quantitative analysis. The open questions allowed the respondents to answer on their own terms, and enabled me to discover unexpected ways in which young people view risky sexual behaviour.

The questionnaires were administered to those grade 10 learners who had volunteered to participate in the study and whose parents had given me written consent to work with their children. The questionnaires were administered in the classroom by the co-researchers. The room which was used was large enough to ensure that each respondent could complete the questionnaire in a private space.

The questionnaires were analysed quantitatively and qualitatively. Grade 10 learners comprising 75 girls and 49 boys, who were of Indian and African descent, completed the questionnaires.

3.8.4.3. Interview schedules (Refer to appendix E)

Semi-structured interview schedules were designed. The co-researchers contributed to the questions which were finally admitted into the schedule. The interview schedules were designed to investigate the four research probes, and to allow for a comparison with the questionnaire responses, in order to determine consistency of concepts and to ensure rigour. Discourse analysis was used to understand the interviews. In using discourse analysis, I explored ways in which gender informs what people say. I was also mindful of the contextual factors, that is, the material set of conditions which enable or constrain the socially productive imagination and forms of expression (Foucault in McHoul, 1998) when I applied discourse analysis to this study. The two predominant themes of socialized biology and risky behaviour formed the unit of analysis. This is further developed in chapter five.

3.4.8.4. Reflective journals

These were maintained by the co-researchers throughout the research process. (An example of a transcribed journal, as well as a community flier and other journal excerpts, can be viewed in appendix G.) I view the collection of data from reflective journals as being a qualitative, introspective technique, which, according to Denzin (1989) in Cohen et al (2000:36), is one of the principles of feminist research.

The reflective journal was developed in order to afford the co-researchers the opportunity to record their thoughts and experiences in general, and those which related to the four research probes in particular. The co-researcher were encouraged to write about their research activities, which included, among other things, the reason for selecting particular sites to photograph, and discussions which they may have had in the field. The co-researchers and I agreed on the following guidelines when deciding what information should be reflected in a journal:

- Record daily experiences.
- Write about conversations with other people and information and events from other sources, for example, the media, which were significant in respect of the study.

- Include information from training sessions and reflective discussions.
- Record feelings and memories.
- Write about suggestions and comments which relate to the research project.

The co-researchers were invited to write in the language with which they were comfortable. They decided that they would make their journal entries at night before they slept. Some of them indicated that “important” or inspirational events or information could be recorded immediately to avoid losing the effect of the associated emotion. They agreed that they would write daily for between five and 10 minutes.

3.8.5. *Validity and Reliability*

Face validity was assessed by asking people with practical and professional knowledge of the subject area to review the questions in order to determine whether they indicated the intended concepts²¹. A doctor of education who explored identity constructions among young people in the context of HIV/AIDS assessed the questionnaire. A research statistician also made an input into the design of the questionnaire. My study was context bound; its goal was not to develop truth statements that can be generalized to larger groups of people. Instead, it aimed to gather in-depth information about sensitive issues, in order to gain a heightened understanding of peoples’ experiences with a view to furthering the interests of the participants.

I enhanced the credibility and democratic validity of the study by engaging people who were already in the field to generate and gather data when I elected to work with the co-researchers. I could deal with complexities in the field which were peculiar to respondents of a particular age group and in a particular context, by engaging co-researchers to drive the data collection process. This paved the way for catalytic validity²² when the participants in

²¹ Examples: risky behaviour, contraception, condoms

²² I borrow this term from Kincheloe et al (1994) for who catalytic validity points to the “degree to which research moves those it studies to understand the world and the way it is shaped in order for them to transform it ... it will not only display the reality-altering impact of the inquiry process, it will also direct this impact so that those under study will gain self-understanding and self-direction”.

the study, namely, the co-researchers, were moved to take action²³ based on their heightened awareness and understanding of the spread of HIV/AIDS among young people. Interpretive validity was applied during the analysis when the interpretive accounts of the respondents were grounded in their language and relied on their words, ideas and concepts. I apply Reddy's (2003:85-86) ideas about ensuring research rigour by using multiple methods triangulation, multiple sources triangulation and analytical triangulation, to my study.

3.8.5.1. Multiple methods triangulation

The data which was generated through qualitative methods, using photographs, interviews and questionnaires, was compared with quantitative data solicited by using questionnaires. The use of interviews and questionnaires to respond to the same research questions allowed for the consistency of the responses to be crosschecked, in order to increase reliability.

3.8.5.2. Multiple sources triangulation

The sources of data in my study were numerous; they included visual data together with visual analysis of this data by the co-researchers, interview transcripts as well as questionnaire responses. In addition, the co-researchers' journal entries paved the way for a reflexive critique of the data generation and data collection processes. This created the space to triangulate data from multiple sources.

3.8.5.3. Analytical triangulation

The co-researchers and I met for reflection sessions during the period that they were involved in fieldwork. During these sessions, the broad categories for analysis of the data emerged. We discussed our assumptions and interpretations of the data. My promoter also assisted me in the process of analytical triangulation by reviewing the statistical data as well as by studying the photographs and interview transcripts, and by independently creating themes for analysis. After lengthy discussions and debates, we agreed on the final representation and analysis of the data.

²³ Co-researchers' actions included taking and analyzing photographs, modifying interview schedules, selecting interview candidates, conducting interviews, reflecting on research process.

A research statistician was engaged to work with the quantitative analysis, to which the questionnaires were subjected. The questionnaires were coded and decoded and, according to the requirements for statistical analysis, all the data was converted to the numerical form. The statistical software SPSS 11.5 (Statistical Package for Social Science version 11.5) was used for analysis. This is an internationally well recognized statistical software for quantitative research data analysis.

3.8.6. *Ethical Considerations*

McKinney cited in Babbie (1989:478) emphasises the importance of ethical issues when studying human behaviour, especially human sexuality, because of the personal, and sometimes threatening nature of the topic. The following three ethical criteria when researching human sexuality are mentioned:

Informed consent

The respondent must be fully informed about the nature of the research. The respondent must fully consent to participating in the research. In my study, consent was requested from the following role-players:

- (i) The Principal of the school. He gave written consent which was also submitted to the ethics committee of the University at which I was registered.
- (ii) One hundred and twenty four learners who consented to responding to questionnaires. The participation of the learners was voluntary. Each participant was allowed to withdraw from the project unconditionally at any time.
- (iii) Ten volunteer learners who were trained to serve as co-researchers.
- (iv) Written consent from the parents of each learner who participated in the study, and written consent from parents of co-researchers detailing the nature of training and fieldwork, and times during which the research activities would be undertaken. (Refer to appendix A for samples of letters of permission from parents).
- (v) The University of KwaZulu Natal Executive Committee of the Ethics Committee granted ethical clearance for the study.

All the participants were under the age of 18. I sought written consent from their parents for their participation. A verbal social contract between the participants and I was used to enable their participation. Less than 75% of the grade 10 learner population at the school participated in this work. I emphasized that their participation was voluntary and unconditional.

The right to privacy

Because most societies are extremely concerned with the social control of sexuality, and because sexuality is a topic for perennial gossip, the right to privacy is of paramount importance. Each of the role-players was given a written assurance about confidentiality of their identities as well as the information which they shared. The right to privacy was constantly emphasised during the training process of co-researchers. The Principal of the school shared the concern that learners may be ostracised and unfairly judged by their peers if confidentiality was breached. I assured him that every effort was made in every reflection session with co-researchers, to highlight the importance of confidentiality. The self-administered questionnaires were kept anonymous. The identities of the interviewees were not revealed to me at any point during this study.

Protection from harm

Psychological or emotional distress are forms of harm from which participants must be protected. During the training, co-researchers were taught that certain questions could elicit anxiety or remind respondents about bad/stressful events, and were told to be sensitive about the questions they asked. They were taught to tactfully exit any dialogue which affected the respondents negatively. The co-researchers in my study were familiar with the interviewees. This made the interview situation more comfortable. O'Brien (1998:10) concurs with McKinney (in Babbie: 1989) about informed consent as well as respecting the wishes of those who decline to participate. He emphasises the need for being explicit about the nature of the research process, and the need to openly declare all biases and interests.

Gaza (1999:10) cites Benator who extends these views by stating that the respondents must comprehend and understand the information which is presented. This is particularly

important in the South African context, where most people are second language English speakers. The pilot study in my work assisted me greatly in designing instruments which were adequately understood by all the participants.

3.9. Training of the Co-researchers

The co-researchers were a vibrant group of young people, who showed a genuine concern for the spread of HIV/AIDS among adolescents. The following table reveals a summary of the training sessions.

Table 3.5. Training sessions for co-researchers

Session	Purpose	Process issues
1	<ul style="list-style-type: none"> Working as a team Incidence of HIV/AIDS <p>Introduce co-researchers to statistical and descriptive data globally, as well as in South Africa to generate an appreciation for the need for the study</p>	<p>Discussion about working as a team, valuing each others' contributions, offering constructive criticism in a sensitive manner, that is, matters relating to group dynamics.</p> <p>Co-researchers were requested to plan for the session. They shared statistical and pictorial data. We used the information collectively to discuss the incidence of HIV/AIDS among young people.</p>
2	<p>Introduce co-researchers to broad principles of research.</p> <p>Training in administration of questionnaires.</p>	<p>The plan of the project was discussed with all the activities which co-researchers would be expected to complete.</p> <p>Discussion of ethical requirements in terms of informed consent, the right to privacy and doing no harm to respondents.</p> <p>Reflection on how I conducted the pilot study to discuss how questionnaires should be administered. Issues of confidentiality and giving respondents a private space in which to respond to sensitive issues were emphasized.</p>
3	<p>Train co-researchers to take photographs</p>	<p>Issues of lighting, distance from object to be photographed, angles, use of camera, avoiding exposure of film, were discussed. Co-researchers practiced using cameras in school.</p>
Co-researchers enter research field and take photographs.		
4	<p>Training in visual literacy</p>	<p>Co-researchers analysed a common picture (not a photograph which they had taken). They shared analyses and discussed reasons underlying different analyses of the same picture.</p>
Co-researchers enter research field to administer questionnaires to the first of 3 classes.		
5	<p>Administering questionnaires</p>	<p>Difficulties in the field were discussed before questionnaires were administered to remaining 2 classes.</p>
6	<p>Visual literacy training</p>	<p>First analysis of photographs taken done in May 2004</p>

Table 3.5. (continued) Training sessions for co-researchers (continued)

Session	Purpose	Process issues
7	Training in interview skills	Discussion of planning for interview in 3 stages: <ul style="list-style-type: none"> Decide on who will be selected as an interviewee. Obtain written permission from candidate after informing candidate completely about nature of research project. Decide on a suitable location for interview. Conduct during interview: be polite and courteous, establish rapport with candidate, conceal verbal and non-verbal reactions Maintain confidentiality in terms of identity of interviewee and details of interview.
8	Training in interview skills	Two audio-taped interviews were shared with group. Group analysed technical aspects of interview in terms of pace of speech, tone, audibility, use of dictaphone, background noise.
9	Training in interview skills	Discussion on: <ul style="list-style-type: none"> How silence can be used to motivate a response from interviewee Application of neutral probes which do not influence future responses How to handle difficult situations while doing no harm to respondent
10	Training in interview skills	Role-play I allowed co-researchers to critique a recording of an audio-taped interview between a learner and myself. Co-researchers formed pairs and practiced interviews on each other. We listened to these practice interviews and drew attention to their strengths and weaknesses, in a sensitive manner.
Co-researchers enter research field to conduct interviews to be used in the study.		
11	Visual Literacy training	Co-researchers analyse their photographs for the second time in January 2005. they offer reasons for changes in their interpretation of the photographs which I included as intertexts entitled "transformation trigger" in section 6.2.

At our first meeting, we discussed group dynamics and the importance for a sense of mutual respect to pervade all aspects of training and reflection. This was followed by a discussion on the incidence of HIV/AIDS.

During session two, I presented a detailed description of the study. We discussed the administration of the questionnaires to the pilot group, with a view to training the co-researchers to administer the questionnaires to the sample of 124 participants. I emphasised the following:

- (i) The need for participants to be reminded not to write their names on their questionnaires.

- (ii) The issue of confidentiality, which appeared on the first page of the questionnaire, should be reinforced.
- (iii) I indicated the importance of giving the respondents a private space in which to answer questions which were of a sensitive nature. This would require that the co-researchers not walk around the room while the participants were responding. They understood the need to "keep their distance" from the respondents.

The third and fourth sessions were devoted to visual literacy training. After the co-researchers had administered the questionnaires to the first of three classes, we held a reflection session in order to address difficulties which were experienced (session five). Thereafter, the questionnaires were administered to the remaining two classes. Training sessions six and 11 involved the first and final analyses of the photographs respectively. Sessions seven to 10 were devoted to training the co-researchers to conduct the interviews.

I designed core questions for the interview schedule. These were discussed with the co-researchers, who made a few changes to produce a semi-structured interview schedule. I based my training of the co-researchers on the following guidelines offered by Creswell (1998), Eisner (1998) and Silverman (1993) to conduct a productive interview.

- (i) *Choose interviewees whom you expect to give you perspectives and were common to the majority of the research participants.* The co-researchers sought to interview adolescents whom they believed to be sexually active.
- (ii) *Find a suitable location. The interview site should be a quiet place with minimum distractions.* For the co-researchers, the context in which the interview occurred was vital to inspire in the interviewees a confidence to make that which is private, public.
- (iii) *Take a few minutes to establish a rapport. Be courteous and respectful before, during and after the interview.* The interviewees were individuals who were known to the co-researchers. The co-researchers believed that the interviewees trusted them to the extent that they would reveal personal information.

- (iv) *Get permission.* Consent forms were given to the co-researchers to request the parents of the interviewees to grant written permission for the participation of the interviewees. The co-researchers explained the nature of the study to the interviewees, to ensure that they would be confident to engage in a face-to-face interview about a sensitive issue.
- (v) *Do not put words into peoples' mouths.* I encouraged the co-researchers to be good listeners. They should exercise patience and allow the interviewees to say what they want to say and how they want to say it.
- (vi) *Record responses verbatim.* The co-researchers captured all that was said on audio cassettes. I transcribed this information after the interviews were completed.
- (vii) *Keep your reactions to yourself.* I emphasised the need to keep an unresponsive facial and bodily expression, even when the co-researchers were surprised or shocked at what the interviewees said. They were taught not to show approval or disapproval to the responses of the interviewees.
- (viii) *Remember that you are not necessarily getting the facts.* I explained to the co-researchers that although certain responses might be convincing, they should always be treated as perceptions, rather than truths.

After the first set of interviews were completed, the co-researchers reflected on the way in which the interviews were conducted. According to them, some of the interviews:

- were too rushed,
- sounded like an interrogation,
- were unclear,
- revealed that the interviewer was making judgments about the respondent's behaviour, and
- were done in places that were too noisy.

At the next training session (session seven), the following strategies were emphasised to the co-researchers:

- (i) The atmosphere should be relaxed and friendly.
- (ii) The interviewer should convey a genuine interest in what the respondents say.
- (iii) The interviewer should not create the impression that s/he is working as an undercover agent for an educator. Any notion of this nature could have the following consequences:
 - It could result in the respondents making a deliberate change in behaviour to appear more respectable.
 - The respondents may say only that which is socially desirable.
 - The respondent may feel under pressure to "look good".

At the ninth training session, I highlighted the following:

- Silence can be a probe for an interviewee to respond.
- Probes by interviewer should be neutral, not affect nature of subsequent responses.
- Handling difficult, unclear responses.
- When handling a difficult situation, the general logic of question and the purpose of the study must be remembered to guide the interview.

I advised the co-researchers to rehearse the interview in front of a mirror, to observe their facial expressions and to take note of the tone and pace of their speech. Ways in which unclear responses could be handled were explored. I allowed the co-researchers to listen to an audiotape recording of my interview with a learner to serve as a role model. I paired off the co-researchers and allowed them to practice on each other, then to reverse the roles and repeat interview. We (the co-researchers and I) listened to practice sessions and advised the role players accordingly. The whole group discussed their experiences at end of practice session ten.

The interviewers and interviewees dressed in similar clothes. There was no great difference in the age and economic status, amount of formal education or language proficiency between the co-researchers and the other research participants. In this way, I sought to

decrease power differentials between the researcher and the researched. This forms a central theme in feminist models of qualitative research methodology. For Haig (1999) in Cohen et al (2000:36), the hierarchical relationships of researchers and research participants, in which the research itself can become an instrument in the legitimation of power elites, should be replaced by the type of research which recognizes the equal status and reciprocal relationships between the researcher and research participants.

A detailed account of the training outcomes, together with the reflections on the training, is provided in chapter 4.

3.10. Conclusion

In this chapter, I have justified the use of feminist research methodology as well as the application of principles of participatory action research, which are related to feminist research, to design and conduct my study. The attempt to reduce power differentials between the researcher and research participants, by engaging co-researchers to conduct a major part of the data generation and data collection processes, was detailed. The value of co-researchers, who were deep insider researchers, was highlighted. I reflected critically on the notions of “empowerment” and “student voice” in research. I went on to describe the research site, the research participants and the data collection strategies and instruments. This was followed by a detailed account of the training process of the co-researchers.

The methodology which was applied to this research design shows that young people can and should be viewed as a powerful resource for conducting research in the context of the HIV/AIDS epidemic. They should not be seen only as passive recipients of HIV/AIDS prevention programmes; instead, young people should be involved as effective promoters of action which prevents the disease. Youth should serve not only as informants, but as true protagonists.

In my opinion, research on HIV/AIDS among young people has been driven by people of the wrong age group, i.e. adults, who rarely identify with youth culture. Often, these researchers pose the "wrong" questions, based on their outdated assumptions of the life

world of the youth. I use Foucault's (1991) concept of power as the unit for analysis in the next chapter, where I present the methodological reflections of my study.

CHAPTER FOUR

The Journey: From learners to co-researchers

4.1. Introduction

Several levels of society, from ministries of health and education, to NGOs (non-governmental organisations), parents, educators, religious leaders and health care workers, are involved in the struggle against HIV/AIDS. The most serious challenge is to enable full participation of the youth themselves in HIV/AIDS prevention strategies. According to the Executive Summary of the UNAIDS Global Strategy Framework on Young People and HIV/AIDS, cited in Mitchell (2000):

Increasingly, young people are also being appreciated as a resource for changing the course of the epidemic. They are both responsive to HIV prevention programmes, and effective promoters of HIV prevention action. Investing in HIV prevention among young people is likely to contribute significantly to a more sustainable response to HIV/AIDS.

One of the main aims of my work was to empower young people to participate actively in researching HIV/AIDS among their peers, in response to the following two sub-questions:

1. *To what extent do young people respond differently to peers than to adult researchers?*
2. *What impact does participating in an HIV/AIDS-related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

Young people in this study were not passive participants. On the contrary, some of them were trained to serve as co-researchers to actively generate and collect data. They also analysed part of the data, as has been illustrated in the research methodology chapter. I viewed young people as integral role players in identifying issues or problems and in devising solutions. For me, the value of youth participating in this project had the potential of spilling over into an advocacy and activist strategy *by youth for youth*. It was a deliberate effort to develop young people as a resource to impact positively on the HIV/AIDS epidemic.

In this work, a tension exists between the methodological angst and the reporting of findings. I have elected to collapse the outcomes of the training of the co-researchers

into this chapter because it reflects the processes which impacted on their enablement. The evolving methodology generates findings on empowering young people in the field of research. I begin this chapter by briefly describing the instruments and methods of data collection which are critical to the findings related to the training schedule. I then include lessons from the training of the co-researchers which are followed by my reflections and the reflections of the co-researchers, and which create a space for reporting on methodological insights. The photography exercise is contained in Table 4.1; the schedule for the administration of the questionnaires appears in Table 4.2; in Table 4.3, the training schedule for carrying out the interviews is presented.

I discuss the findings from the interview and questionnaire data separately from the photographic data, which appears in chapter six. I choose to present the data in this way because it allows for the development of the co-researchers to be seen in progressive stages. In my view, the greatest enablement of the co-researchers is most evident in the data which was gathered through the use of visual methodologies. This does not suggest that visual methodologies were superior to the other methodologies which were used to generate the data. I applied visual methodology to begin and to end this work. This was done by engaging the co-researchers in the activity of taking photographs and analyzing these photographs at the beginning of the data. This chapter is enriched by journal entries of the co-researchers. These reflect the enablement of the co-researchers as a consequence of the intersection of the methodological issues with the direct data. This chapter ends with concluding thoughts on the findings.

4.2. Data generation

Multiple methods of data collection, which were alluded to in the previous chapter, were analysed in different ways in order to answer the main research question:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

The four research probes which were designed sequentially to respond to the two sub-questions (in section 4.1) were:

- *What are young peoples' perceptions about sexuality?*
- *What are young peoples' perceptions of their knowledge and skills about HIV/AIDS?*
- *How do young people relate to gender perceptions about sexuality?*

- *Why do young people engage in risky sexual behaviour?*

4.3. Training outcomes of the co-researchers

I begin this discussion by including a training schedule for the co-researchers, who had generated a vast amount of the data. This is followed by my reflections and the reflections of the co-researchers during the process of training.

The data was generated in the following ways:

- (i) Ten volunteer learners who were trained to serve as co-researchers by engaging in the following activities:
 - taking photographs and analyzing them,
 - assisting in formulating the interview schedule,
 - learning skills of conducting an interview,
 - selecting a suitable interviewee, and
 - conducting the interview.
- (ii) Questionnaire respondents who comprised 124 grade 10 learners.
- (iii) Co-researchers who recorded journal entries as a way of mapping out their development as young researchers.

I discuss the different methods of training the co-researchers to generate and collect data using visual methodologies, interviews and by administering the questionnaires. Each method of training is followed by a paragraph which is entitled *reflection*. It includes the thoughts of the co-researchers, as well as my personal reflection, on the way in which co-researchers were empowered to do this work. These reflections provide a candid insight into the findings related to the methodological anxieties, as well as the challenges and rewards in the field when enabling young people to develop skills in research. The issues which were troubling or empowering for the co-researchers are brought to the fore through the process of reflection. This reflexive critique, to which I had alluded in the previous chapter, drives the participatory action methodology and creates a space for interpreting the findings. I turn my attention to Table 4.1, which shows how visual methodologies were used in this study.

Table 4.1: Use of visual methodologies

Research probe	Sources of Data	Training Outcomes
<ul style="list-style-type: none"> What are young people's perceptions of sexuality? 	Photographs Analysis of photographs (photo voice)	<p>1. Visual Literacy Training Among several activities, co-researchers were asked to independently analyse, firstly, different pictures and secondly, the same picture (see figure 4.1). They discussed their interpretations. This was an exercise to get them talking about pictures. It served as a useful entry point to work with pictorial data.</p> <p>2. Use of Technology in data generation Co-researchers were trained to use cameras. Different angles used during photography, the distance of the object from the camera, steady use of the camera, the use of the shutter, lighting and the use of a flash were discussed and practiced.</p> <p>3. Ethical concerns The need to acquire consent of people prior to taking their pictures was emphasized. Issues of informed consent permeated most training sessions.</p> <p>4. Interpretation of photographs This was done in May 2004 and repeated in January 2005. Each co-researcher analysed his/her photograph(s) independently. (Their analyses are discussed in section 6.2).</p>

I detail each of these stages because they give an insight into the increasing competence of the co-researchers.

Visual literacy training

The goal of visual literacy training was to guide the co-researchers towards an understanding that photographs reveal as much by the *way* the subject is photographed as by what is photographed. Ewald (2001:17) sums this up by stating that *photographs communicate first visually, then emotionally*. We discussed the differences among the various photographs in the classroom (which included photographs related to life skills, for example, those denoting healthy lifestyle choices, photographs of celebrities and photographs relating to science. We discussed the possible reasons which motivated the photographers to capture the images. The co-researchers were then requested to select any picture and view it closely and record, firstly, the physical objects in the picture, and secondly, the messages that were being conveyed. In this exercise, they were encouraged to observe facial expressions, the background of the photographs as well as the contrast between light and dark. They were requested to examine the far sides of the photograph, to come to the conclusion that the photographer must have had a reason to include these features within the frame of the camera. The co-researchers had to look at the space around the most prominent feature in each photograph to find clues to its

interpretation. This was done to draw their attention to finer details in photographs and to develop skills in analysing visual material.

Use of technology in data generation

The co-researchers were requested to photograph one another as well as parts of the school, in order to get a “feel” of using the camera. They first practiced by snapping the shutter of a camera without film. This was done to prevent confusion between the shutter and the automatic rewind button. They were cautioned about use of the flash in dark situations only. Although these co-researchers were adolescents, I did not neglect to emphasise the value of correct posture and a steady hand while taking photographs. In hindsight, I realize that these lessons were valuable because (unknown to me) some of the co-researchers had not used a camera previously. They practiced their posture when taking photographs.

Ethical concerns

According to Karlsson (2003:64), when researchers generate photographs in the field, the visual form of the research heightens the need for adherence to ethical issues. She reflexively refers to Foucault who criticized postmodern institutional spaces which promoted the “panoptic practice of surveillance”. She agrees with feminist researchers who assert that the gaze and surveillance, activities which are central to visual imaging, may result in resentment and defiance of those within the image.

The first ethical requirement that I discussed with the co-researchers was that of anonymity. I understood that photographs capture a likeness of face in particular contextual settings and that this makes the ethical requirement of anonymity a difficult one. We agreed that I would manipulate the software to fuzz out the faces of individuals as well as the names of institutions to protect their identity. This was not an unproblematic decision; it included debates among the co-researchers about the ethical dilemma which was inherent in photograph tampering. They commented on how some young people, who are computer literate, use technology to skew pictures and damage the reputation of people. They were also anxious about the representation being a biased one. My response to the co-researchers related to the second ethical requirement, which was to protect the people being photographed, from harm. I indicated that it was

possible for the photographs to be distributed, at a later date, by other people and to be used in contexts which could prove to be damaging to the reputation of the people and the institutions reflected in the image. The final ethical concern related to that of informed consent. The co-researchers were trained to receive consent at two different stages: firstly, they were requested to receive verbal consent from the people being photographed, and secondly, they were asked to negotiate the use of the actual photograph (after the negatives had been developed) with the people in the images.

4.3.1. Reflections on photo-shoot activity

During the visual literacy training, in addition to the photographs mentioned in section 4.3, a common photograph (refer to Figure 4.1) was given to each co-researcher to analyse.

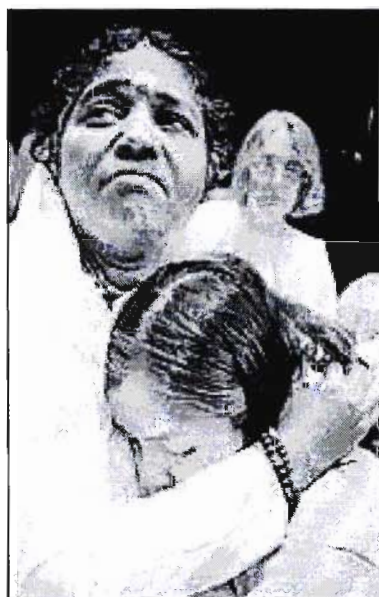


Figure 4.1 Common photograph in visual literacy training

The co-researchers assumed that the picture was an AIDS-related picture and this informed most of their interpretations. They associated my role in the project with information about HIV/AIDS. I had not expected their interpretations to be coloured by this assumption. This has implications for future work which involves visual literacy exercises. The researcher should inform the respondents that the picture does not necessarily have a link with the topic with which the researcher is known to have worked previously.

The co-researchers were surprised by the large number of different interpretations (which ranged from homosexuality, rape and death to friendship and loving relationships) that were offered in response to the same visual data. I was reminded of Szarkowski in Ewald (2001:31) who made the following assertion:

When two people tell stories about the same event, what they remember and choose to tell is different. Each one of us, depending on who we are, will notice different things and choose different details to explain and emphasise.

The different sets of interpretations to the same visual data was discussed by the co-researchers. They agreed that there were no “correct” interpretations of the picture and that their different life experiences shaped their different interpretations.

The co-researchers entered the field to take photographs which they believed expressed their perceptions of sexuality. They took most of the photographs in their communities where many people met, for example, taxi ranks and shopping complexes. Some co-researchers elected to take photographs of items which were inside their homes; others captured pictures inside the school.

Some of the co-researchers had never used a camera before. One journal entry read:

It was the first time I used a camera. After being told how to use it, I felt ready to take my first photo.

The exercise proved to boost her confidence in her ability to gather data. Their emotions ranged from nervousness to excitement. I was impressed by the superb quality of most of the photographs and I complimented the co-researchers on a job which was well done. Some photographs were taken in the rain and were unclear. I should have mentioned the effect of gloomy weather on the quality of photographs. The co-researchers also photographed shiny objects, for example, condoms which were packaged in aluminium foil, and were difficult to distinguish. I requested that certain photographs be taken again to obtain greater clarity.

One co-researcher exposed the photographic film accidentally and the negatives were damaged. She was bitterly disappointed at the loss of data. I asked the group of co-researchers to reflect on this incident. They concurred that this incident taught them that “technology can let you down”. They also saw the importance of the careful use of

technological devices as critical to the data-generating process. The co-researcher was given a second opportunity to take her photographs. This time, she was excited at having produced pictures which were of a good quality. I reflected on the extremes of emotion that the co-researchers experienced. They went through periods of “higher highs” and “lower lows” than would be expected from adult researchers.

I asked the co-researchers to reflect on why they had elected to take certain pictures. They discussed this as a group and indicated that they related the pictures to their lives. One co-researcher felt a sense of shame and disgust when she reflected on the behaviour of young people as was depicted by certain photographs. She reflected on her personal life experiences and felt a sense of gratitude towards her parents for the way in which she was being raised. She transformed her negative reaction to other young people into a positive emotion in her life. Image-viewing appeared to put her in touch with her personal values. I emphasised the value of “steeling”²⁴ one’s emotions while engaging in fieldwork. The co-researchers saw that emotional strength and the ability to dissociate oneself from the data were a part of their development as budding researchers.

In describing her experience of taking photographs, one co-researcher made the following journal entry:

I really enjoyed taking them (the photographs) out. I had a lot of fun and the pictures came out great. The pictures were very interesting and when you look at it, it gives you a lot of information. It shows you where teenagers hang out and what they get up to.

The element of co-researchers’ enjoying the activity was important to me. The co-researchers realized that this could be a fun activity, although the work was about a serious topic involving HIV/AIDS. The success that the co-researchers experienced in the field was one of the factors which, in my opinion, sustained their enthusiasm and involvement in the study.

One co-researcher indicated that she was unable to take a particular picture because the people who would have been photographed did not consent to the activity. I emphasised to them that the adherence to ethical requirements was a positive trait in their

²⁴ Being emotionally unbiased

development as researchers. I praised them for having “sacrificed” a good picture in their quest to fulfill their ethical obligations. I indicated that they had displayed intellectual courage by being able to cope with the uncertain nature of the enquiry.

In his diary, a co-researcher expressed his excitement at being given the freedom to photograph what he considered to be relevant. He stated: *I did not only take the shots, I also called the shots.*

Another co-researcher made the following journal entry:

The pictures were in keeping with teens and exactly what they get up to. I was excited taking photos. The photos were perfect.

These co-researchers felt empowered by the liberties and responsibilities which they assumed during this activity. The co-researchers felt enabled to gather data. According to Foucault in McHoul (1998:89), individuals are vehicles of power, not its point of application. These researchers used their sense of feeling empowered to gather the data. McHoul (1998:89) on Foucault’s conception of power, states that power is not the homogenous domination over others by an individual or a group. Power is something which circulates; it is never in anybody’s hands. In my study, the power continually circulated among the co-researchers, the respondents and I.

The next part of the training involved the administration of the questionnaires by the co-researchers to three classes (124 participants in total) of grade 10 learners.

Table 4.2 Administration of questionnaires

Research probes	Sources of Data	Training Outcomes
<ul style="list-style-type: none"> • What are young people's views about their knowledge and skills in the context of HIV/AIDS? • How do young people relate to gender perceptions about sexuality? • Why do young people engage in risky sexual behaviour? 	Questionnaires	<p>Co-researchers were trained to administer questionnaires. They were told to remember the following:</p> <ul style="list-style-type: none"> • Reinforce confidentiality of identity of participants. • Remind participants not to write their names on questionnaires. • Give participants a private space in which to write about sensitive issues. • Refrain from contributing to respondents' answers, even when respondents requested assistance.

4.3.2. Reflections on questionnaire administration

When a male respondent saw the sexual nature of the questions, he verbally made sexual advances towards two female co-researchers. They cautioned him sternly but later, in our group discussion, confessed that they had felt violated and humiliated.

I had not anticipated this problem. Fortunately for the co-researchers and myself, this occurred after they had administered the questionnaires to the first of three groups of respondents. I included the following information in my training session which was held immediately after this incident:

- State the purpose of your role as the administrator of the questionnaire
- Emphasise the seriousness of the exercise and that the aim is to receive information about their perspectives, which are valued by the researchers.
- Inform them that you respect their role in the project and that you expect to be respected in turn.
- Impress upon them that a mutual sense of respect and human dignity should underpin the process of data-gathering.

These strategies seemed to have worked successfully since no “problems” were reported when the questionnaires were administered to the remaining two groups.

I assured the group of co-researchers that their experience was evidence of the messy nature of research. Once again, I emphasized the need for them to cope, not only with

being exposed to data which is difficult to accept as “normal” attitudes of people, but also to cope with different behaviours of various participants. This incident (where the female co-researchers felt violated by the questionnaire respondents), reminded me of the assertion of Foucault in McHoul (1998:90) that power can be exercised in an ascending direction. In this instance, the respondents exercised their power in ways that made the co-researchers feel intimidated. In an attempt to gain control over the situation, the co-researchers cautioned the respondents. This reflects that states of power are continually engendered due to potential counter-powers which co-exist between them.

The realization that co-researchers can, at times, feel disempowered, dawned on me. This could be a disadvantage of engaging co-researchers in a project.

Other co-researchers were thrilled at being given the opportunity of “being in charge” of this part of the project. They regarded this as a task of immense responsibility and felt a great sense of self-worth at having successfully administered all the questionnaires. The co-researchers exercised their power through surveillance, as is alluded to by Foucault in McHoul (1998:62), since they chose the sites to be photographed after surveying the area. They selected their respondents for the interview and formulated some questions in order to conduct semi-structured interviews.

My review of completed questionnaires revealed that most of the required data was successfully solicited from the respondents. Some information, which was of a highly personal nature, was obtained. This revealed that the respondents were given a private space in which to record their thoughts. The candid nature of their responses was a reflection that the co-researchers had impressed upon the respondents that as adolescents, they were the best source of information about their own lives, therefore their participation in the research process was important. No respondent wrote a name on any questionnaire. It was evident that the co-researchers had emphasized the issue of anonymity successfully. The interviews are discussed in the next training schedule.

Table 4.3. Conducting interviews

Research probes	Sources of Data	Training Outcomes
<ul style="list-style-type: none"> What are young people's views about their knowledge and skills in the context of HIV/AIDS? How do young people relate to gender perceptions about sexuality? Why do young people engage in risky sexual behaviour? 	Interviews	<p><i>The following information regarding interviews was discussed with the co-researchers:</i></p> <p><i>(a) General rules about interviews</i></p> <p>1. Informed consent Importance of informed consent especially when dealing with issues which are of a sensitive nature. Includes written consent from:</p> <ul style="list-style-type: none"> Participants Parents of participants Principal of school <p>Observe protocol (Kemmis et al, 1991 in Cohen, 2000:68)</p> <p>2. Pleasant demeanour Always be polite. Greet the participant. Thank interviewee for his/her valuable contribution. Be friendly.</p> <p>3. Attire Dress casually to create an environment in which interviewee would feel comfortable.</p> <p>4. Dealing with responses which are not readily forthcoming. Co-researchers were trained not to impose their will by insisting on responses if interviewees were not forthcoming on an issue. The following suggestions were to be considered in this instance:</p> <ul style="list-style-type: none"> Allow silence to prevail if interviewee is unwilling to respond to a question which, you believe, is fully understood by respondent. Continue with next question if you believe the respondent will be harmed by pursuing current question. Be aware that interviews can create anxiety and trigger grief in the respondents even when a researcher's intentions are to bring benefit to the lives of young people. Apply the motto: "do no harm".

Table 4.3. Conducting interviews (continued)

Research probes	Sources of Data	Training Outcomes
<ul style="list-style-type: none"> • What are young people's views about their knowledge and skills in the context of HIV/AIDS? • How do young people relate to gender perceptions about sexuality? • Why do young people engage in risky sexual behaviour? 	Interviews	<p>5. Selection of a candidate to serve as an interviewee Select a person who is representative of most of the learners in the sample. The candidate, together with her/his parent/guardian, must have signed letters of consent.</p> <p>6. Venue</p> <ul style="list-style-type: none"> • Should be a place where interviewer and interviewee feel comfortable. • Should be a private space where personal issues can be discussed without threat of being overheard. • There should be a minimum amount of noise <p>7. Reactions of interviewer</p> <ul style="list-style-type: none"> • Interviewer should keep reactions to him/herself (Cohen et al 2000:122-125). • Unresponsive body language must be maintained, while conveying a genuine interest in what respondent is saying. • Do not distract the respondent by your reactions to what is being said. Give the respondent the right to be treated as an autonomous agent with considered opinions and choices. <p><i>(b) Lifelong learners</i> Emphasise that all participants, including co-researchers and myself, are constantly learning. Co-researchers should not, on account of their greater knowledge about this research, and of having greater control over what is spoken about, believe that they are superior to interview participants.</p>

4.3.3. Reflections on interviews

Two of the initial interviews were unclear due to background noise. I explained that the dictaphone recorded most sounds and that the co-researchers had to be mindful of other noises in the room/area. I realized that some of the interviewees chose public places as interview sites for reasons of safety. They indicated that they would rather use a strategically located bench outside the library, an area which had security guards at its entrance, instead of deserted community grounds or isolated buildings. I emphasized that the selection of data gathering venues must be based on safe choices.

A co-researcher made the following journal entry:

A good place would be a public place where it is quiet enough to ask questions. The respondent will have to feel safe and we must make him comfortable.

In constructing the context and places for the interviews, safety was a priority. It is possible that the co-researchers also took their personal safety into account when they chose the venues for the interviews.

Most of the interviews, however, were conducted in outbuildings and garages which were separate from but on the premises of the main homes of interviewees. The elicitation of highly private and sensitive information, with apparent ease on the part of the interviewees, was, in my opinion, due, in part, to interview sites which both, the interviewer and interviewee, felt were safe, secure and private venues.

One co-researcher did not use the dictaphone correctly and her interview was not audio-taped. She expressed great disappointment at this loss of data. The group discussed the importance of using technological devices carefully. They saw, first hand, the difficulties which were faced when a researcher was not adept at tasks like tape recording an interview. This experience increased the co-researchers' attention to the use of technological devices instead of "taking for granted" that this was an easy task. They encouraged each other to use the dictaphone correctly by demonstrating its use among themselves. The sharing of a difficult experience was therapeutic for the co-researcher who had lost the data. The support given by the group developed team spirit among its members in ways that I had not imagined possible.

In her reflection, a co-researcher wrote the following about what the body language of an interviewer should be:

People (interviewees) would want to know if you (are) really listening or are you just wasting their time. In this case, body language tells it all. Slouching (on the part of the interviewer) means that you are dissatisfied, so the person (interviewee) easily detects that you are wasting his time and that he should not be telling you his ideas and his personal details.

This showed a development in her skills as an interviewer. This marked a revelation of empowerment of this young women to conduct research.

When responding to a controversial opinion from the interviewee, the co-researcher offered the following written advice:

I won't put words into the person's mouth or make the person feel uncomfortable. Instead, I'll keep quiet or change (the question). If the person ... says something I don't agree with, I'll not make my face funny because then, the person will not be him/herself. Instead, I'll act as if I understand where they come from

I viewed this as a significant, positive development in the co-researcher. It signaled the development of the use of nonverbal techniques which could be applied to an interview. Having learned this skill, the co-researcher would be able to carry out a successful interview.

Another co-researcher made the following journal entry:

When I conduct the interview I will use casual clothes. If I use formal (clothes), the person will not open up to me, he will hesitate.

On the topic of attire, a co-researcher offered the following thought:

We'll (the interviewers) have to wear something casual. We can't overdress because the respondents will feel threatened or be ashamed of how they are dressed.

This revealed that the co-researchers were aware of the power differentials which can come into play by virtue of the physical appearance of the interviewer. The encouragement to be attired casually in order to reduce the risk of the respondent feeling a sense of shame about her/his attire was something that I had not considered during the training. On reflection, I realize that physical appearance was important especially to young people and that I should have emphasized the feelings of shame which adolescents could feel if they believed that their attire was “inferior” or unfashionable. This was, for me, a positive development en route to becoming a researcher. Once again, I look to Foucault in McHoul (1998:65), who states that power is intelligible in terms of the techniques through which it is exercised. One such technique would be to choose or not to choose to dress the part of a powerful person, depending on the task to be accomplished.

When I listened to the interviews, I was surprised by the tone of two interviewees. At times, they emerged as more powerful than the interviewers. Some interviewees felt that

the co-researchers were “out of synch” with contemporary youth culture which viewed unprotected sexual intercourse and sex with multiple partners as “cool” and modern. Some co-researchers confessed to having felt intimidated during certain parts of the interview, as is evident by the following journal entry:

When I did the interview, I felt powerless. I felt like the interviewee and her friend were show offs and they made me look small or like I did not know much.

I reflected on the purpose of training learners to serve as co-researchers, which was to reduce the power differentials between the researcher and the researched. I had not anticipated a reversal of power, where the interviewee wielded great control. Once again, I look to Foucault in McHoul (1998:89), who speaks about power as something which cannot be possessed but can be circulated. I traced the path of power from myself, as the main researcher, through the co-researchers and finally, to the respondents. The co-researchers and I discussed the shifting identities of people, especially those whose responses reflected a constant need for status, (example, one respondent prided herself in being known as the “superbitch of the millennium”) and power. As a group, we reflected on the apparent boastfulness of both these interviewees. We talked about whether their responses were, indeed, an exaggeration of their real life experiences. We decided that this was an unlikely possibility because of the consistency of their arguments.

I decided that working with young researchers was different from adult researchers because the young people who were co-researchers in this study were more likely to be teased or made uncomfortable or even unhappy by respondents. The intergenerational respect which exists between adults and young people is not necessarily transformed into intragenerational respect among the youth. This makes the tasks of young researchers more difficult than that of adult researchers.

I reflected on how research of this nature can have disempowering moments for the co-researchers. Personally, I was shocked by some of the data. The interviewers might have found it difficult to relate to certain unconventional attitudes which were articulated by the respondents. The need for emphasizing a researcher’s detachment from the data was of paramount importance when training the co-researchers. It dawned

on me that they had to be constantly reminded to expect the unexpected. I also reflected on the ethical considerations which should be applied to co-researchers.

Training practices should minimize or eliminate harm to the co-researchers, some of whom were highly sensitive to certain remarks made by the respondents.

In her diary, one co-researcher admitted to having felt disgusted by what the respondent had articulated. She experienced dispower in terms of her preparedness for the content and knowledge of what was being expressed by the respondents. She confessed to having silently questioned the respondent's sense of morality. We talked about her feelings and decided that when faced with difficulties in the research field, the researcher should focus intensely on the aim of the project. On reflection, she realized that she had conducted among the most successful interviews. Her journal entry read:

... it was amazing how this person was so open about what he does ...

She had managed to create an environment and establish a rapport in a way that encouraged the respondent to be candid about highly personal issues. The group was directed to the fact that the revelation of intimate issues by the respondents contributed to valuable data collection and enriched the project immensely. The need to remain emotionally unattached to the data and not to pass moral judgments on respondents was impressed upon the group.

I was also surprised by some of the data which the co-researchers had gathered from the interviewees. This reveals that while power circulates among people, the same can be said about the path of dispower. I was not prepared for the knowledge or the linguistic shock that emerged in certain interviews.

I was inspired by many positive responses, for example, one journal entry read:

I think the interview was well done. I asked a lot of questions that were not on my sheet. I dug deeper into the situation and got more information. I learned a lot when I did the interview. I also understand more about their (adolescents') lives. I really think the interview was successful.

This co-researcher had developed her technique of asking follow-on questions in a semi-structured interview. She showed the degree of confidence and an ability to probe which are hallmarks of an adept interviewer.

Another co-researcher expressed great happiness because she felt she had executed her task well. In her diary, she wrote: *"I was excited that I had done a job of this calibre"*. She viewed this experience as a confidence booster. This is in keeping with the feminist qualitative methodology which was integral to the design of my study, and which facilitated work where the participants became empowered to do research for themselves on issues which were of personal relevance to them.

Strict adherence to ethical requirements was central to this part of the training. The reduction of power differentials between the researcher and the researched by engaging co-researchers to solicit data did not decrease the need for strict adherence to ethical principles throughout the study. A co-researcher wrote that if she were faced with a difficult situation where the respondent was uncomfortable to answer a question, she would do the following:

... maintain eye contact, allow (respondent) to speak, but we can change the question very quickly so we don't hurt the respondent.

The ethical requirement of ensuring that no harm would come to the respondent was seen as important to this co-researcher.

4.3.4. Concluding Remarks

I engaged the co-researchers in several activities to empower them to conduct research, in partial response to sub-question 2, which is:

2. *What impact does participating in an HIV/AIDS-related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

The following features signaled their enablement as researchers:

- Competence in doing research
- Knowledge about sexuality and HIV/AIDS
- Gendered perspectives about issues of power and the spread of HIV/AIDS
- Understanding of risky behaviour among young people
- Intersecting issues of class, race and gender and their influence on women's vulnerability in the context of HIV/AIDS
- New insights about their personal knowledge, attitudes and behaviour

The outcomes which were detailed in the training schedules, together with the reflections of the co-researchers and myself is, in my view, a candid presentation of what went right or wrong in the field. It exhibits the bittersweet learning process among young people who do research. I learned several lessons by engaging co-researchers to generate and gather data. The most difficult part of this process appeared to be the administration of questionnaires. On the contrary, I had anticipated that this would have been the simplest activity. Not only did I have to train the co-researchers to expect the unexpected; *I had to train myself to do the same*. The respondents, in the case of the questionnaire, greatly outnumbered the co-researchers. Two of the large number of male respondents in one class intimidated the female co-researchers. Not a single male co-researcher reported similar incidents of intimidation. This reveals how gender is reproduced on a research field, even where the research aims to transform instead of reproduce existing gender relations.

Lorber (2003:100) states that gender is a major component of the structured inequality where the devalued genders (in this case, the female co-researchers) have less power and prestige than the valued genders (in this case, the male co-researchers).

The co-researchers' interviews were of a high standard and they managed to exercise their interview skills in ways that enabled the respondents to divulge information which was of an intimate nature. Their reflections which were recorded in their journals, clearly showed a progression in their development as researchers. It also helped them to transform as people. I conclude this chapter by inviting you, the reader, to listen to the voices of young researchers, through their reflective journal entries.

04/11/2004

From doing this AIDS project, it has taught me a lot of things, for example, not to judge people on the outside, and how a little flirting can get a person into real trouble. AIDS is a growing problem among everyone, but we as teens are at greater risk. I've learned so much about AIDS I could even teach other people about it. I'd love to do more projects like this in the future!

This signals an increase in the co-researcher's knowledge of what motivates young people to engage in risky sexual behaviour. This knowledge was obtained through the process of elicitation (especially through interviews), as is outlined in the Information,

Motivation and Behavioural Skills Model (refer to section 2.7.2 for details). The co-researchers did not assume the respondents' levels of knowledge or their ability to adopt safe behavioural skills in the context of HIV/AIDS. The motivation of young people to behave in a certain way in order to please their "significant other" (refer to section 2.7) is learned by the co-researcher.

Undated

I have learned a lot from participating in this research. I learned that there are people who are naïve and don't respect themselves. They know the dangers but ignore them. Everyone says they know everything about HIV/AIDS. They say they don't need to know any more about it. But when they are put in certain situations, they don't apply what they know and they ignore the dangers. There is AIDS awareness everywhere. On TV, radio, newspapers, bill boards, magazines, and the list goes on. People see this and say: "AIDS, I know about it". My opinion is that instead of promoting so much awareness, we should start educating and helping South Africans, especially women ... to apply what we know about HIV/AIDS... Women are strong but can sometimes be easily persuaded.

In this excerpt, the co-researcher recognises that she has participated fully in the work, and has not simply been a source of information. The use of the word "naïve" probably implies young people who do not have the necessary knowledge or behavioural skills to execute safe sex behaviour. She is aware of those people who have the knowledge but cannot transform this into practice because she writes "But when they are put in certain situations, they don't apply what they know and they ignore the dangers". Her concern for the general apathy about HIV/AIDS is evident when she writes: "Everyone says they know everything about HIV/AIDS. They say they don't need to know any more about it". Her concern is shared by Campo (2003:580) who describes the battle against the general lack of interest in HIV/AIDS which is viewed as "yesterday's news". She also looks at the relationship between women, power and persuasion in the context of HIV/AIDS. This points to the link between gender and vulnerability to HIV/AIDS.

When she states her opinion that "instead of promoting so much awareness, we should start educating and helping South Africans, especially women ..." it becomes evident that she does not see HIV/AIDS awareness and HIV/AIDS education as the same thing. The co-researcher's call for increasing AIDS awareness among women is echoed by Campo (2003:578) who asserts that we remain in a culture in which many men treat women as "powerless objects of our legendary sexual passions". The co-researcher

reveals a greater awareness about how the subordinate status of women in society fuels the HIV/AIDS pandemic.

Undated

I'm really proud of doing this assignment and I've really learned a lot. And I wish next year we could explore a whole new field like prostitution and what problems teenagers face in today's society. After listening to the interviews, I've realized that it is safe to stick to one partner and although a person has a boyfriend/ girlfriend, they should think about their future and have sex after marriage. I also have a boyfriend. I choose to reach my goals (reach for the stars) and he should respect and understand (this). I also don't believe in sex before marriage. I want to have fun but fun doesn't include sex.

The co-researcher feels empowered enough to dictate the future agenda for research, as well as to express a greater awareness of relationship issues, not only as they apply to other young people, but also as they apply in her personal life. Her research engagement has paved her way for increased personal knowledge production and practice in her life.

15/09/2005

I am glad in some cases the girls are beginning to see the light and are beginning to realize that boys are not everything. I truly believe that we choose our own paths and we need to know what can affect our lives in a major way. AIDS is one of them. Therefore I choose to wait until I find that special someone who is meant for me, to engage in sexual intercourse, because life is too short to blow your virginity over a one night stand and be left with raising a baby when I, myself, am still my parents' baby. I want to have a long life away from harm and AIDS. All good things come to those who wait. We should just sit back, relax and re-evaluate our lifestyles. This is my life's saying: "Listen to your heart and pursue your dreams. What your mind can conceive, you can achieve".

The co-researcher cites the gradual transformation in the world view of girls that "boys are not everything". Her work has spurred her into setting certain moral standards for herself as is evident by the statement: "I choose to wait until I find that special someone who is meant for me, to engage in sexual intercourse ...". She reflects a heightened sense of maturity and growth which signals her coming of age into young adulthood when she writes about "re-evaluating our lifestyles". She adopts a "Yes to life" stance by emphasising the need to pursue her dreams.

In the next chapter, chapter five, I discuss the findings from the data sources. The themes of socialized biology and risky behaviour are closely analysed and the

increasing enablement of the co-researchers in researching young people's perspectives about adolescent sexuality is highlighted.

CHAPTER FIVE

Findings and analysis

Young people: perceptions about gender and risky sexual behaviour

5.1. Introduction

In this chapter I provide an intersecting discussion of the findings from the questionnaires and the interview transcripts. I used thick data selectively in order to generate thick discussion of the themes, which were socialized biology (in section 5.3) and risky behaviour (in section 5.4). Analyses of data which offered nothing new or overwhelming were not presented, but were included in appendix D (as argued for in section 1.5). I selected data which provided new descriptions of activities in relation to the particular cultural context, from the point of view of the co-researchers and I.

The processes of generating and analysing the data were underpinned by the overarching research question, which is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

The four research probes which were designed to explore the main research question are:

- *What are young peoples' perceptions about sexuality?*
- *What are young peoples' perceptions of their knowledge and skills about HIV/AIDS?*
- *How do young people relate to gender perceptions about sexuality?*
- *Why do young people engage in risky sexual behaviour?*

The co-researchers were engaged in research activities which were designed around these four research probes. The findings and insights which were generated from the co-researchers' activities enabled me to respond to the two sub-questions which form a framework for this study, and which are:

1. *To what extent do young people respond differently to peers than to adult researchers?*
2. *What impact does participating in an HIV/AIDS related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

5.2. Interpreting interview and questionnaire responses

I used discourse analysis to interpret the interview data. Discourse analysis is suited to this work because, according to Tonkiss (1998:246), it does not see language as an accurate reflection of one's reality; instead, language is seen as a way of constructing and organizing one's social reality. I wanted to gain insight into how interview participants used language to present pictures of their reality.

I looked into the social setting in which the interviews took place. This was important because people modify discourse to suit the context in which it takes place. I understood that the interviewees' views on young peoples' sexuality might have been altered to "fit" the context, and that this did not render their version false. Foucault, cited in McHoul et al (1998:28) asserts that the social, political and historical conditions under which knowledge is produced determines whether statements come to be regarded as true or false. The conditions under which people construct meaning impact directly on what becomes known.

I used discourse analysis to look at how meanings about young peoples' sexuality are constructed. The intention of such an analysis was not to give a general overview of sexuality, but to examine how particular attitudes are shaped, reproduced and legitimized through the use of language.

While transcribing the interviews, I was surprised and even shocked at some of the data which poured out of the dictaphone. I realized that the reason for this was that I had not ignored my own assumptions about young peoples' sexuality. I should have remembered to apply Durkheim's first principle which is: "Abandon all preconceptions" (Tonkiss 1998:234). This was among the most difficult rules of research for the co-researchers and I to apply. The following preconceptions which were

shared by the co-researchers and myself filled the research process with uncertainty and excitement; the preconception that:

- all the questionnaire respondents would conduct themselves in a dignified manner,
- an ideal interview site was inside a quiet room,
- young people listened to and heard information associated with HIV/AIDS and would practice safer sexual behaviour,
- name-calling of young women by themselves was nonexistent.

The learning curve for me was the realization that I had to abandon my preconceptions about the co-researchers but that I could not expect them to abandon their preconceptions of me. Similarly, I had to repeatedly remind them to abandon their preconceptions of the research participants (questionnaire respondents and interviewees) and not to expect that these participants would, in turn, do the same for them.

After a careful study of the interview transcripts and the questionnaires, I developed two themes which emerged from the data, in response to the research probes²⁵. They are:

- Socialised biology (detailed in section 5.3)
- Risky behaviour: the Playa principle (detailed in section 5.4)

These correlates are interrelated but are presented separately for greater clarity. Respondents to the questionnaire were three classes of grade 10 learners. Interview data was collected from individual male and female respondents. This is different from focus group interviews, for example, those used in Reddy's (2003:75-77) study.

She used groups to:

- encourage interaction between boys and girls,
- provide opportunities for them to communicate about sensitive issues, and,
- develop their assertiveness skills to enable them to resist coercion into unwanted sex.

²⁵ What are young people's views of their knowledge and skills about HIV/AIDS?
How do young people relate to gender perceptions about sexuality?
Why do young people engage in risky sexual behaviour?

In my study, a part of the data was solicited by the co-researchers from individual interviewees. I wanted to obtain information that would not be influenced by other members of a group. I did not want their responses to be impacted upon by the stereotypes and restrictions which contribute to perceived group pressures. In addition, I sought to offer the interviewees a space in which to candidly articulate their thoughts in the absence of adults and the consequential intergenerational dynamics and restrictions.

5.3. Socialised biology

I begin this discussion by presenting a brief commentary in response to a selection of journal entries. I selected the entries to enhance my understanding of the data which emerged from the questionnaires and interview transcripts. Thereafter, I turn my attention to the data from the questionnaires and interviews in response to the research probe which reads: *How do young people relate to gender perceptions about sexuality?*

Lorber (2003:98) explores the theme of socialized biology by stating that gender as a process creates the social differences that define “woman” and “man”. Individuals learn what is expected, see what is expected, react in expected ways and simultaneously construct and maintain the gender order through social interaction. Because gender is a process, Lorber argues that there is room for modification and variation by individuals, as well as opportunities for institutionalized change. This is significant in my study, which reveals the need for a deconstruction of existing gender patterns as a way of intervening in the HIV/AIDS pandemic.

The concept “gender” is one with which Judith Butler, in her *Gender Trouble* (1999:11), engages by putting forward the following questions:

- (i) If gender is culturally constructed, could it be constructed differently, or does the constructedness of gender imply some form of social determinism which excludes the possibility of transformation?
- (ii) Does the construction suggest that certain laws generate gender differences along universal axes of social difference?
- (iii) How and where does the construction of gender take place?

My work revealed that there was space for the possibility of transforming the way in which gender is constructed. This insight was obtained through an analysis of the co-researchers' journal entries which reflected not only an increasing consciousness about the traditional construction of gender, but also, in some cases, a resistance to it.

The following journal entries of the same co-researcher serve as suitable examples of these findings:

03/06/2004

Today, when I went to karate school, my teacher made me fight a guy. He told the guy not to hit me hard. I felt so bad because we are both brown belts who are going for grading but just because he's a guy, he (the instructor) thinks he's stronger, mentally and physically.

10/06/2004

Today I had to take a bus to go to tuition. I had no idea how to stop the bus (as it approached). I had to run after the bus like mad, and it stopped. Just before jumping out at the shopping centre, the conductor held my hand and asked whether he could come with me. Everybody in the bus ... saw what was going on but no one did anything and I just said: "Leave me alone and don't ever touch me again".

In the first excerpt, the co-researcher reveals a consciousness of how gender is constructed differently when she writes: "Just because he's a guy, he (the instructor) thinks he's (the opponent is) stronger mentally and physically". She resigns herself to feeling badly, without responding to her instructor. In the second excerpt, she waits for someone to come to her rescue. When no one does, she actively admonishes the conductor, as is evident in the following excerpt: *I just said: "Leave me alone and don't ever touch me again"*. Her transformation is evident in the following ways:

- She shares her experience and does not passively choose to live with masculine norms.
- She chooses to challenge traditional constructions of masculinity.

The anger that she experiences comes through the writing and is easily identified by the reader. The use of "leave me alone ..." is indicative of the depth of her wrath to being propositioned.

The construction of gender takes place in all activities of the learners' lives. Although they allowed reproduction of traditional gender norms to take place where adults who are in authority were involved, for example, the teacher in a classroom, the instructor at

a karate class, or the parent in the home, they exhibited a heightened awareness of the differential axes along which gender is constructed. They also wrote about their negative feelings which were associated with different patterns of gender construction.

A journal entry in respect of the construction of gender in the home read as follows:

19/05/2004

My mum was not feeling well but she still had to do all the baking, cooking, cleaning etcetera. Dad came (home) from work and just took photographs of my sister, ate and slept.

Although she did not write about her feelings on this issue, the mere mention of it signals a greater awareness of traditional constructions of masculinity and femininity and the patterns of difference which inform them. Broader social patterns of sanction and expectation, as well as individual interaction in local situations, influence the construction of femininities and masculinities. The terms “femininities” and “masculinities” are neither static nor mutually exclusive. The conception of femininities and masculinities differs from culture to culture and are also influenced by different periods in time. In order to deconstruct existing gender patterns with a view to gender reform, traditional notions of femininity and masculinity need to be problematised.

Butler (1999:6) sees gender as not always coherently or consistently produced because of different historical contexts, as well as because gender intersects with “racial, class, ethnic and regional modalities of discursively constituted identities”. For Butler, then, it is not possible to separate “gender” from the political and cultural matrix from which it is produced. Butler (1999:12) cites Beauvior who says: *one becomes a woman under the cultural compulsion to become one*. As a structure, gender divides work in the home and in economic production, legitimates those in authority and organizes sexuality and emotional life. The continuing purpose of gender as a modern social institution is to construct women as a group to be subordinate to men as a group. Cultural representations guard the boundary lines among genders and ensure that what is expected and what is permitted for people in each gender, is well known and practiced by all.

The mother referred to in the journal entry dated 19/05/2004 is probably compelled by the cultural norms of her society to do tasks which “make” her a woman, even when she is unwell. This research resonates with Beauvoir’s sentiments, as is evidenced by the following journal entry:

11/06/2004

My aunty from Johannesburg phoned me today to (invite) me for the July holidays (to Johannesburg). My grandmother phoned. She asks me about my life and whether anything exciting is going on. I told her that my aunty (her daughter) from Johannesburg asked me to come up with a boy who is my cousin. (He is about my age). My grandmother then told me that I should not go (because) Johannesburg is dangerous and my cousin could go because he can defend himself. And she (my grandmother) knows that I am the karate expert! But he’s a boy and he can do anything ... at that moment, my heart broke into a thousand pieces.

Intergenerational power ²⁶ (“...my grandmother told me that I should not go ...”) as well as power in terms of gender (“But he’s a boy and he can do anything ...”) surface in this entry. In this case, the young girl feels doubly disempowered by virtue of her younger age and female gender. Her disillusionment is evident in the statement: “...my heart broke into a thousand pieces”.

This compulsion does not come from being biologically male or female since, in Beauvoir’s account, cited in Butler (1999:12), one who becomes a woman does not necessarily have to be female. Beauvoir argues that the universal person and masculine gender are blended into each other; the feminine gender exists only by being marked against this body-transcendent universal personhood. This is reflected suitably by the statement in the journal entry (11/06/2004), which reads: *But he’s a boy and he can do anything.*

According to Butler (1999:23), the heterosexualization of desire results in the production of the asymmetrical oppositions between “feminine” and “masculine” where these are understood as expressive attributes of female and male. She adds that the

²⁶ Refer to Reddy’s (2003:136-140) unpublished thesis entitled *Troubling Sexualities* for an in-depth analysis of intergenerational dynamics

policing of gender is a way to secure heterosexuality, which society views as normality (1999:ix).

5.3.1. Gender Perceptions: Findings from interviews and questionnaires

Questionnaires (appendix C) and interviews (refer to schedules in appendix E) were used to explore respondents' perceptions about whether or not women in their communities were often forced into engaging in sexual intercourse. Most of the female interviewees believed that the act of men coercing women into sexual intercourse is a thing of the past as is evident by the following interview excerpts:

Eliza: *No one is forced to have sex.*

Patsy: *... the teenage girls... they want to do it (have sex).*

Mutual coercion is suggested in the second response.

My findings are different from those reported by Varga et al (1996:31) in their report entitled "Sexual non-negotiation". In 1995, Christine Varga and Lindiwe Makubalo interviewed 85 pregnant African teenage girls at antenatal clinics in rural and urban areas in the province of KwaZulu Natal in South Africa. Sexual coercion and sexual non-negotiation were reported by many of their research participants. They add that AIDS-related work among African teenagers has been dominated by the Knowledge, Attitudes and Practices (KAP) approach with little investigation into the socio-cultural, interpersonal dynamics which influence sexual behaviour.

In some instances, the male interviewees held views which were similar to those of the female interviewees. This is illustrated by the following quotations:

Reeves: *Before, they (women) used to (be forced into having sex) but now, they are just asking for it ... By wearing those short skirts. To me, it just translates as "take me home, babe".*

Sunshine: *They are on you even before you think of getting onto them.*

Reeves viewed young women as *wanting sex* because they dressed in a provocative manner. Reeves offered an insight which is one of implied consensuality among girls.

According to these interviewees, women also desire sex from men whom they find attractive. Physical attraction to a man, in their opinion, is an important factor in heterosexual relationships.

The question about coercion of women into sexual intercourse is linked to sexual harassment and sexual violence. Blaming and stigmatizing women for sexual harassment (as is evidenced by the opinion offered by Reeves, for example) in heterosexual relationships is the norm, according to Halson (1994:107-108). When acts of sexual violence of boys on girls are reported, the focus is on what girls do to perpetuate the violent action. Girls are then condemned and are viewed as “asking for trouble”. In her research²⁷ on sexual violence among school girls, Halson (1994:107) found that girls also make women-blaming assertions about heterosexual violence on girls. Woman-blaming, man-exonerating explanations for sexual violence perpetuate women’s feeling of powerlessness to deal with men’s behaviour.

The response from male interviewee 7, Raj, was different. He asserted that there is covert coercion of girls into sexual intercourse because the refusal by a girl to engage in sexual intercourse would result in her partner leaving her and an end to her relationship with him. In their article entitled *Sexual non-negotiation*, Varga et al (1996:33) point out how attempts by girls to refuse sex to their boyfriends could result in the termination of a relationship.

They cite the following views of an 18 year old girl in this regard:

I would refuse (sex) as long as it didn't endanger the relationship ... when I refused sex in the past, it led to our breaking up until I agreed to have sex with him. Then we got back together.

The girl’s fear of rejection, in this case, covertly forces her into sexual relations with her boyfriend. Vijay, male interviewee (number nine), also believed that the lack of the ability of a girl to communicate her desire not to engage in sexual intercourse resulted in her being coerced into sexual intercourse.

²⁷ Halson engaged in a graduate project on gender, sexuality and power. She researched 13 to 14 year old British boys and girls in a co-educational school by conducting in-depth interviews, observing them at leisure and casually chatting with them. The purpose of her research was to locate young women’s experiences and perceptions within the structural contexts of their school and society.

This points to the “investments” which girls have in a relationship. In this case, having a boyfriend is the investment which the girl has made, and which, to her, is valuable.

When the questionnaire respondents were asked about whether or not men and women in their communities had rights to make decisions about sexual activities (appendix C), 69% stated that men had these rights, whilst 75% of these participants wrote that women possessed these rights. The following responses affirm this view of the majority of these participants²⁸ :

F (#3): *Everyone has rights. Along with this, they are allowed to make their own choices, so people are allowed freedom of speech.*

M (#2): *Men and women have equal rights. That is how my community is.*

Some respondents revealed a sense of despondency about people who exercised their rights to freedom of choice without taking responsibility for their actions, as is evident in the following excerpt:

M (#9): *Men and women do as they please without respect, nor any knowledge of what is being done. That is why in most cases, HIV/AIDS takes place.*

These notions of freedom and equal rights were probably being expressed by questionnaire respondents because of their exposure to the ideas of free and democratic thinking, which were highlighted during the year 2004, when South Africa was celebrating 10 years of democracy. This co-incided with the period during which the questionnaires were administered. Giant billboards, celebratory parties, television and newspapers were used to emphasise the value of the “freedom” which South African citizens enjoyed during a decade of democratic rule. The increase in awareness of the role of women in society was also celebrated.

I sought to access information about gender perceptions by engaging the co-researchers to ask interviewees about their impressions of young women and men who carried condoms.

²⁸ Questionnaires were numbered and the respondents were coded in the following way: F represented female respondent, followed by the number assigned to the questionnaire. M represented male respondent, followed by the number of the questionnaire

For female interviewee Kurti, the young man was *Prepared* (for sexual intercourse), but her response for the young woman was: *Very Prepared. No, desperate*. The initial response in terms of the woman who carried a male condom was a safe sex strategy, which was quickly changed to attribute a negative sexual reputation to the woman. Female respondent 1, Eliza, was harsher in her evaluation of the woman who carried a condom. The difference in her judgment of the condom carrying man as compared to the woman was stark: the young man who carried a condom was viewed as being responsible and thinking about his future; the young woman who carried a condom was regarded as *a bitch*. A negative sexual reputation was associated with women who carried condoms.

The virgin/whore dichotomy and the ways in which girls inscribe and police this, emerges. The discourse of feminine morality (and immorality) underpins the interviewee's constitutions of heterosexual femininities which is based on a familiar moral scale. In terms of this moral scale, a girl should be a virgin; a girl who carries condoms suggests that she is not a virgin. It suggests that the girl is "sleeping around"; this is unacceptable.

In keeping with the findings in Halson's study (1994:108), my work showed that young women, instead of giving and receiving support from each other, and naming and talking about sexual violence, name each other (for example, "bitch" and "one who is desperate for sex"); thus young women reproduce rather than challenge the power that these labels have.

Moonlight, a female interviewee, offered insights which were contrary to those of the others. For her, a man carrying a condom had nasty intentions, for example, of committing rape. She referred to such a man as a "bastard" and viewed the girl as an innocent victim. A woman who carried a condom was to be praised, as can be seen in the following statement articulated by Moonlight: *She's one of my own. Cause she's a playa, a playa*.

Moonlight's sentiments are clearly anti-male. I sought clarity about the term "playa" from a teenager, who indicated that a "playa" refers to a girl with many sexual partners.

The interviewee sees this as a positive attribute for women. This points to the language of sexuality as it is constructed by young people (in this case, interviewees), when they communicate with their peers (in my work, this refers to the co-researchers). Young people, who work as co-researchers, have a discourse which is peculiar to sexuality; this gives them added power to glean information. It is unlikely that adult researchers would be attuned to this type of linguistic expression which is critical to the quality of data gathered during semi-structured interviews.

In contrast to Eliza's view of a condom-carrying girl, Moonlight does not subscribe to the prohibition of sexual activity among girls; she does not view the feminine sexual desire as something to be silenced. She does not inscribe a discourse of prized feminine virginity to be "gifted" to the "right" man. Moonlight's choice not to silence the feminine desire and not to subscribe to the centrality of virgin to the constitution of valorized heterosexual femininities, probably emerged because she was being interviewed by a young researcher, whom she regarded as a peer. Her candid opinions and her refusal to see the sexually active heterosexual female as a whore (*playa*), opens up a discursive space for moving past the virgin/whore binary.

A confluence of views emerged when I compared the interview responses (about safe sex strategies) with those of the questionnaires. Having one partner as a safe sex strategy was not popular among most of the questionnaire respondents, as is evident by the results in Table 5.3. For 16.1% of the questionnaire respondents, a monogamous sexual relationship could prevent the transmission of HIV amongst men. Only 10.5% (refer to table 5.1) indicated that monogamy for women was an AIDS preventive strategy. These respondents did not perceive the strategy of having a single sexual partner as beneficial in terms of their sexual safety.

Male interviewees Reeves and Raj offered insights which reinforced traditional ideas of hegemonic masculinity. Both viewed the condom-carrying young man as responsible and prepared for sexual intercourse. A condom-carrying young woman was labeled a *whore*. For interviewee Vusi, a man who carried condoms was *Playing it safe*, but the woman who carried condoms would ...

... create a bad impression. Maybe she is looking for sex or something.

The traditional femininity script is endorsed especially by Reeves, who also articulated anti-female sentiments.

In order to solicit gender perceptions of young people, the co-researchers, during the interviews, asked the respondents about their views regarding ways in which young women and young men could prevent the transmission of HIV. What follows in this paragraph are the opinions of female interviewees about this topic. Kurti indicated that women should abstain from sex while men should be sexually active with one partner only. Moonlight viewed abstinence as the answer for women but for men, she advocated abstinence as well as the use of condoms. Patsy advocated birth control methods, which excluded condom use, as a prevention strategy for women, while for men, she advocated the use of condoms because she believed that men were incapable of abstaining from sexual intercourse. According to Eliza, abstinence on the part of the young man was a useful strategy but for the young woman, she advocated the use of pills and injections to prevent HIV/AIDS. Although the ABC methods ²⁹ to prevent transmission surfaced in some of the responses, they were not seen to be the answer in other cases. The myth that injections and pills could be used as a preventative strategy for HIV/AIDS persisted.

Male respondent Sunshine viewed use of condoms as a safe sex strategy for men. For women, he advocated, in addition to contraception, abstinence from both vaginal and oral sex. For Patsy, men can prevent the transmission of HIV/AIDS

... By using a condom and by being faithful to your partner,

while the spread of the disease by women can be prevented

... By not having sex at all. Unless they know that their partner is faithful to them.

What is evident is the omission by the interviewee of the use of abstinence as a preventative strategy by men. These views were supported by the findings from participants who responded to the questionnaire, when they were asked the following questions:

(C4) How can women prevent the spread of HIV/AIDS?

²⁹ ABC for preventing transmission of HIV/AIDS:

A: Abstain

B: Be faithful

C: Condomise

(C5) How can men prevent the spread of HIV/AIDS?

Table 5.1. Perceptions about how young men and women can prevent the spread of HIV

Perceptions	C4 Percent	C5 Percent
No Answers	2.4	4.8
Have Safe sex/ Use condoms	25.0	31.5
Abstain	47.6	36.3
Be faithful to one partner	10.5	16.1
Other	14.4	11.2

Graph 5.1. Perceptions about how young men and women can prevent the spread of HIV.

C4: How woman can prevent spread of HIV.

C5: How men can prevent the spread of HIV.

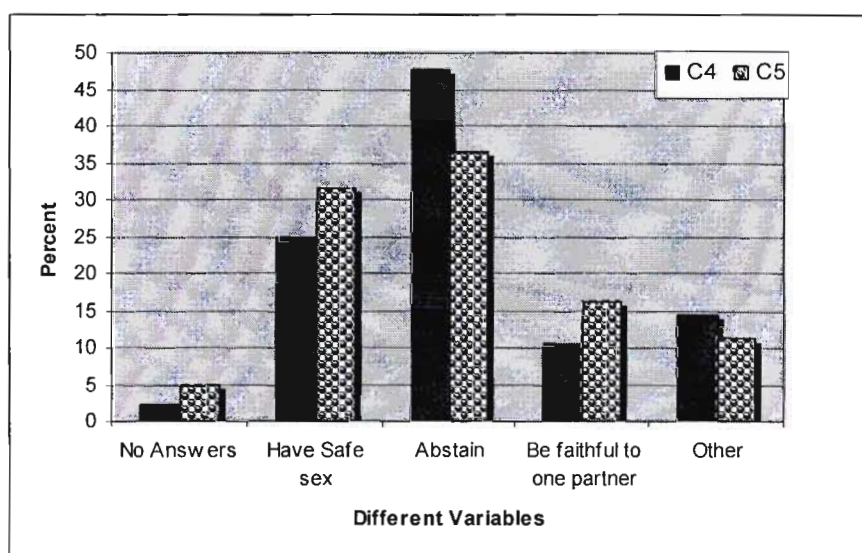


Table 5.1 reveals that among the questionnaire respondents, 47.6% of them indicated that, for women, abstinence from sexual intercourse was the answer for preventing the transmission of HIV. Of these respondents, 19.4% were males and 28.2% were females. Fewer respondents (36.3%) viewed this preventative strategy as a suitable one for men. This group comprised 17.7% who were males and 18.6% were females (refer to Appendix D, Pages 30, 32 for details). This reveals that a larger number of participants

of both sex groups viewed abstinence from sexual intercourse as a preventative measure for women, a more realistic choice than for men.

It becomes clear from the above-mentioned responses that more of the respondents (47.6%) regarded abstinence from sexual intercourse as a safe sex strategy for women. Fewer respondents (36.3%) viewed this strategy as being well suited to men. This difference in perceptions is clearly illustrated in graph 5.1. It reminds one of Gomez, in Kumar et al (2000) who states that women are not supposed to desire sex, according to the traditional femininity script, which is reproduced by most of the male and female respondents. These findings are in keeping with Butler's (1999:55) assertion that desire is established as a heterosexual male pursuit. This type of gender differentiation offers an insight into what New (1994:3) calls "socialized biology". New (1994) explains how gender differentiation takes place in language and culture, which exists prior to the individual. She concludes:

Woman is, not biologically, but culturally, the eternal other. Her biology is how we recognize her, but her exile is eternally ready-made.

Many respondents to the interviews and the questionnaires "exiled" women into abstinence from sex as a strategy to reduce the spread of HIV. Relatively more men could be included in the activity of sexual intercourse while wearing a condom as a safe sex strategy, according to most of the questionnaire respondents.

"Man", in Brunskell's view (1998:41), is the generically human, a norm against which women are measured as different. She is the "Other" in a man's world and occupies a submissive position. The following journal entry resonates with Brunskell's view:

11/06/05

I feel so ashamed sometimes to be a girl. I mean I wish I was a boy. Boys are seen as perfect, hot and cute when they try to flirt with girls. They (boys) just use them (girls) and abuse them. And in this country, women are seen as second class citizens and are not offered the same rights and privileges as men. "What makes us different?" If we cut ourselves, our blood will be the same colour. We all go to the same school. Why are girls different from guys? I totally hate today's society (which makes) girls look slutty. They never talk badly about boys. They (boys) are (seen as) such perfect individuals.

The assumption of a natural difference between the sexes, constituted the "natural" basis upon which different ways of thinking about sex and gender, involving male

dominance and female submission, did not prevail among all the respondents. This co-researcher who recorded the above journal entry challenges traditional constructions of gender by asking provocative questions of society. This points to the empowerment of co-researchers who became aware of gender inequalities and translated this awareness into active opposition of traditional gendered norms.

All the female respondents believed that men were more likely than women to spread HIV/AIDS. For Kurti, men are generally more sexually active than women and men have comparatively more partners. Eliza viewed men as having unprotected sex with many partners. Patsy and Moonlight offered negative male sentiments in respect of the spread of HIV.

Patsy (on who are the people who are most likely to spread HIV): *Men. Definitely men. Those bastards!*

Moonlight:

It's definitely the damn dogs of men, who force and overpower women into unprotected sex.

The strong terminology is accompanied by a sense of anger that the girl harbours for men. Coercion, possibly to the point of rape, is viewed as a means by which men transmit the virus. These young women condemn the behaviour of young men and challenge the assertion of power of men over women. A transformation in these interviewees, largely through articulation, is evident in three ways. They talk, express their anger and share their experience, they participate actively in this research and they choose to challenge masculine norms rather than live quietly with passive femininity.

Lin Farley, in Halson (1994:99) offers the following definition on sexual harassment:

... the non-reciprocal, unsolicited, (usually) masculine behaviour which asserts (usually) a girl's sexual identity over her identity as a person.

Halson views coercive sex as a part of a continuum on sexual violence. Sexual violence, according to Kelly in Halson (1994:99), is a sexual act (which may be verbal, physical or visual in nature) and which takes away a woman's ability to control intimate contact.

The root cause of a loss of a person's ability to control intimate contact is the public assertion of one's sexual identity over one's identity as an individual person.

Interviewee 4, Sunshine, also offered anti-male sentiments when he asserted that men were more likely to transmit HIV/AIDS in the following response:

Men are known as the dog nation. Which is true, because they don't tend to sleep with one person. They tend to sleep around like whores.

The attribution of the spread of HIV/AIDS to polygyny on the part of men emerged once again during the interviews. This was supported by data from the questionnaires.

The following tables show perceptions of female and male questionnaire respondents about how young people can prevent the spread of HIV.

Table 5.2. Perceptions about how young women can prevent the spread of HIV

Response	Gender of respondent		Total
	Male	Female	
Do not have sex with many partners	3.2%	7.3%	10.5%

124 Questionnaire respondents: 75 girls; 49 boys

Table 5.3. Perceptions about how young men can prevent the spread of HIV

Response	Gender of respondent		Total
	Male	Female	
Do not have sex with many partners	5.6%	10.5%	16.1%

124 Questionnaire respondents: 75 girls; 49 boys

Among the questionnaire respondents, 10.5% who were female, and 5.6% who were male, suggested that HIV transmission could be stemmed by young men if they had only one sexual partner, as is seen on Table 5.3. Table 5.2. showed that this was a less popular safe sex strategy for women, in the view of most respondents. It is possible that these different responses were due to a preconception, held by most respondents, that men are more likely to have multiple sex partners.

According to Holland and Thomson (1998), men who do not have many female sexual partners are often subjected to ridicule. This idea is supported by hegemonic

masculinity and encourages promiscuity among men, and consequently accelerates the spread of the HIV/AIDS epidemic.

Male interviewee Ndu attributed the spread of the disease to both men and women. He stated:

Because today, if you are a man with one woman, some people think that you are a fool. ... Women, they don't want to have one man.

The traditional construction of masculinity where monogamy is damaging to a man's sexual reputation, is starkly evident. The respondent raises awareness that polygyny is not solely a masculine pursuit; that women are active participants in this practice.

5.3.1.1. The Sexual Athlete

Reeves was crude and insensitive to women in his remarks. He debased women and trivialized their needs. When he talked about his participation in group sex, he referred to the women as *bitches*. His goal in life was ... *to find a good person or a better girlfriend* and not to limit himself to one partner. He was androcentric and without emotional intimacy. His ability to depersonalize issues which relate to sexuality probably gave him a sense of power. He offered the following explanation for young people engaging in sexual intercourse:

Because of their hormones. It turns a bit faster. It's very embarrassing for them to wank (masturbate) so they just find one of the bitches to fuck.

Reeves shows us that he is attuned to the power of language to subordinate and exclude women. These articulations made for linguistic shock reactions for the co-researchers and myself. The terminology is strong, bold and unadulterated and reflects an unleashing of male sexual power. This excerpt reveals that the language of sexuality used by young people when they speak to members of their own age group is different from the language used when adult researchers are present. A more careful, sanitised conversation is generally held between adult interviewers and young interviewees.

For Reeves, sexual relations are conducted under the panoply of patriarchal power. Patriarchy gives rise to sexual values which emphasise male dominance and the purely physical dimensions of the sex act, while reducing women to expendable objects.

Reeves is aggressive as well as authoritative. His account reveals the masculine entitlement to access and take the feminine body.

When asked about whether he knew the names of the girls with which he had sexual relations, Reeves indicated that he did not know all their names. He only knew the names of his girlfriends.

At the time of the interview, he had three permanent girlfriends, and he offered the following as his idea of a “good time”:

It's when I get an orgasm and reach the point of ejaculation, this makes me feel macho!

Don Sabo's quote in Disch (2003:264) about depersonalized sexual relations in his work *The Myth of the Sexual Athlete*, is worth mentioning in analyzing the views of Reeves. Sabo states:

Dating becomes a sport in itself and “scoring” or having sex with little or no emotional involvement is a mark of masculine achievement.

I interpret Sabo's *sexual athlete* to imply male heterosexual virtuosity in the bedroom. The term conjures images of potency, agility, technical expertise and the ability to be *cool* and to “connect” with girls without allowing oneself to depend on girls. The sexual athlete is characterised by not sharing feelings for women or talking freely about sexuality where love and sex mix. In Reddy's study (2003:100), the boys mentioned that: “boys teased boys who were in love”. Becoming emotionally involved in a relationship instead of maintaining it on purely physical terms is perceived to be “unmasculine”. Emotional dependence on girls by boys is viewed as a weakness on the part of the boys.

Indifference towards women, where sexual relationships are games in which women are seen as opponents, and the man's “scoring” means the woman's defeat, is a mark of being “a real man”. Reeves statement which reads: *so (young men) find one of the bitches to fuck* shows how he uses women as pawns in his quest for status, and how he successfully alienates himself from women. He speaks scathingly of women, his sentiments wreak of arrogance and he uses among the most offensive terms in the English language in order to describe his sexual relationships.

The responses, especially those of Reeves, show that sex does not take place in an ideological or a political vacuum. It is socially constructed, albeit on a biological basis; it is constructed in terms which largely reproduce existing systematic power relations between women and men. I look to Foucault (in Butler 1999:4) to try to understand why these power relations are reproduced. He asserts that the feminist subject is discursively constituted by the same political system which is supposed to make its emancipation possible. This political system also produces gendered subjects along a differential axis of domination, that is, subjects which are presumably masculine. Subjects are regulated by juridical systems through limitation, prohibition, regulation and control. These subjects are formed, defined and reproduced according to the requirements of political structures.

The co-researchers, in the interview, explored how the use of condoms is linked to gender perceptions. Male respondent, Reeves, laughed mockingly at the notion of using condoms. He believed that condoms are viewed unfavourably by women, who, according to him, equated the use of a condom worn by a man to an “unpeeled banana”. Reeves asserted that women are more eager to engage in sexual intercourse which does not involve the use of condoms because they find naked sex more appealing. He possibly viewed condom use as interrupting sexual activity when he said:

Because when you are on the action, it's (condom use) just wasting your time.

He is reminiscent of a powerful sexual athlete who is loathe to do something (like wearing a condom) which might decrease his status in the eyes of women. He perceives the wearing of a condom as subservient behaviour. In terms of the Information, Motivation and Behavioural Skills Model (alluded to in section 2.7.2), one is motivated to behave in a particular way (for example, not to wear condoms during sexual intercourse) because of one's beliefs (for example, wearing of condoms is old fashioned and makes a man subservient) and the impact that the behaviour would have on significant others (for example, one's girlfriends or sexual partners). This places young women as well as young men at greater risk for HIV/AIDS.

5.3.1.2. Sexual Schizophrenia

I explored the issue of control over sexual desires and its relatedness to gender perceptions. Out of control sexual desires in an environment where HIV/AIDS is rampant can, according to this study, be attributed to three factors, namely:

- The link between power and control (which can result in coercive sex).
- The addiction to / obsession with sex.
- Biological rationalizing which is rooted in “raging” hormones during the period of adolescence.

Moonlight offered the insight that use of a condom destroys the male sexual partner’s sense of power and control during the sexual act. For her, her partner’s sense of control was important. She reproduced the ideals of hegemonic masculinity in a sexual relationship. She also indicated that men have little self control if a woman offers sex, as is evident by the following quotation: *I mean, baby, come on, if we (women) offer it (sex), you’ll definitely want it.* This points to the way in which the biology of women and men become socialised and form “truths” which inform and direct gendered behaviour.

This respondent (Moonlight) also viewed women as having little control in the spread of HIV/AIDS. She stated that men “overpower” women, abuse and coerce women into unprotected sexual intercourse. For her, the use of violence by women on men could result in greater control which women could exercise in their sexual relationships. The following quotation reveals that she wanted power and control in sexual relationships:

I wish we can show those bastards (men) who is the boss in the relationship.

Moonlight showed signs of sexual schizophrenia. On the topic about condom use, she wanted men to experience power and control; in the discussion about HIV/AIDS prevention strategies, her own yearning for power and control was privileged.

5.3.1.3. Turning Hormones

Construction about out of control sexual drives was evident in the information which was solicited from Patsy when she said:

Then I got used to it (engaging in sexual intercourse), and it was like I can’t stop.

She also ruled out the ABC for HIV/AIDS prevention when she stated the following about young men:

Young men, they can't abstain. They can never (abstain). They always want to have sex ...

This respondent perceived sexual intercourse to be almost an obsession among boys. Patsy did not consider that boys had any responsibilities in heterosexual encounters. Her account highlights young women's collusion in patriarchal practices and their adherence to patriarchal ideals.

Reeves stated that he had no control over his sexual urges. He attributed this lack of control to the physiological changes in adolescent development. Biological rationalizing formed the basis of his argument for out of control sexual drives among young people, as is evident by the following excerpts: *My hormones lose control ... and this means I must get ... sex.* According to him, these urges were common to young people in general, when he said: *Because of their hormones. It turns a bit faster.* He suggested that sex was addictive when he stated that if young people choose to become sexually active *...you will be so hooked (to sex). Like me.*

Reeves was boastful about his sexual prowess. It is possible that he felt comfortable in the presence of the co-researcher, with whom he had been previously acquainted. This, on the one hand, could have created the space for boastfulness. On the other hand, the consistency with which he argued for multiple sexual partners and unprotected sexual intercourse is critical to authentic voice. Vijay shared the view that physiological changes during the period of adolescence made sexual urges difficult to bring under control, as is clear in the following quotation:

... the teenage (period) which influences the opposite sexual hormones (desire for the opposite sex) to react and they play in your mind and you just feel like having sex.

Ndu explained that young people are impatient and cannot wait until they reach adulthood to engage in sexual intercourse.

These findings reveal that traditional constructions of gender have resulted in unsafe sexual practices; this indicates, on the one hand, how socialized biology has impacted

on sexual behaviour. On the other hand, the notion of physical biology as a root of out of control sexual desires has been articulated by the interviewees. Biological rationalising among male and female respondents to justify (especially male) out of control sexual desires, as well as the link between power and control, influence sexual decision-making among young people. Decisions about wearing condoms are embedded in “intergender” power relations. In keeping with the feminist critique of hegemonic masculinity, De Oliveira (2000) explains how a woman who presents her partner with a condom immediately positions herself on the wrong side of the virgin/whore binary. I also explored factors which fuel risky sexual behaviour among young people.

5.4. Risky behaviour

Risky behaviour, according to the results of this study, becomes engendered in several ways. The pleasure which was derived, in both physical and psychological ways, was deeply linked to the incidence of sexual intercourse; this is discussed as *The Pleasure Principle* in section 5.4.1. Section 5.4.2 examines decision-making in terms of condom use as a factor which impacted on risky behaviour. Young peoples’ perceptions about the consequences of an unplanned pregnancy, versus the spread of disease (section 5.4.3) and the ways in which risky sexual behaviour impacts on their lives (section 5.4.4) are explored. The findings also reflect on how power struggles get played out when young people resist the advice of their parents and engage in risky sexual practices (section 5.4.5). The difficulty experienced by young people in controlling their sexual desires, based on what they perceived to be an “addiction” to sex, as well as other contributing factors like substance abuse, are engaged with in section 5.4.6. I explore reasons for young people having multiple sexual partners in the section entitled *On becoming a Playa* (section 5.4.7), as well as their perceptions about how the sexual space in which HIV becomes transmitted in section 5.4.8 entitled *HIV/AIDS: A Bedroom Disease*. The discussion on risky behaviour continues with an insight into young peoples’ perceptions of risk for HIV/AIDS (in section 5.4.9) as well as sexual spaces (section 5.4.10) in which risky behaviour becomes enacted. In section 5.4.11, young peoples’ perceptions of their knowledge and skills about HIV/AIDS is examined. The discussion ends with an intersecting exploration of gender as a feature of risky behaviour.

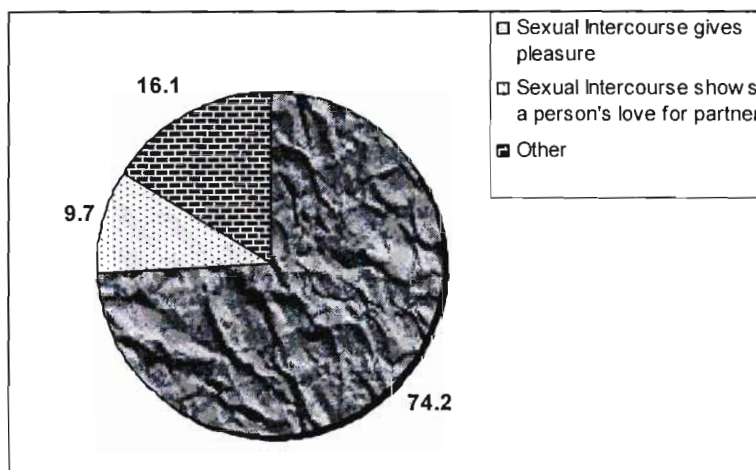
5.4.1. The Pleasure Principle

The idea of sexual intercourse as being *fun* was shared by Eliza, as can be seen in the following comment:

I think let's just enjoy it (sex). I'm talking from experience ... ooh! It's like ... Oh! My word! I can't explain it, 'cause it's so much fun.... They (sexual intercourse) are so much fun... You just can't get enough of them. They are likeice cream or what... they are fun...

The importance of fun and pleasure as reasons for engaging in sexual intercourse, offered by the interviewees, is similar to the responses of those who completed the questionnaire, as is evident on following graph.

Graph 5.2. Reasons why young people engage in unsafe sexual intercourse



The pleasure principle for most of the questionnaire and interview respondents, reigned as the most important reason why young people engaged in risky sexual behaviour. Graph 5.2 shows that young people are prepared to risk their lives for the pleasure of sex. Among the questionnaire respondents, 74.2% highlighted the importance of sexual pleasure over other reasons for risky sexual behaviour.

Butler (1999) in Youdell (2005:253) asserts that sex and desire are deeply entwined in prevailing discourses and that they remain fundamental to the constitution of intelligible subjects. Sex and desire are the central constituents of gender and sexuality, that is, sex, gender and sexuality are joined together in complex constellations.

5.4.2. Hello! There's no need for a condom!

Risky sexual behaviour is often assessed by the decision to use male condoms. The female respondents offered several reasons for their male partners not using condoms. Kurti and Moonlight believed that condoms created discomfort during the sexual act. For Eliza, a condom was seen an archaic sexual item. This is clear by the following excerpt: *'Cause there's no need for a condom. I mean, Hello! That's a waste of time.* She said that it interrupts sexual activity, as is evident by the following quotation:

There is no need to use a condom. You see, when you are kissing and touching, and you've got that feeling then you pull out for a boy to put on a condom. I just lose interest so I don't see the need for a condom.

Her view is that the use of a condom ruins the intimacy between sexually active people. Patsy indicated that the sensation of naked sex was more pleasurable than the sensation which was experienced when a condom was used. Sunshine, on the other hand, saw the need for using a condom as a life-saving strategy but he indicated that it dulled sexual pleasure. He stated that the use of condoms during sexual intercourse *...takes away some of the fun.* Knowledge issues about condom use were revealed when respondents articulated a lack of trust in the efficacy of condoms to prevent HIV/AIDS. Patsy did not believe that condoms were effective in preventing the transmission of STDs because she articulated the following opinion:

Well, this disease (AIDS) is common ... and condoms don't really work. Some of them (young people) want to have sex but how are they going to use condoms if it is 99% not true (safe)?

Vijay shared Patsy's viewpoint, in spite of the literacy around this.

Ndu, Raj and Mandy strongly advocated the use of condoms, which they viewed as an effective strategy to prevent the transmission of HIV. Ndu admitted that he had engaged in unprotected sexual intercourse twice. His interview was characterized by a few optimistic statements that he might not have contracted HIV, but then he rapidly lapsed into fear that he could be HIV- positive. He appealed to other young people to use condoms as a safe sex strategy. He made the following impassioned plea to young people: *Do what you have to do to practice safe sex.*

The use of condoms during sexual intercourse was, according to a majority of the questionnaire respondents (86.3%) the responsibility of both male and female partners.

Table 5.4 Perceptions about who should carry condoms

Responses	Respondent's Gender		Total
	Male	Female	
Male partner	5.6%	7.3%	12.9%
Female partner	0.8%	0%	0.8%
Both partners	33.1%	53.2%	86.3%
Total	39.5%	60.5%	100%

124 Questionnaire respondents: 49 males; 75 females

I wanted to determine whether young people, (mainly 15 to 16 year olds in this sample) understood what was meant by the word “contraception”. The word “contraception” was not understood by half (50%) of the participants who filled in the questionnaire. The following table details the respondents’ conception of contraception.

Table 5.5 Perceptions of respondents about the meaning of contraception

Responses	Gender of Respondent		Total
	Male	Female	
No answer	21%	29%	50%
A pill for women	3.2%	1.6%	4.8%
Used by women not to fall pregnant	12.1%	22.6%	34.7%
A kind of protection	2.4%	4.8%	7.3%
Safeguard against STDs	0.8%	2.4%	3.2%
Total	39.5%	60.5%	100%

124 Questionnaire respondents: 75 females and 49 males

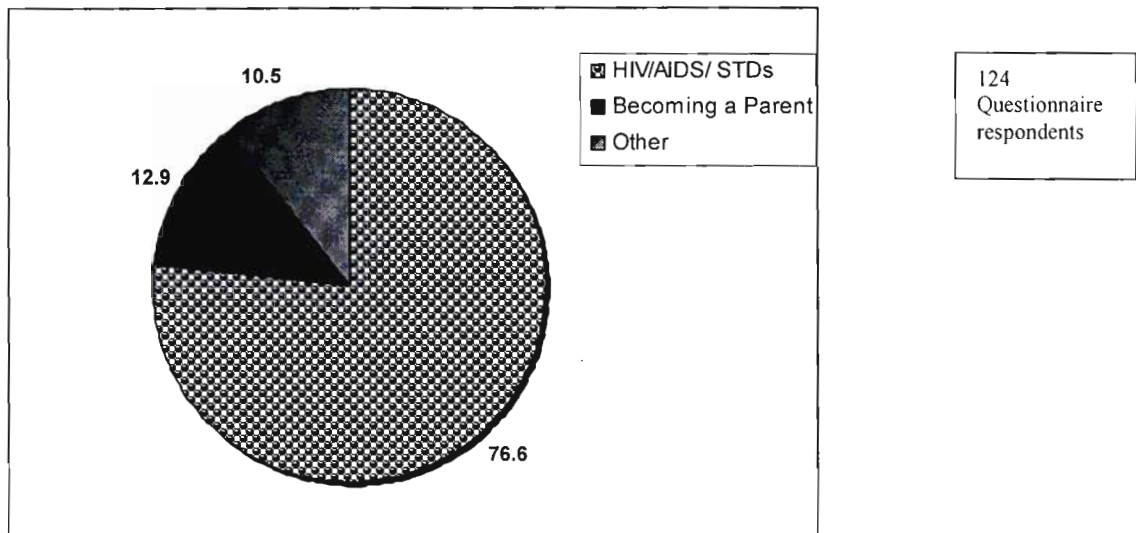
Personally, I found this data to be surprising because school HIV/AIDS awareness programmes, as well as anti-AIDS campaigns which are controlled by the government, allude to the idea of contraception in general and the use of condoms in particular. A relatively large percentage (almost 40%) of respondents understood the concept of contraception in terms of ways in which *women* prevented pregnancy or the transmission of STDs. The idea of different forms of contraception is not greatly associated with responsible male sexual behaviour. This is not in keeping with the findings about condom use, where most of the questionnaire respondents viewed this as the responsibility of both partners who are involved in a heterosexual relationship.

5.4.3. Pregnancy versus spread of disease

This must be seen against the background of the questionnaire participants’ views about the risks which young men encounter when they engage in sexual intercourse, as is shown in graph 5.3. There was a marked difference in the responses to this question

when it applied to men, as opposed to when it applied to women, as can be seen in graphs 5.3 and 5.4 respectively.

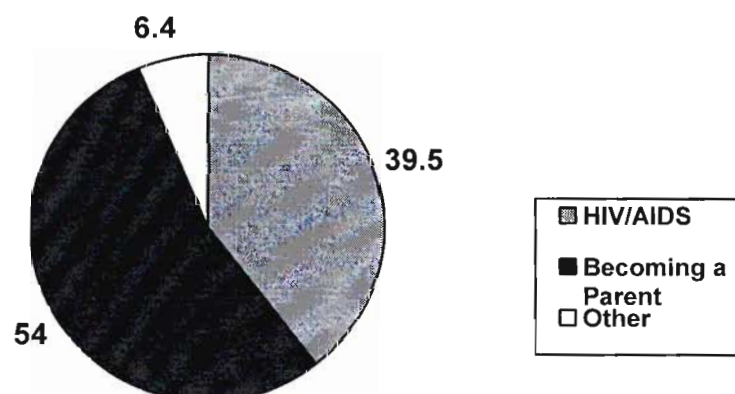
Graph 5.3. Perceptions of risk which young men face when they engage in sexual intercourse



A majority of the respondents (76.6%) associated sexual intercourse with the risk of disease for men. This reveals that many young people are aware of the risks involved in unprotected sexual intercourse, yet they continue to engage in risky sexual activity.

For women, however, the greatest risk when engaging in sexual intercourse was considered by a majority of the respondents to the questionnaire, to be pregnancy, as is evident in graph 5.4.

Graph 5.4. Perceptions of risks faced by young women who engaged in risky sexual behaviour



Pregnancy was viewed as a more immediate problem which had to be given urgent consideration by women. The transmission of disease, for example, HIV/AIDS, was viewed as a matter of secondary importance when women engaged in risky sexual behaviour. This might be due to young people's experience of unplanned pregnancy, which lasts nine months, and impacts negatively on them and their moral standing in their families, schools and communities, as compared with infection with HIV, which is a slow acting virus and affects people over years before taking its final toll on their lives. It is possible that young people perceive infection with HIV as being easier to masquerade as another illness; pregnancy, on the other hand, cannot be "hidden", nor can it be dismissed as "another ailment". Harrison (2002:45), who researched the influence of social factors on the risk for HIV infection among rural youth in KwaZulu Natal, South Africa, found that although adolescent girls were scared of contracting HIV, pregnancy was a far more intense and immediate fear. Many girls knew women who became pregnant as teenagers, and were familiar with the consequences.

The fear of pregnancy might be the reason why many young women use non-barrier methods, like contraceptive pills and injections, instead of condoms. It might also be a factor which adds to the momentum of the spread of HIV/AIDS.

5.4.4. Impact of risky behaviour on one's future

The questionnaire respondents were asked to write about how they perceive their future would be affected if they, as young people, engaged in sexual intercourse. The following responses will be explored:

F(#1): *It (the future) can be affected in many ways. If the person gets HIV/AIDS, their plans for the future will be ruined because they'll be getting sick.*

Although the question was directed at the respondent, the respondent chose to focus on how another person's future will be affected. She deflected attention about the consequences of sexual intercourse away from herself. She did not envisage herself as being affected but viewed HIV/AIDS as a disease which is contracted by other people. Some respondents simply blocked out the question, for example,
M(#10): *I don't know.*

This showed a refusal to think about how sexual intercourse, at an early age, could impact on his future. He was possibly afraid to contemplate the consequences of unprotected sex.

Others, like M(#14) left out the answer completely. He chose not to respond at all.

This brings to mind the cognitive avoidance theory³⁰ (refer to section 2.4), which explains why people, who are afraid of a phenomenon in society, for example, HIV/AIDS, consciously block out information that might pertain to themselves. They use this as a coping mechanism to deal with a situation of which they are fearful.

5.4.5. Power and resistance

Many reasons for young people engaging in risky sexual behaviour were offered by the respondents. Kurti's view was that young people engaged in risky sexual behaviour to register their resistance to their parents' wishes.

Foucault (1991:6), in his *History of Sexuality*, explores the relationship between sex and power in terms of repression. He asserts that if sex is repressed, then the fact that one speaks about it (and, as is the case of several interviewees in this research, engage in it) is an act of deliberate transgression. Such a person places her/himself outside the reach of power and upsets the established law with a view towards freedom from socially imposed rules. Sexual oppression is linked to acts of resistance which bring a sense of "promised freedom". Prohibition from speaking about sex and denial (from engaging in sexual intercourse) are forms in which power is exercised. For Foucault, the concepts of resistance and pleasure co-exist. In this work, the act of resistance of young people to the rules of established, powerful features like their parents, serves to generate in young people a sense of power. In this way, power continues to circulate.

One way in which sex is repressed, is by associating it with guilt and sin (Foucault, 1991:9). The questionnaire respondents associated the consequences of engaging in

³⁰ Cognitive avoidance theory explains how people, who are confronted by frightening information (like the consequences of HIV infection), deliberately obliterate this information from their conscious thought processes.

sexual intercourse with guilt, regret, sadness and death. Among the 124 questionnaires which were analysed, 86 respondents made this link for women.

Foucault (1991:19-21) also alludes to the role of Catholicism in attributing more importance in penance to “insinuations of the flesh” (desires, thoughts, voluptuous imaginings), where the flesh became the “root of all evil”. He goes on to add that this desire of the flesh, this evil, afflicted the whole man who had to carefully examine his memory, understanding, will, thoughts, words and actions. This is a way of taking charge of sex and exercising power and control over it.

5.4.6. In and Out of control sexual desires

On risky sex, Eliza could not see what the hue and cry about sexual intercourse without a condom was about. She held the view that a pill or an injection could be used to prevent the transmission of HIV, when she stated:

A pill, injection. I think this can help them from falling pregnant and getting the disease.

When questioned further, she stated that she did not need a pill to prevent HIV/AIDS or pregnancy, and that in the unlikely event of her becoming pregnant, she would choose to abort the foetus. She asserted that she was old enough to take care of herself in matters of sexual decision-making. According to this young woman, there was no personal risk of her contracting HIV because of the physical position which she adopted during sexual intercourse. She viewed other young people as being at risk for HIV/AIDS. She also experimented with bisexual practices to alleviate her boredom with male partners and because it made her feel good.

Two factors which fuel Eliza’s risky sexual behaviour become immediately evident, namely:

- Her demand to be regarded as an autonomous individual who has the right to control her decisions about sexual activity.
- Her subscription to the myth that positional factors during sexual intercourse can prevent the transmission of HIV/AIDS.

Patsy felt that the lack of self-discipline and control among young people placed them at a higher risk for contracting HIV. She stated that alcohol consumption also increased one's sexual appetite and decreased one's sense of self-control as is evident in the following excerpt:

... because of fun... they get drunk... they can't control their horny selves...

The need to lay claim to adult status probably motivates young people to use alcohol and other intoxicating substances. Here, the issue is not about one's rights to assert control over one's sexual decision-making; instead, it is the lack of control which is associated with intoxicating substances.

Patsy viewed young people as becoming "caught up in the moment" and not using condoms. The lack of planning in favour of impulsive behaviour was highlighted by this respondent. This young woman believed that love for one's partner was a driving force which led to sexual intercourse. She shared the view of Moonlight, who asserted that sex was addictive, and therefore difficult to control.

5.4.7. On becoming a Playa

Moonlight justified having several boyfriends (becoming a playa) to "get even" with her boyfriend, who was popular among other girls. This is evident in the following articulation by Moonlight: *'cause one can be a playa and one can get played by one.*

Deceitful behaviour with her partner was evident throughout the interview. She asserted that sexual intercourse was addictive and that the pleasure of sex was more important than the need to reflect on safe sex strategies. According to her, young peoples' chances of becoming infected with HIV are increased through coercion of these people into sexual intercourse.

Her response was similar to that of Eliza, who became bored with one sexual partner, as can be seen by the following quotation: *You ... get tired of the guy. And you ... go after his friends.* Clearly, she favoured polygny. In her opinion, having multiple sexual partners was one way in which sex could be fun. Patsy's relationship with many partners appeared to have been driven by the need to "equalize" power relations

between her boyfriend and herself, as well as the need for variation which brought “fun” into her life and heightened her sense of pleasure.

A co-researcher’s reflection on a young man who had many girlfriends appears in the following journal entry:

05/07/2004

5 timing (as opposed to 2- timing)

There’s a guy who is skinny, dark and green-eyed. He has nothing going for him except his eyes. And on top of it all he has 5 girlfriends, all in the same school. What surprises me is that these girls don’t know they are being played by him. What is wrong with these girls?

In this account, the school is being constructed as a sexual space where relationships with multiple partners get enacted.

5.4.8. HIV/AIDS: A Bedroom Disease

Reeves held the myth that he was not at risk for contracting HIV/AIDS through unprotected sexual intercourse because he believed that HIV/AIDS was a “bedroom disease”, that is, HIV was only transmitted if one engaged in sexual intercourse in the bedroom, when he said:

I cannot get this disease... I believe that HIV is a bedroom disease. So I do not have sex in the bedroom.

He stated that he alleviated his risk for the disease by engaging in sexual intercourse in other places, such as the car, the toilet and the school. In an effort to unpack the concept of HIV/AIDS as a “bedroom disease”, the co-researcher requested clarity about this from Reeves after the interview. Reeves indicated that his personal experience with people who contracted the disease was that they had engaged in sexual intercourse in the bedroom. He added that many of his peers, who engaged in unprotected sexual intercourse, did not contract HIV because they used the toilet and other places which excluded the bedroom. It appeared that he shared the belief that HIV/AIDS was a “bedroom disease” with his peers (refer to appendix G).

According to Ndu, young people are encouraged to engage in sexual intercourse when their parents speak to them about sexual issues and when they watch television. He also

admitted that he had held the belief that only older people get HIV/AIDS, when he offered the following information:

I said: "Ah, AIDS and stuff. People who catch this disease are people who are older than me"

This had resulted in him having engaged in unprotected sexual intercourse. At the time of the interview, he was very fearful that he might be HIV positive.

5.4.9. Perceptions of personal risk for HIV/AIDS

Vijay perceived his personal risk for contracting HIV as being of an accidental nature, for example, being pierced with a needle. He added that only in the event of non-consensual sex being forced upon him, could the risk of HIV being sexually transmitted, apply to him. Other young people, in his view, were at a greater risk of contracting HIV because of their desire to experiment with sexual intercourse.

Personal risk for HIV/AIDS for Vusi would also arise out of possibly accidental events, for example, coming into contact with needles with infected blood. He perceived the risk for HIV/AIDS for other young people as being related to sexual intercourse with multiple sexual partners, as well as contact with infected blood. He shared Raj's view that peer pressure was a driving force behind risky sexual behaviour. He sourced information of a sexual nature from his peers; this, in my opinion, could also enhance his risk for HIV/AIDS if his peers were misinformed about the disease.

Table 5.6. Perceptions of male respondents about contracting HIV

Males	Do you believe that you can contact HIV	Believe other people can contact HIV
Yes	29.0	32.3
No	9.7	4.0

Graph 5.5. Perceptions of male respondents about contracting HIV

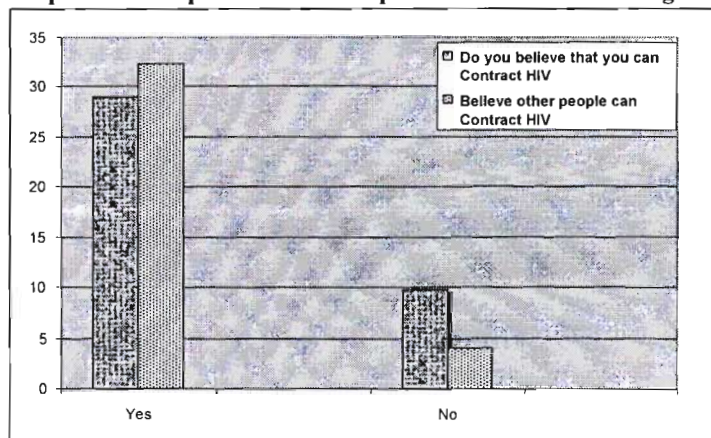
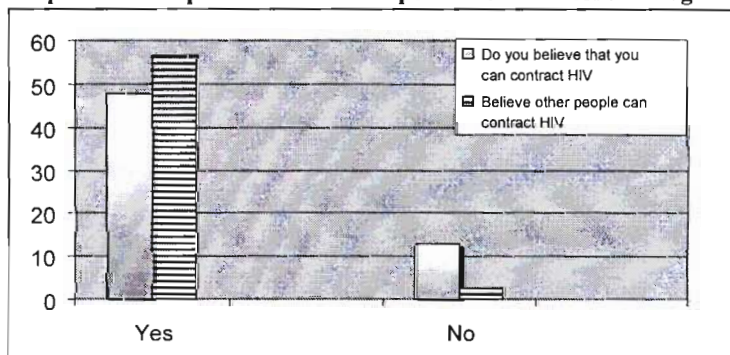


Table 5.7. Perceptions of female respondents about contracting HIV

Females	Do you believe that you can contact HIV	Believe other people can contact HIV
Yes	47.6	56.5
No	12.9	2.4

Graph 5.6. Perceptions of female respondents about contracting HIV



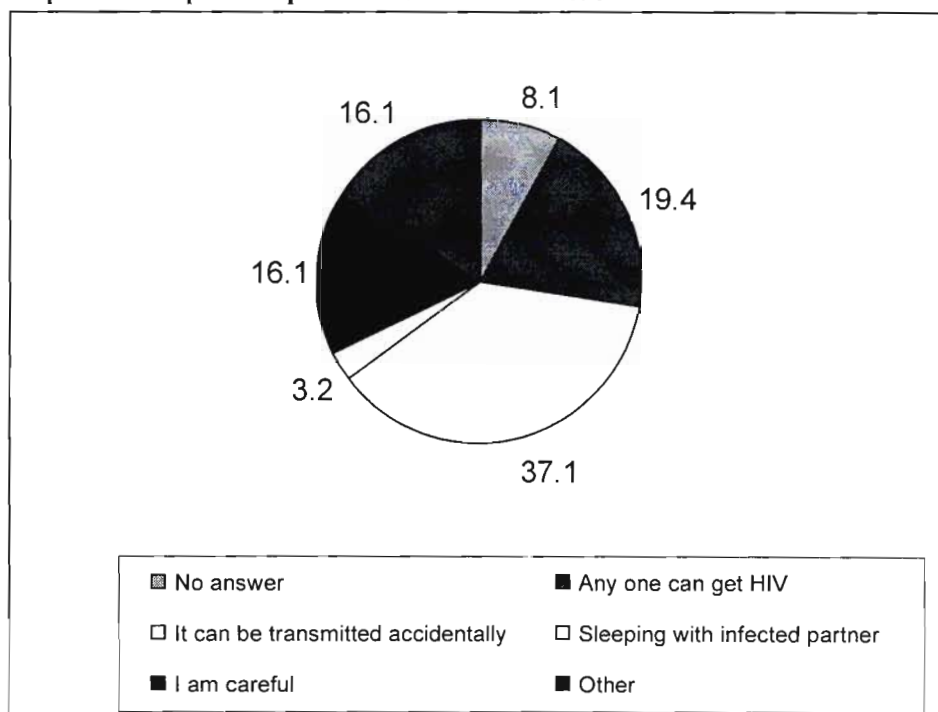
Graphs 5.5 and 5.6. reveal that both the male and female respondents perceived themselves to be likely to contract HIV/AIDS. Other people, however, were viewed as at greater risk than themselves for contracting the virus.

This has implications for HIV/AIDS preventative programs. If young people view themselves as being at lower risk than others for contracting HIV, it is possible that they will not take the precautions which are required for disease prevention. They might

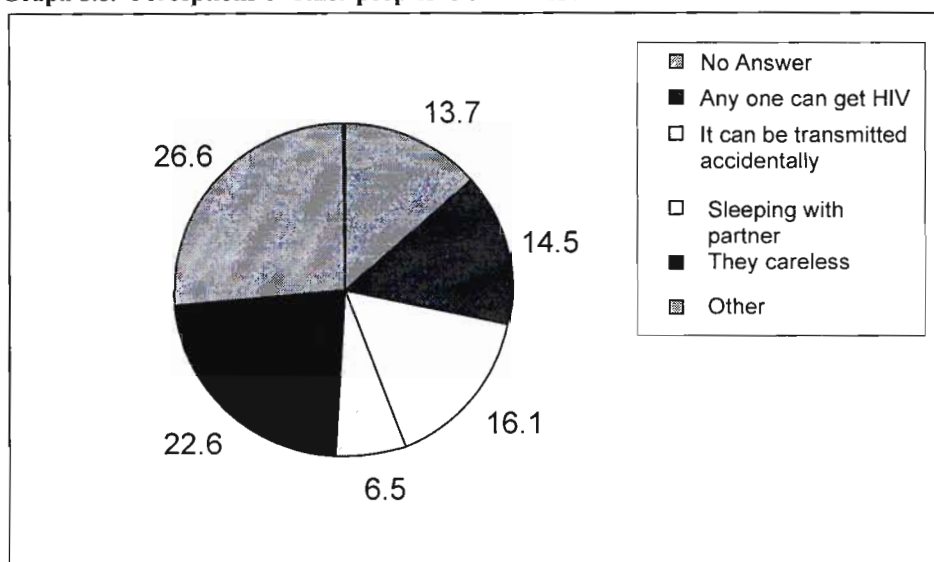
view disease prevention strategies as being more applicable to other people, who, according to them, are at greater risk. I base these views on the Health Belief Model (alluded to in section 2.7.3), which states that people will actively avoid disease if they believe they are susceptible to it.

When the questionnaire respondents were asked to explain why they believed that they, as well as other people, could contract HIV, the following reasons, which are presented in graphs 5.7 and 5.8, were given.

Graph 5.7. Perceptions of personal risk for HIV infection



Graph 5.8. Perceptions of other peoples' risk for HIV infection



According to graph 5.7, a majority of the respondents (37.1%), indicated that their personal risk for HIV would arise out of incidents of an accidental nature. The following excerpts from the questionnaires support these statistics. In response to the question “Explain why you believe you can/cannot contract HIV” (refer to appendix C), the following responses reveal that the participants’ perceptions of personal risk for the disease was attributed to non-sexual transmission of the virus.

M#28: *Because I can get hurt and bleed and maybe the person who helps (me) got AIDS.*

His response for why other people can contract HIV reads: *Because the world is full of temptation and people can't stop themselves from it.* For this respondent, he did not see himself as being tempted by the *pleasures of the world*; he saw other people falling into this trap and consequently, being at greater risk for HIV/AIDS.

Another respondent’s perception of her personal risk for HIV/AIDS was explained in the following way:

F#25: *Walking in the mall, someone can prick you.*

Questionnaire respondent F#24 indicated that she did not view herself as being at risk for HIV, *because I practice safe sex and I use a condom*, but she saw other people being at risk for AIDS *because some (people) don't practice safe sex.*

Accidental transmission would place respondent F#23 at personal risk for HIV/AIDS, as is clear by her response:

Because I may not be having sex, but it (HIV transmission) may happen by mistake. Maybe blood or if I am mistakenly injected.

She saw other people as being at risk for HIV/AIDS because: ... *they may not be having safe sex or using clean needles.*

Many of the questionnaire respondents (22.6% reflected on graph 5.8) believed that other people could contract HIV because *they are careless*. Only 16.1% of the responses (in graph 5.8) pointed to accidents as being a possible cause of transmission for other people, while they saw their personal for accidental infection to be markedly higher (37.1% in graph 5.7). Although most young people in this study indicated that they perceived themselves to be at risk for HIV/AIDS, they perceived other people to be at higher risk for the disease than themselves. This finding applies to both the female as well as the male respondents in my study.

Studies conducted in the South African context have shown that a large proportion of South African adolescents are sexually active (Reproductive Health Unit: 2004), and are at high risk for HIV infection. Selikow et al (2002:22) state that in South Africa, youth are particularly vulnerable to HIV infection, with more than 7000 young people becoming infected daily. Harrison (2002:43-57) conducted research among youth in rural areas of South Africa. In her article *The Social dynamics of adolescent risk*³¹ for HIV, she indicates that young South African women are most severely affected by HIV. Her investigation reveals that boys view themselves as being at lower risk for HIV, as compared to girls. She attributes this belief among boys to their feelings of invincibility.

Morrell et al (2002:11-12) indicate that South Africa is the epicenter of the HIV/AIDS pandemic, with a larger percentage of girls, compared to boys, being infected. This points to the disease as not only particularly affecting young people, but also navigating

³¹ Harrison researched social factors which put youth in rural KwaZulu Natal in South Africa at risk for HIV, to enable her to make recommendations in terms of an effective intervention program

its course in a gendered pattern. Pattman (2002:33) concurs on the high rate of infection among young people in Southern Africa.

5.4.10. Sexual Spaces

Both the male and female respondents offered similar information about sexual spaces. Parties inside and away from their homes, were sites at which sexual intercourse was initiated or regularly practiced. Dancing and consuming alcohol were activities which were associated with sexual intercourse. The local beach, as well as the (setting of the) Bahamas, created a romantic setting for sexual intercourse. For Reeves, sexual intercourse had to take place away from the bedroom which, in his view, was the sole site for the transmission of HIV. He offered the following information about where he engaged in sexual intercourse:

... the car, at my school prefect room, as well as the toilet.

According to him, prefects were entrusted with maintaining school discipline and were given their own prefect room where ...

... we do our own thing in our own room ... we can have group sex without them (the teachers) knowing.

He painted the prefect room as a place where one could engage on an orgy, on the school premises. Eliza explained that she engaged in sexual intercourse at home or at school. When asked for further details about using the school as a site for sexual practices, she stated:

... we have studies till about 4 o' clock... we usually wait till all the people are gone. So, we use the teacher's table. And we do it... that is all I can say.

The school as a sexual space was also cited by several co-researchers. In her journal entry, one co-researcher wrote:

23/04/2004

At the age of 15 years, the chemical reaction is sending sparks everywhere. No one can help but look on as two teens kiss in school during the lunch break. This is irresponsible because, for one, you are on school property and two, you are making people around you feel disgusted.

The co-researcher is aware that the participants in this type of play are breaching the school rules. While school is a place where gender is constructed, usually along axes of

differentiation, it is also a place where resistance to powerful institutions of authority is acted out.

Another journal entry read:

05/05/2004

Student has hots for teacher

He is old, far older (than her). He is OK looking but there is better, far better. But why is it that everytime, one out of ten girls falls for Mr Smurf, who they know is out of their league. What do they see in him. Come on! You know there is not a one in a million chance of you getting with him.

What this reveals is that the school not only serves as a space for sexual attraction among young people, it also involves inter-generational attraction.

For some learners, absconding from school to meet their partners was common, as is evident in the following journal entry:

14/05/2004

Pupils bunk school to go to the clubs. Things that happen in clubs are bad: people get drunk, drugged, etcetera, and this ends up in sexual activity. A girl invited boys to her house, while her parents were not there. She ended up in the shower with one boy. She didn't realize that this boy would tell his friends what happened.

The use of clubs, as well as the home, as a sexual space while parents were under the impression that their children were at school, is discussed. The boastfulness on the part of the boy, about his sexual prowess, also emerges.

Many learners at the research site attended classes (extra tuition) which were held out of the normal school time, usually during weekends. The use of this "tuition time" for girls and boys to meet was also highlighted.

5.4.11. Knowledge and skills about HIV/AIDS

A majority of the questionnaire respondents, in my study, believed that they had a substantial amount of knowledge about HIV/AIDS, as is evident in the following table.

Table 5.8. Knowledge about HIV/AIDS

Perception	What is HIV/AIDS?	How is HIV transmitted?	How can HIV infection be prevented?
Know a lot	54.0	73.4	66.1
Know very little	11.3	8.9	8.9
Know average	34.7	17.7	25.0
Total	100	100	100

Many of these participants (73.4%) believed that they had excellent knowledge about transmission of HIV, while 66.1% rated their knowledge about preventative strategies as highly competent, according to the data presented in table 5.8. The young people, in my study, were confident about their knowledge about HIV/AIDS.

The fatalistic view towards HIV/AIDS was held by several interviewees in my study, for example:

Eliza: *HIV/AIDS kills.*

Reeves: *This disease kills and there is no cure for it.*

Raj: *It's deadly and it kills people.*

The “sick of AIDS talk” was more prevalent among the female respondents, for example, when asked about what she believed she needed to know about HIV/AIDS, Kurti replied:

Nothing really. It's actually a nagging thing to us because everyone is telling us “HIV, HIV/AIDS is bad. You are going to die” or whatever.

There is a hint of careless abandon on the topic of HIV/AIDS. Patsy dismissed HIV/AIDS as a *common disease*. Moonlight did not want to hear more about this disease, as is evident by the following remark:

I don't think I need to know anything 'cause what I know is what I know and these people come and tell me. But it's not like I'm interested.

Foucault (1991:6), in his *History of Sexuality*, examines the relationship between sex and power in terms of repression. In his exploration of the history of sexuality, he sheds light on the time when sexuality became carefully confined to the parent's bedroom; when sexuality was acknowledged mainly in terms of its utility value, which was reproduction; when, on the subject of sex, “silence became the rule”. While the interviewees in my study were not silent about even intimate sexual issues, many

respondents to the questionnaires indicated that they were not able to communicate freely about their sexual decisions.

The inability of many participants who answered the questionnaire, to speak about sexual intercourse, may be linked to the historical imposition of silence on issues of sexuality. Many of these respondents were probably fearful of upsetting the rule of silence about sexuality. While 45.2% of the respondents felt confident about their skills to exit a risky situation (refer to table 5.9), a relatively large percentage (34.7%) indicated that they did not possess highly competent skills in this regard. There is probably a saturation of scientific facts among the young people, concerning the transmission and prevention of HIV/AIDS. Not enough appears to be done in terms of equipping young people with social skills which will enable them to decrease their risk for this disease.

5.4.12. Gender as a feature of risky behaviour

The following discussion shows how risky sexual behaviour is rooted in traditional patterns of gendering.

Disch (2003:248) asserts that in the United States of America, young men between the ages of 20 and 24 years have the highest risk for STDs, and that this is partly due to their commitment to the risk-taking aspects of masculinity. In Harrison's (2002) study, risk taking aspects of masculinity were explored among young South African men. Her findings were in keeping with the assertion by Disch. Harrison's (2002:44) analysis revealed that young men were influenced in the practices of having casual sexual relationships with girls, as well as multiple, concurrent partners because these behaviours contributed to them maintaining their masculine self-image.

According to the interview data in my study, the lack of control of risky sexual activity was also associated with the instinctive desire for sex, which emerged as a masculine trait, as was clear from Sunshine's opinions. He articulated that young men have sex to reinforce a positive masculine identity among their peers, as is evidenced by the following excerpt from the interview transcript:

Candy: *Do you think women have the right to decide about their sexual activity?*

Sunshine:

Yes. .. They are offering their bodies on the line. So they should have made the choice before they did it. So they have a choice, obviously.

When asked about the rights of young men to decide about their sexual activity, Sunshine responded:

Well, to young men, it's (sexual intercourse) kind of instinctive. It's a choice, but with every man it leans to 90% on the "yes" side (to engage in sexual intercourse).

For Sunshine, risky behaviour is precipitated by out of control sexual desires which are instinctive to men, but not to women. Women who *put their bodies on the line*, have a choice about responsible sexual decision-making, according to him. The construction of gender along axes of differentiation emerges. This reflects gendering that is constructed through adherence to a cultural template.

Reeves emphasized that due to physiological changes in his body, he could not control his urge for sexual intercourse. Masturbation, according to him, was an embarrassing option. Reeves favoured engaging in sexual intercourse with several women as a way to decrease boredom in his relationships. He highlighted the addictive nature of sex. Here, a lack of control is rationalized by a physiological explanation.

The following journal entry by a co-researcher sheds more light on gender patterns and risky sexual behaviour:

02/06/2004

Today, I (female co-researcher) spoke to one of my (male) friends. He was looking at this girl and boy who were standing together. He then told me that I must always remember that a boy can have more than one girlfriend because he thinks he's "cool", but if a girl does this, she is known as a slut. It just struck me that even if men do wrong, they can go around the world and be (regarded as) a decent person, but if a girl does that, she's just known as a slut.

The reflection highlights how "normal" masculine behaviour contributes to young men having multiple sexual partners. The construction of gender using different principles for men and women encourages unsafe behaviour as a mark of "true" masculinity, but

discourages the same behaviour for women. This points to different rules which govern gendering and which allow for boys to be made masculine and girls to be made feminine.

In my study, gender is something that the participants actively construct, by inventing categories of masculinity and femininity and positioning themselves in relation to these categories. Their attempts to link attitudes with gender identity constructions, allows a researcher not only to see how their views about sex and gender fuel the spread of HIV/AIDS, but also why they (the research participants) are vested in these. The participants negotiate certain positions which are made available to them by traditional cultural discourses on gender. I do not suggest that they are puppets of cultural transmission; on the contrary, I see in their ability to construct gender, the potential of reforming gender patterns.

5.4.12.1. Risky behaviour, communication and assertiveness

The risk for women contracting HIV/AIDS was heightened by their inability to communicate their desires assertively and effectively, according to the interviewee, Vijay. This finding is affirmed by the following percentages to show results which were obtained from the questionnaire respondents, who assessed their skills to prevent HIV infection.

Table 5.9. Skills to prevent HIV/AIDS

Perception	Skills involved when speaking to a partner about sexual intercourse	How to say “no” to risky situations	How to leave a dangerous/risky situation
Know a lot	20.2	59.7	45.2
Know very little	11.3	16.1	19.4
Know average	41.9	23.4	34.7
Missing	1.6	0.8	0.8
Total	100	100	100

According to the results represented on table 5.9, many respondents (41.9%) did not feel very confident to speak about sexual intercourse. Only one fifth (20.2%) of the respondents believed that they could communicate their sexual decisions effectively. My findings are supported by those in a study about risk for HIV infection among rural youth in South Africa, conducted by Harrison (2002:46). The girls in Harrison’s study

could not communicate their intentions about sexual intercourse effectively. Girls who said “no” to sex ended up engaging in sexual intercourse anyway. Rarely was there any discussion about condom use before sex.

5.4.12.2. Women’s “investments” as a factor in risky behaviour

Halson (1994:102) uses Wendy Hollway’s concepts of “investments” and “contradictions” when analyzing how young women negotiate their heterosexual relationships and encounters. She asserts that the investments which young women have in heterosexual relationships are *pleasure* and *status*. Pleasure was an important reason why the young women in my study engaged in sexual intercourse. Eliza, in particular, boasted about her reputation as a *superbitch* which gave her an “ultra-cool” position, which was, in her view, in synch with the youth culture. (It appears that infamy is the new path to fame!). Her status was rewarded by her being extremely popular among members of both sex groups. She valued this sense of being popular immensely.

Raj explained that women engaged in risky behaviour because they are covertly coerced into participating in sexual intercourse with their partners. He stated that women’s refusal to comply with the sexual requests of their male partners could result in their partners ending the relationship. Like Vusi, he also perceived peer pressure, especially among boys, to play a vital role in young peoples’ risky sexual behaviour.

This shows that gender operates to oppress both men and women, and that men and women are active participants in creating masculinities and femininities which make them vulnerable to HIV infection. I do not intend to underplay the real oppression of women, but I contend that it is necessary to understand women’s agency, and to look to ways in which women can be empowered to challenge harmful gender relations.

5.4.12.3. Sexual Attraction: Is beauty the beast?

Yet another feature of risky sexual behaviour was physical attraction. Kurti was charmed by boys who gave her their attention. For Patsy, boys were attracted purely by girls’ physical beauty and boys lacked the ability to appreciate deeper, non-physical attributes in girls, as is evident in the following quotation:

I guess they (boys) are so taken in by beauty, they don't know your inner self, your heart and stuff like that. They just want what's on the outside.

The boys (male witnesses) of her body, come to structure Kurti's consciousness of herself when she says: *They are so taken in by beauty*. However, she understands that she is more than a bodily being, when she comments: *They don't know your inner self*. In this way, Kurti challenges the traditional notion that "the body is the woman", and provides a space for gender reform.

Reeves had the following comment to make about why girls find him attractive:

Because of my style, my look, everything that I wear are so perfect for me, and they (girls) find it attractive.

He viewed himself almost as a sexual athlete, a potent expert with the ability to attract and satisfy women sexually. He had a positive self esteem.

Sunshine explained that a boy's attire, for example, wearing a vest at a club, made him irresistible to women. Physical activity was important to him. He claimed that he was popular among girls because of his:

... training, karate and stuff. I'm a very physically active person... It (the attention from girls) makes me feel over the moon. Because to get so much attention from beautiful girls, I might add, it makes you feel a whole lot better about yourself.

Vusi believed that girls found him attractive because he looked good. Physical features were important in girl-boy relationships, and this physical attraction made him feel a sense of pride in himself.

Boys are also pressured, by traditional templates of masculinity, to be athletic and physically attractive.

Raj had mixed feelings about girls' attraction to him, because he said:

It makes me feel good in one way but in the other not very good because of diseases like AIDS ... I might feel like having sex with them or they might feel the same way about me.

He saw sexual attraction almost as a case of fatal attraction in light of the HIV/AIDS pandemic.

5.5. Concluding remarks

Multiple factors which impact on the sexual behaviour of young people were explored. The engagement of co-researchers to solicit a large part of the data was critical in decreasing the power differentials between the researcher and the researched. It was also used as a strategy to obtain candid information. The interviewers were easily able to tap into intimacy issues. This was probably attributed to the fact that the interviewees were their peers. In this way, an insight was gained into young peoples' personal sexual lives and their attitudes.

The young person who serves as an interviewer is able, with seemingly little difficulty, to draw out issues which reflect an insatiable sexual appetite of some young people. The issue of demanding to be in control of one's sexual decision-making, and then attributing out of control sexual desires to physiological development and traditional constructions of masculinity, added controversy to these findings.

Some interviewees sounded overconfident, to the extent that it appeared to have impacted negatively on the interviewer. The interviewer (co-researcher) seemed somewhat disempowered, because he was surprised by some of the responses. It is beyond the scope of this study to explore ways in which young people who serve as co-researchers, can be protected from feelings of disempowerment during the research process. However, it is an avenue which, in my opinion, should be researched further if youth activism is to be used as a strategy in stemming the HIV/AIDS pandemic.

The pursuit of pleasure as being of paramount importance in young peoples' lives; a lack of confidence in the efficacy of condoms to prevent transmission of disease also contributed to unsafe sexual practices; the view that pregnancy is a more immediate problem than the spread of disease; young peoples' views about the impact of risky behaviour on their lives; the struggle for power in relationships with parents, the struggle to control sexual desires; young peoples' rationale for engaging in sexual intercourse with multiple partners; their perceptions of, firstly, their personal, and secondly, other peoples' vulnerability for HIV/AIDS; sexual spaces in which risky behaviour gets enacted; ways in which young peoples' perceptions of their knowledge and skills impact on risk; and risky behaviour as it is embedded in patterns of

gendering: each of these factors provide a context specific discussion about risky sexual behaviour. These results show that the construction of gender along axes of differentiation made safe sex strategies difficult to pursue.

5.6. Conclusion

This chapter began with an exploration into the ways in which the co-researchers, who were deep insiders in the field, were able to tap easily into intimacy issues and to gain an insight into factors which resulted in risky sexual behaviour. An exploration into the issue of gender as a feature of risky behaviour in general, and the ways in which construction of gender along axes of differentiation made safe sex strategies difficult to pursue, was detailed. The construction of sexual spaces in which risky behaviour gets enacted, issues of control over sexual desires, intergenerational power struggles and their relatedness to risky sexual behaviour, were discussed. The differences between young peoples' perceptions of their personal risk for contracting HIV on one hand, and their perceptions of other peoples' risk for contracting HIV on the other hand, were explored. The ways in which sex and desire are deeply entwined, and how this impacts in risky sexual practices, were detailed.

In the next chapter, I show how the co-researchers engaged in visual methodologies to generate, solicit and interpret data. I afford this part of the work its own, separate space in this chapter because it was totally driven by the co-researchers. I did not filter their findings to arrive at conclusions. This section presents *their* pictures and *their* voices.

CHAPTER SIX

Enabling young people through photo voice: *I did not only take the shots, I also called the shots*

6.1. Introduction

Power differentials between the researcher and the researched surface in most research settings. One way to decrease these power differentials is by engaging people from the research community to carry out research activities. Many researchers have looked to photo voice, as a way of decreasing power differentials, and making the identity and role of the researcher increasingly diffuse in social research. What follows is a brief review the perspectives of some of these researchers.

Weinberg and Stahel, in their preface on Ewald's work entitled *Secret Games* (2000:6), offer the following comment:

The history of photography exhibits a conspicuous tradition of tension between photographer and subject. Documentary photographs have always been especially concerned with minimizing the distance and maximizing the intimacy between themselves and their material ... encouraging their subjects to speak for themselves.

From the earliest days of photography, up to the present moment, the greatest differences which create a gap between the photographer and the subject are those of the oppressed triad: race, ethnicity and class. This dissonance is derived from the power that the photographer comes to exert on the subject. The photographer determines the pose, angle, lighting and exposure of the subject; the subject relinquishes power over the pictures. The photographer exercises control over how the photographs are seen, by whom they are viewed and in what context.

Karlsson (2003:70) agrees with these viewpoints, and adds to them by shedding light on ways in which the photographer can potentially skew the interpretation of an image by drawing attention to some spatial practices whilst neglecting others. She alludes to modern technology which allows a photographer to change images by cropping or erasure and asserts that this tantamounts to betraying the viewer into seeing or not

seeing something within the frame. For her, such intrusion is unethical because it reshapes the image according to the bias of the photographer.

Ewald, according to Weinberg and Stahel (in Ewald 2000:8), is among the researchers who acknowledged the power differences between the photographer and subject and decided, in her numerous camera projects, to provide her students with the tools (cameras) and skills (technological know how) to represent their own lives through photography. In doing so, she challenged the categorical differences between photographer and subject, and adult and child. Her realization was that by handing over the ways of production of meaning to students, she could decrease the power differentials between the photographer and the subject. For Ewald, this type of engagement of young people preserves and enhances their vision of reality.

Kaplan (2005) used photography as one of the methods to promote reflection on inclusivity in schools in Zambia and Tanzania. The project in which Kaplan was involved was in collaboration with researchers of EENET (Enabling Education Network) at the University of Manchester. Kaplan found that the value of engaging children in taking their own photographs was the discussions which those photographs generated. New issues about how children could improve the school by identifying and photographing “problems”, and suggesting solutions, showed how children became increasingly engaged with the broader community. Adults who viewed the photographs and listened to the children’s discussions began to share information about the education system with the children. Previously, such information had been considered to have been too complex for children’s understanding and had been shared in adult-only groups. Kaplan’s photo voice study shed more light on the links between issues of power and control, and showed how reciprocity instead of hierarchy could characterize relationships between children and adults.

According to Strack et al (2004:49), the usefulness of photo voice is that it allows for photographs to be taken by people who have little money and power, and for these photographs to be used to understand the needs of a community. During this process, participants become empowered to inform community leaders about community assets and deficits; the result is that social change may be induced by policy makers. In

addition, photo voice provides youth with the opportunity to develop their personal and social identities. This can be fundamental in the process of developing social competency.

The use of photo voice, as a methodology and an intervention in social research, is inextricably linked to the tenets of feminist and participatory action research models. Keller et al, in Strack et al (2004) emphasise that the principles which underpin feminist research methodology is that *no one is in a better position to study and understand the issues of a group than the people within that group*. For Wang et al (2001:560), the use of photo voice, as a method, is participatory action research that entrusts cameras to those people who seldom have the opportunity to express their visions of reality. Wang et al (2001:6) share the views of Strack et al (2004:50), when they assert that the process of participating in photo voice projects can enable young people to:

- (i) use photographs to document and reflect the needs and assets of their communities
- (ii) create opportunities for dialogue about salient community issues
- (iii) create opportunities for social change by policy makers

Youniss and Yates cited by Strack et al (2004:50), sum up the value of photo voice in the following excerpt:

Youth should and need to be given the opportunity to build and confirm their abilities, to construct on their experiences and insights, and to develop social morality for becoming positive agents within their community and society.

Ewald (2001:7) adds to these views by encouraging researchers to direct their attention to the benefits of positive visual stimulation in social research. She asserts that visual stimulation gives young people the opportunity to express their complex, emotional lives.

It is with the works of these researchers in mind, that I explore the creative process of photography as a means of demonstrating how co-researchers can be enabled to actively participate in HIV/AIDS research. Photographs formed part of the data which was generated by the co-researchers. The use of visual methodology created the space for

techno-training and subsequent enablement and empowerment of the co-researchers through a metamorphic process.

Photographs were taken by the co-researchers in an effort to explore the primary research question which is:

How can young people be enabled to serve as researchers in the context of HIV/AIDS?

I respond to this question by focusing on the following sub-question:

What impact does participating in an HIV/AIDS related research project have on young researchers' perceptions of gender and risky sexual behaviour?

In addition to taking photographs, the co-researchers analysed the photographs at the beginning of the project as well as at the end of their period of involvement in the work. This spanned a period of nine months. (See the training schedule – Table 4.1 - for more detail).

Several photographs were taken by the co-researchers. I compared them with their analyses and admitted only those pictures which were interpreted in ways which showed the greatest amount of transformation of the co-researchers, into this chapter.

I refer to this method, where photographs were taken and then analysed, as photo voice. (I borrow “photo voice” from Mitchell et al, 2005a:258). The purposes of using photo voice include the following:

- (i) It provided the co-researchers with a space for the active engagement, participation, immersion and reflection on sexuality.
- (ii) It provided a platform for the expression about their ideas of sexuality.
- (iii) It allowed me to explore how the creative process can involve young people in "taking action" in the context of HIV/AIDS. According to an article entitled "Children First" by Mitchell et al³² (2005b), picture taking and picture viewing are visual testimonies to total absorption in making meaning, since it speaks to

³² Mitchell, together with her research team, engaged in photo-voice projects with grade 7 learners in Durban (in South Africa) and Mbabane (in Swaziland), to highlight ways in which engaging youth as researchers could deepen our understanding of “what works” in terms of HIV/AIDS interventions.

issues in the participatory process in HIV/AIDS activism in general, and youth activism in particular.

- (iv) It allowed me to use visual and participatory elements to design research as a tool for social change.

I found that by using photo voice, the boundaries between what serves as data, and what counts as intervention, were blurred. In my work, intervention refers to using this exercise (taking and interpreting photographs) as an empowerment tool for the co-researchers. The use of photo voice gave a visible face to HIV/AIDS and issues related to sexuality. This exercise suggested that young people do not have to wait for adult research teams to diagnose problems and to give them the answers, but that young people are capable of devising their own solutions.

6.2. Analysis of visual data

After an extensive review of their photographs and their analyses of them, I elected to discuss them within the following themes:

- The Gender Agenda
- Gay or straight?
- Media
- Condoms: Is it on when it is not on?
- Sexual Spaces

I comment on their analyses of the photographs and I share my perceptions of the transformation of the co-researchers' views under the heading "transformed co-researcher". After reading the analyses, I asked the co-researchers about what they believed caused the changes in their interpretations of the photographs. I discuss their reflections on their personal transformation during the period of their involvement with the study (2004 to 2005) under the heading "transformation trigger". Although the temptation for me to contribute to their analyses was great, I elected to allow only their voices to be heard.

During the period that spanned the activities of the co-researchers, which included taking their photographs and their first and final interpretations of the photographs, the co-researchers were totally absorbed in the participatory process of AIDS activism. The

sheer joy of viewing their photographs and using a camera maximised the “play” element for the co-researchers. I saw the potential to use this fun exercise as an empowerment tool, as an opportunity for the co-researchers to, in a sense, remove themselves from society and then to “reframe” society through the lens of a camera. The co-researchers could do what critic and curator, John Szarkowski in Ewald (2001:31), says, that is, to *choose what to include and what to reject using the frame of a camera*. Ewald adds that photographers are recorders of the world by stating: *Who we are and where we stand when we watch the world determines how we see and what we record*.

In taking action through engagement in the project, they became what Mitchell et al (2005b) in their *Children First* article, call *cultural producers*. I contend that if young people can become involved in producing culture, and not simply transmitting long-standing cultural norms, they (young people) can use this as a space for cultural reform in general and the development of safe sex strategies in particular, through the research arena.

In their work, Mitchell et al (2005a:259) state that much of the literature on photo voice as a technique leaves the reader with the impression that it is a “once-off” activity. My work was different, because the photographs were interpreted at the beginning and at the end of the project. This was a move to “go back” and see what other interpretations emerged after the co-researchers had engaged in other activities which included administering questionnaires and conducting interviews. The first and second sets of analyses of the same photographs by the co-researchers differed greatly. I attributed this difference as a sign of the co-researchers “coming of age” in the field of research. During the interval between the first and second sets of interpretations, there were several points of empowerment/disempowerment which could have resulted in their transformation.

On the activity of taking photographs, a journal entry of a co-researcher which was cited and is worth repeating at this point reads: *I did not only take the shots, I also called the shots*. The co-researchers felt a sense of power which was born of the opportunity to drive a major part of the project. They channelled their energy which came from the

powerful feeling of “being in charge” to select the sites for the photographs, as well as to conduct the interviews.

I am reminded about Ewald’s view (2001:120) that when young people are given the choice to take photographs, they experience a sense of pride and high self esteem. They perceive themselves as photographers. Ewald (2001:70), who worked with low ranking members of communities in developing countries, asserts that whenever young people are given the opportunity of picking up a camera and independently deciding what to photograph, they feel proud. For her, mastery of the photographic process can represent the kind of power for many people who have never had the opportunity to present their own visual representations of themselves. The tangible results of photography, that is, having a photograph in one’s hands, had resulted in an increase in her students’ self esteem and expertise.

This part of the project did not, as Wang et al (1994:171) say: *entrust cameras to health specialists, policy makers or professional photographers*, but put them in the hands of young people, who have little access to those who make decisions over their lives. They view the use of photo voice as a way of promoting Paulo Freire’s “education for critical consciousness”.

The following discussion revolves around the co-researchers’ participation in the photo voice activities of my study. The photographs, which were used to express their understanding of sexuality, were taken in and out of the school. The diverse contexts generated a richer view of the perception of sexuality.

The co-researchers’ gathering and analysis of data are presented by the photographs, which are followed by a table which shows the **first** and **final** interpretations of the photographs. The name of the co-researcher appears in bold font; the name which I used to entitle the photograph appears in italics. When referring to the analyses, I will use the name of the co-researcher, followed by “first” for the first (May 2004) set of analyses or “final” for the last (January 2005) set of analyses.

6.2.1. *The gender agenda*

Human beings reproduce gender by behaving in the ways that they have learned are appropriate for their gender status. Gender inappropriate behaviours are rejected by peers and may be formally punished by those in authority; in these ways, gendered norms and expectations are enforced.

Picture 1 was taken by the co-researcher, Luv.



Figure 6.1: Power to young people

Luv

First	Final
Close together Caught in a heated moment at a popular hangout. Her dress is short, pants is tight to show her figure. His hands are all over her. By the looks of things, she doesn't mind.	We are taught about how girls should behave from a young age. I did not think about the rights of the girl. She has the right to dress in a way that makes her feel happy. Her dress could make her feel good about herself. I did not see that the boy was also breaking the school rules. I think he used her to show off.

Researcher Commentary

Dominant ideologies of masculinity which portray men as powerful, aggressive and sexually active are revealed by these interpretations, especially those recorded in May 2004. Cultural and historical factors influence how one interprets the pictures. In Luv First, the couple publicly display affection, thereby contravening the school rules. Foucault's (1991:6) argument in *The History of Sexuality*, is that because sex has been

kept secret, there has been a struggle against this secrecy towards greater freedom of expression. This leads to a reduction of factors which constrain expression of sexuality. Foucault (1991:5) states:

We are informed that if repression has indeed been the fundamental link between power, knowledge, and sexuality... we will not be able to free ourselves from it except at a considerable cost: nothing less than a transgression of laws..., a reinstating of pleasure within reality... will be required.

In this work, Foucault adds that where there is power (established institutions which police sexuality), there is resistance. In Luv Final, both the young girl, as well as the young boy, appear to be willing participants in breaking the rules by overtly expressing their sexuality.

The analysis in Luv First reminds me of a quote by Ambrose Pierce in Saltzberg et al (2003:167):

*To men a man is but a mind. Who cares what face he carries or what he wears?
But woman's body is the woman.*

Women, even young ones, go to great lengths to acquire and maintain the body shape that is deemed acceptable at a particular time in history. When images of beauty change, the female body is also expected to change. While men exercise to build body mass and improve cardiovascular fitness, many women exercise to change the shape of their bodies in order to meet the prescribed requirements of what it means to be beautiful.

Figure 6.1 provides the opportunity for, what Foucault (1991) in Youdell (2005:255) calls the *observation, classification and judgement of bodies*. Figure 6.1 demonstrates the inscription of multiple discourses on the sexed body. In Luv First, he inscribes the requirement for the female-feminine body to deny its desire, to take responsibility for the control and constraint of the body when he writes: *By the look of things, she doesn't mind*. The cost to the girl in the picture allowing the boy to put his hands around her in a public display of desire, is high, and would be potentially constitutive of the whore. The girl's body, as well as her attire, inscribe particular discourses of heterosexual femininity. Unlike the feminine body, the masculine body does not need to be reigned

in or controlled – *it is in control*. His posture inscribes a heterosexual masculinity which is entitled to the feminine body.

Lorber (2003:101) who writes about reconstructing gender, states that "most people voluntarily go along with their society's prescriptions for those of their gender status, because norms and expectations get built into their sense of worth and identity, the way we think, the way we see and hear and speak, the way we feel..."

Bartky (1998) elucidates practices which contribute to the construction of femininity. They include the following:

- External appearance of women (ideal body size and figure)
- Attention to comportment (postures, movement)
- Techniques used to display the female body as an ornamental surface (eg. use of make-up)

These practices "produce a body that is recognisably feminine" and reinforces a "disciplinary project of body perfection". Bartky's assertion that feminine bodily discipline is socially imposed as well as voluntary (self-imposed) is also cited by Reddy (2003:47). Women internalise the feminine ideal to the extent that their ability to contest it becomes eroded. Women, whose behaviour conflicts with the traditional ideals of femininity, are rejected. Reddy (2003:48) suggests that sexual identities are powerfully influenced by "social patterns of expectation and sanction". Gendered environments like schools and families reinforce hegemonic masculinity.

Transformed researcher

In Luv First, the co-researcher is openly critical of the girl. A change is apparent in Luv Final, where the co-researcher possibly feels that his interpretations were biased in favour of the boy. Questions are raised about different expectations of society for boys and girls in terms of moral standards. The later analysis in Luv Final explores a positive self image which the girl might develop, because she is attractively attired. The realization dawns on the co-researcher that the blame for a "misdemeanour" committed by a boy and a girl is often transferred almost totally to the girl.

Transformation trigger

Luv's closest female friend at school (not his girlfriend) was involved in a relationship with another boy. The girl had an argument with her boyfriend at school, to the amusement of the other learners. The girl was deeply hurt by the incident. She later discontinued her relationship with her boyfriend. Enter Luv to listen to her stories of heartache and despair, and to soothe and encourage her. This experience made Luv highly sensitive to the emotions of girls who have boyfriends at school.

Picture 2 taken by co-researcher Candy



Figure 6.2. Woman's body is the Woman

Candy

First	Final
Picture was taken on a cold day (cloudy). This girl showed she is dressed in skimpy clothes even on a cold day because she wants to attract boys to her body. She wants people (especially boys) to look at her.	The girl appears very confident. She feels good about herself. She has a good self esteem. This is a good thing. But she is seen as dressing cheaply. Even I said this at first. I cannot believe how I have become like a puppet, to believe everything that society teaches us. I feel a bit stupid. Now I can say that how she dresses might not have any connection with other people. If a boy dressed skimpily, no one would say it is a bad thing. But we pick on girls so quickly.

Researcher Commentary

Gomez cited in Kumar et al (2000) states that young women are not supposed to desire sex; they are expected to resist sexual advances of young men according to the "dominant femininity script". The co-researcher's comment (in Candy First) reveals her agreement with this "dominant script" by her statement: "The girl showed she is dressed in skimpy clothes even on a cold day because she wants to attract boys to her body". The first interpretation of figure 6.2 reveals that bodies are not simply neutral instruments of self-conscious subjects. The practices of bodies, as well as the ways in which they are clad, are sexed, gendered and sexualized – the female body is already feminized, the feminine is already heterosexual and the hetero-feminine is already female.

There is an incomplete portrayal of sexuality because most of the pictures focussed on girls.

Transformed co-researcher

The co-researcher acknowledges a degree of indoctrination about how girls should conduct themselves, when she writes: *I cannot believe how I have become like a puppet, to believe everything that society teaches us.* There is almost a degree of shame and a feeling of being brainwashed on the part of the co-researcher. New interpretations which are fuelled by the dawning of new realizations about sexuality have evolved.

In her Final analysis, Candy becomes aware of her role in reproducing gender inequality. There is an awareness of how the production and maintenance of gender inequality by identifiable social processes (for example, how a girl is expected to dress) is built into the general social structure as well as into individual identities of boys and girls.

Transformation trigger

Candy stated that during the past year, she had changed from dressing conservatively to dressing more smartly and looking sexy. She insisted that this did not make her a "bad" girl. She believed that she had the right to look, and feel good. Her personal emotions about her attire influenced her Final analysis.

6.2.2. Gay or straight?

Homosexuals were the first identified group at risk for contracting and spreading HIV/AIDS. Schoeneman et al (2002) cite Gillman who states that when HIV/AIDS was first discovered, it was called GRID, an acronym for Gay-Related Immunodeficiency Syndrome. Although other risk groups were identified, HIV/AIDS remained firmly associated with concepts of "improper" sexual behaviour like homosexuality and sexually transmitted diseases.

In Foucault's *History of Sexuality* (1991:42-49), he talks about how the imposed silence on sexuality was a strategy to control and monitor peoples' activities. When resistance to heterosexuality emerged, these manifested themselves as "peripheral sexualities" which were actively persecuted during the nineteenth century. People who were "guilty" of contrary sexual sensations were seen to be a new specification of individuals, they formed case histories. In order for homosexuality to be regarded as one of the forms of sexuality, it had to be transposed from the practice of sodomy into a kind of hermaphroditism of the soul.

Gamson (2000:348-355) asserts that over the past three centuries, scientific professions have been at odds with the interests of self-defining homosexuals by "pathologising, stigmatising, seeking the cause of deviant sexualities and searching for their cure". He refers to the Queer theory, which includes various sex and gender outsiders. The theory is used to mark identities which deviate from the norm. The aim of queer studies is the "deconstruction and criticism of heteronormativity, and the notion that humanity is synonymous with heterosexuality".

As qualitative research evolved through the centuries, previously silenced voices of the oppressed, for example, homosexuals, entered the discourse. My study shows the stigmatisation of homosexuals, as it is perceived by the co-researchers. It also points to the control of sexuality through a surveillance of sexual preferences.

Picture 3 taken by co-researcher Mandy



Figure 6.3. Homosexuality in school. So what?

Mandy

First	Final
Boy holds boy, girl holds girl. Could be the result of boys being jealous of girls holding girls and wanting to get back at them. Or it could be homosexuality.	<p>This is in school. Students might be more comfortable to get closer or to hold members of the same sex. Then they will not be seen as lovers, who break school rules. If they are lovers, so what? We would feel uncomfortable around them because our society looks down on homosexuals. Sometimes I wonder if we are as bad as the apartheid government. That government made laws which prevented people of different race groups from marrying (each other). Our society feels that homosexual relationships should not be allowed. Why do we not give people the freedom to choose? Sometimes I feel we are as bad as the rest.</p> <p>I think that the mixing of different race groups shows better relationships among people. This is a good thing for our country.</p>

Picture 4 taken by co-researcher Kesh

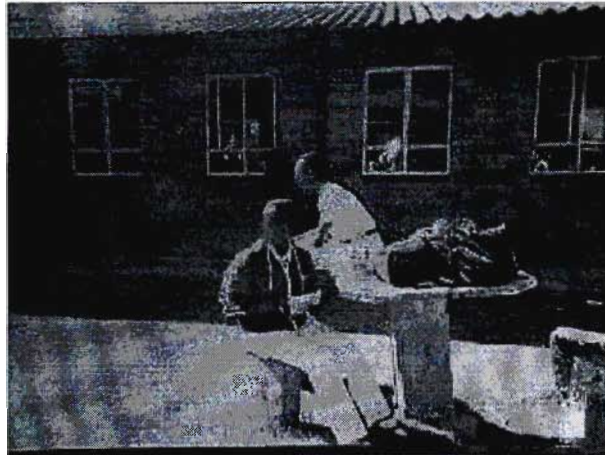


Figure 6.4. Homosexuality: Still hiding in the Closet

Kesh

First	Final
Two girls act very close and feel comfortable with each other, more than they would feel with a boy. Could represent homosexuality. This could mean trouble.	Girls might be more comfortable to hold and get closer to each other, because they will not be seen as lovers who break school rules. Lovers are usually expected to be in boy-girl relationships. When I said homosexuality could be trouble I meant it. Our society feels that God made woman and man for each other. It is not true to your religion if you become a homosexual. But sometimes I think about what the history teacher said. He said that the Bible was used to make people believe that apartheid was right. Is the Bible being used again to make homosexuality wrong? I wonder.

Researcher Commentary

Foucault (1991:43) reminds us that homosexuality was transposed from the practice of sodomy into a form of sexuality. He adds that the psychological, psychiatric and medical categories of homosexuality were constituted as soon as the concept emerged. This points to efforts to pathologize the Other form of sexuality.

In Kesh First, what becomes evident is how gendered norms and expectations are enforced and how "gender-inappropriate" behaviour, like homosexuality, risks the threat of trouble and possible punishment by those who are in authority, when she writes: *Could represent homosexuality. This could mean trouble.* Both sets of photographs as

well as their interpretations reveal that schools are complex, gendered, heterosexual spaces. Schools covertly enforce differences between girls and boys through their subject packages (hotel keeping and catering for girls; physical science and metalwork for boys), as well as through sport (netball for girls; soccer for boys). The microcultures of the school are the infrastructural mechanisms through which dominant masculinities and submissive femininities are perpetuated. The naturalness of heterosexual practices and stigmatisation of homosexuals supports heterosexual masculinity.

Transformed co-researchers

The greater degree of introspection in Final analyses, and the link between politics and sexuality, reveal the new lens which co-researchers used to view the pictures. This is evident by Mandy's final analysis of figure 6.3, when she states: *Our society feels that homosexual relationships should not be allowed. Why do we not give people the freedom to choose?* The right to one's sexual orientation is also brought to the fore, when Mandy questions: *If they are lovers, so what?* In this way, she challenges heterosexual norms at institutions like schools. The degree of maturity of the co-researchers surpasses the boundaries of school knowledge.

Kesh applies the power of interrogation to religious discourse by stating: *The Bible was used to make people believe that apartheid was right. Is the Bible being used again to make homosexuality wrong? I wonder.* Kesh challenges normative behaviour as it is spelt out by religious organisations in her final interpretation of figure 6.4. She does not passively accept the "truths" which are preached. This reveals a space for critiquing the long-standing cultural norms which are perpetuation by institutions like the school and the church.

I am once again reminded of Foucault's recommendation in McHoul (1998:90) to apply an ascending instead of a descending analysis to power. He draws attention to the ways in which dominant forms of power rely on practices which exist at micro-levels of society, which are represented by the school and the church in my study. The co-researchers appear to be aware of the techniques of power which they resist.

Transformation trigger

Mandy and Kesh are close friends who take the same subjects at school. During their lessons in Life Orientation, their teacher had discussed homophobia. Their history teacher had exposed them to information on how the system of apartheid in South Africa had been masterminded and legitimized, using, among other reasons, the Christian religion, to motivate for its implementation. During the 2004 to 2005 period, two African leaders vehemently and publicly opposed the practice of homosexuality. They were the President Robert Mugabe of Zimbabwe, a country with deepening economic and political crisis, as well as the traditional leader of the Zulu people in South Africa, King Goodwill Zwelithini. These co-researchers had read South African newspapers which carried articles which detailed these leaders' rationale for homophobia.

Mandy and Kesh had talked about how political leaders influence "correct" behaviour of citizens. This impacted on their changed views during the January 2005 analyses.

6.2.3. Condoms

Condom use is unpopular because, among other reasons, it is associated with homosexual practices. The silence which surrounds early heterosexual relations makes it difficult to practice safe sex. The embarrassment associated with suggesting the use of condoms, and the possible rejection of one partner by another, results in unprotected sexual intercourse. According to the traditional ideas of femininity, girls should be sexually passive; a girl who carries a condom, would be perceived as sexually aggressive and sexually deviant. These ideas disempower girls and results in risky sexual behaviour.

Picture 5 by co-researcher Suri



Figure 6.5 How cool are condoms?

Suri

First	Final
Found in a guy's room. Some guys carry them. Some girls carry them. Some guys don't want to use them and some do for protection against HIV/AIDS and the spread (of the disease). Used and thrown (discarded) anywhere. Used once with one partner.	When guys carry condoms they feel grown up. Their friends think they are very cool because they are having sex. When girls carry condoms they are seen as sluts. Like they are dying for sex. Guys and girls should think of the most important thing: PREVENT AIDS. It does not matter who carries a condom. Just use it.

Picture 6 by co-researcher Nadi

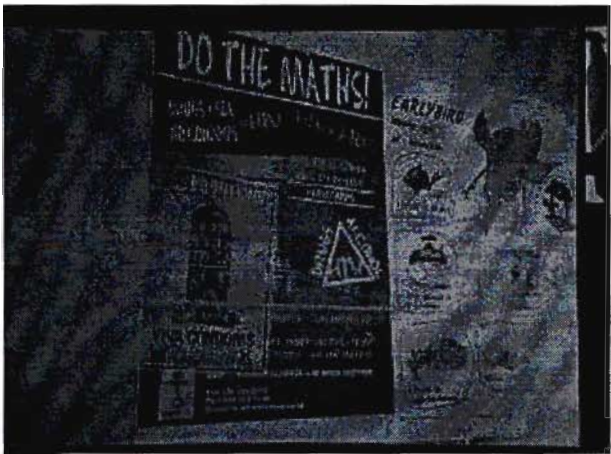


Figure 6.6. Do the maths - does it add up?

Nadi

First	Final
DO THE MATHS would target scholars. It is an interesting combination of education with schoolwork and AIDS. It gives relevant education in a way that is fun, considering it is in a mathematics classroom. It is not complicated and it is not monotonous because it is different from what we regularly see. It tells us the exact causes of aids and the correct combination (of behaviours) leading to STDs.	This is a wonderful picture. But I don't think the teens get it. I mean, even though it gives the combination of things which leads to AIDS, who listens? Teens still want to have a good time. They like to take the risk of having sex without a condom. They also feel the feeling is better without a condom. They want to feel close to their partners. They feel nothing is closer than sex without a condom.

Researcher Commentary

In Nadi First, there is a detailed analysis of the poster in figure 6.6. In Nadi Final, deeper questions about the usefulness of such a poster are raised, when she asks: *I mean, even though it gives the combination of things which leads to AIDS, who listens?* Her statement signals safe sex information fatigue among young people. In Nadi's Final analysis, she doubts the impact of this information on young people. She cites the thrill of risk-taking and the heightened pleasure of naked sex as two reasons why young people continue to engage in unprotected sexual intercourse.

Transformation

The realisation that the use of a condom is more important than who carries it, is evident in Suri's Final analysis of figure 6.5. A boy who is sexually active earns a positive masculine identity from his peers in this interpretation. Girls who carry condoms are labelled as "sluts" and acquire a "poor" sexual reputation. Suri is aware of how traditional ideas of masculinity and femininity impact on sexual behaviour of youth. This awareness could have resulted from the interview data, where condom carrying boys were perceived to be *prepared for sex*, while condom carrying girls were viewed as *desperate for sex*.

In Nadi's interpretations, she highlights the inability of young people to transform knowledge about HIV/AIDS into safe sex behaviour. The co-researcher comes to the realization that the importance of sexual pleasure, as well as the pleasure that one obtains from taking risks, supercedes the importance of safe-sex behaviour which says "yes" to life.

Transformation Trigger

Suri had discovered this pack of condoms in her young cousin's room. A few months after she took the picture, she asked her cousin and his male friends how they felt about girls who carried condoms. They replied that girls who wanted sex all the time carried condoms. Some of these boys had indicated that they preferred having their girlfriends carry male condoms.

Suri had used her knowledge of the interview questions to probe the boys' perceptions about condoms. This reflects a growth in her skills as a researcher.

Nadi explained that her final interpretation was influenced by the responses of most of the interviewees. They (the interviewees) had discussed many reasons for young people choosing not to use condoms.

For these co-researchers, their practice of research gave them greater insights into the sexuality of young people.

6.2.4. Media

Given the significance of media and popular culture in the lives of many youth, and the potential for media to also be a change agent in raising awareness about issues of HIV/AIDS, it is also important to think about ways that youth can become involved as members of advisory boards of public broadcasting units and state subsidised newspapers and radio (Mitchell: 2000).

The value of the media in HIV/AIDS awareness programs cannot be over-emphasised, especially when the youth comprise the target audience. Posters which are presented on giant billboards in places which are frequented by young people, is a popular strategy employed in the prevention of the spread of HIV/AIDS. The impact of visual stimuli in developing countries is effective in terms of financial cost, as well as in communicating health messages to the youth.

Many photographs which were taken by the co-researchers related to billboards about HIV/AIDS prevention strategies. Some photographs examined the role of television and cell phones in the sexual behaviour of young people.

Picture 7 by co-researcher Zuma



Figure 6.7. Viva condoms!

Zuma

First	Final
<p>This picture I took because it is eye-catching and written in bold. It makes the people, especially the youth, see the right side of condoms. The condom has a South African flag and it basically tells us that by condomising, we will be saving our nation.</p> <p>The term "Viva Condoms" says everything about us saving the nation. Nelson Mandela is a role model to the youth and he uses the term "Viva" when he has triumphed or is going to triumph over something.</p> <p>This term in this context basically tells us we would be the next Nelson Mandelas by condomising, we would have saved lives and the role models of the world would be us.</p> <p>This was at a public station which most of the youth, especially from our school, utilize. So the youth, which is the future hope for the country, would be the most alert and would educate others.</p>	<p>We are taught about condoms but the fact is, many young people do not use them. Some don't carry them because they are afraid that they will be caught. They will be accused of having sex when they are too young. Other young people don't use them because they enjoy the feeling of sex without anything blocking. They feel closer and more loving without the condom. The condom blocks the feeling. Many boys feel condoms are old fashioned. They feel it is not cool to use condoms. Some boys and even some girls feel condoms take away that exciting feeling of sex.</p> <p>In the township, men get together in some places and talk. They gave out some pamphlets the other week. The title of the pamphlet was "The Late Great Black Race" (refer to appendix set G). It was about how White people put the AIDS virus into new condoms. Then they tell Black people to use condoms to prevent AIDS. The men say that by using the condom, the (HI) virus is spread even more. I don't believe this pamphlet but it is hard to make others understand. I feel that the pamphlet was written by somebody who wants AIDS to spread among Black people by not condomising. This is how they will kill our race.</p>

Researcher Commentary

The appeal to a person's sense of loyalty and patriotism is used to encourage condom use. But the social constructions of sexuality, combined with the history of racism and the suspicion that it breeds among South Africans, proves to be counter-productive in the fight against HIV/AIDS. The metaphoric anchors (mentioned in the Social Representations Theory in section 2.7.4) of death, plague, evil, urban areas, victim and perpetrator, characterise HIV/AIDS in Zuma Final. The "Late Great Black Race" suggests an evil intention to spread HIV/AIDS in a similar way to the spreading of a plague, which could destroy an entire race group of human beings. This dastardly act is allegedly perpetrated by White people, and Black people are the intended victims in a township setting.

Transformation

In Zuma First, he is optimistic about the usefulness of condoms and its actual usage in the prevention of the spread of HIV/AIDS. He is attracted by the colour and bold presentation of the poster and this motivates him to take the picture in the first place. The poster is linked to the positive influence of ex-President Nelson Mandela. An interesting reference to political freedom and the pleasure of political victory, on one hand, with the life-saving potential of the use of condoms, on the other hand, is made. The co-researcher also sees himself as a positive role model in the quest for HIV/AIDS awareness and prevention in an ideal world.

In his final analysis, Zuma no longer focuses on the eye-catching, visual presentation of the poster. Instead, he places himself firmly in the practical reality of life in the community and adopts a deeper analysis of it. The power of traditional cultural norms is evident when Zuma writes: *I don't believe this pamphlet but it is hard to make others understand*. The desire to make other people understand the value of using condoms as a safe sex practice, is expressed, given his own disbelief in the message spread by the flier. This points to his role which he perceives to be one of activism, not merely among youth, but also among adult men. Zuma feels adequately enabled to serve as an agent of change in his community.

There is an acknowledgement about the reasons for reluctance to use condoms. The impact of socially imposed values on risky behaviour of young people becomes clear. The use of propaganda to sow seeds of doubt about the safety of condoms is highlighted. A disturbing link between racism, disease and condom use is revealed, when white people are suspected of spreading HIV/AIDS to African people by distributing contaminated condoms (message in community leaflet in appendix G). The co-researcher feels inadequate because he is unable to convince members of the community that certain propaganda is harmful. The urge to make a difference in peoples' understanding of the disease emerges.

Transformation trigger

Zuma indicated that the second analysis was done almost a year after the first one. According to him, he had matured during this time and he had more to say about the photograph. Zuma indicated that his activities in conducting the research taught him to look more realistically at the world. He had also carried out some "personal" research during the December 2004 vacation, and the findings of his research created a change in his interpretation of the picture.

The co-researcher's motivation to do "personal" research during the holidays indicated that he had been enabled, by the training process during the course of the year, to the level where he conducted research which was independent of any adult influence. The degree of empowerment which was exhibited by Zuma was, in my opinion, phenomenal.

Picture 8 taken by Isiah



Figure 6.8. Billboard which reads: "We are all affected by HIV and AIDS".

Isiah

First	Final
<p>This shows us that HIV/AIDS does not discriminate and that both black and white can get infected.</p> <p>It also shows that you are not a beast or inhuman for having the disease. It tells everyone, mainly black people which are the most infected, that they are still people. They should still have healthy lives even if they have already got the disease. Also, we should not separate ourselves just because of this disease. We should be careful, but not in such a way that we discriminate.</p>	<p>Anyone can get AIDS. That is the message. If you read the papers and listen to some of the Indian kids at school, it shows that MANY Indians have the disease. We must support people with AIDS. We can advise our friends especially the ones that feel "I am too cool". What is the use about showing off that you have so many women. In the end, you die young because you did not play it safe.</p>

Researcher Commentary

The denial about HIV/AIDS which prevails in the Indian community is addressed because Isiah mentions that *many Indians have the disease*. The discrimination to which the Isiah alludes in the first analysis, especially the words *you are not a beast or inhuman for having this disease* reveals that society's response to HIV/AIDS sufferers has robbed these people of their human dignity.

The racial stereotyping that goes hand in hand with HIV/AIDS, that is, the perception that it is a disease that is suffered mainly by people of African descent, is explored. The co-researcher implores other people not to isolate those who are suffering from HIV/AIDS. The positive attitude towards HIV/AIDS positive people is advocated. What becomes evident is the co-researcher's struggling voice for human dignity and non-racialism in the battle against HIV/AIDS.

Transformation

The general comment in Isiah First, is changed to a more specific view about HIV/AIDS infection among people who are not of African descent. This knowledge is based on the co-researcher's personal interaction with Indian peers at school. A greater awareness about the spread of the disease by reading about it is evident in Isiah Final. The desire to take preventative action by "advising friends' who behave in irresponsible ways, prevails in the Final analysis.

Transformation trigger

Isiah indicated that his father was a Christian priest. His father had counseled many people who had HIV/AIDS. In addition to this, Isiah's father shared a close friendship with an Indian Christian priest. The Indian priest had told Isiah's father about the large number of Indian people who were infected with HIV and had been counselled by the church. Isiah explained that the widespread belief that HIV/AIDS was a disease which afflicted mostly people of African origin was rapidly being dispelled because infected Indian people, for example, could not continue to keep their HIV-positive status a secret. This co-researcher also visited a local provincial hospital with his father who was counselling patients. The patients indicated to his father that there was a ward which was occupied mainly by HIV positive people of Indian origin. He explained that he did not mention this in his final analysis because he focused mainly on school learners.

Picture 9 taken by co-researcher Prim



Figure 6.9. Billboard: "Get Tested"

Prim

First	Final
<p>There are a lot of people in the picture, and they are squashed up. The billboard says "Get Tested" and everyone would wonder if they haven't got the pandemic yet. There is a woman in the picture who looks frightened. Maybe she is worried about her health status. If she is, the billboard will make her much less afraid because she would know there are counseling sessions at clinics about the disease, before and after testing.</p>	<p>It is easy to say "Get Tested". Some of our friends should get tested. They are very frightened that they may have got AIDS. Some of them had sex a few years ago. They used to think that AIDS only was got by the adults. I think it is because they only saw funerals of mostly adults. But these days, younger ones are also dying. So now, young people, even those in school, know. They know they can get the disease. They did not know this when they were doing sex before. Nobody knows how frightened some young people are. They are afraid to get tested because the nurse will know that they are small and they are having sex. They are also frightened that someone-anyone can spy on them at the clinic and tell their mothers. I think some are frightened that the clinic sister will say "you are HIV positive". Nobody wants to be in the box before their time is up. That is why they don't go to the clinic.</p>

Researcher Commentary

In their paper entitled *Social Representation of AIDS*, Schoeneman et al (2002) examined pictures relating to HIV/AIDS from psychology textbooks. Their analysis found that images of HIV/AIDS continued to be anchored in concepts of the Other (homosexual, drug addict, syphilitic), death, victimization and culpability. They cite Sontag who notes that there is a shift from demonization of HIV/AIDS as an illness to the attribution of blame to the HIV/AIDS-infected person. There is a clear association of fear (*nobody knows how frightened some young people are*) and blame for "sexual transgressions", in Prim's final analysis of figure 6.9. The anchor of death, as alluded to in the Social Representations Theory (section 2.7.4), emerges.

The personal and collective psychology surrounding HIV/AIDS reflects the fear, stigma and alienation which accompanies this particular illness in Prim Final. In Prim's first interpretation, there is a sense of hope through VCT for the woman. These contradictory perceptions emerge as the co-researcher's consciousness about HIV/AIDS grows. These analyses by Prim remind me of the assertion by van Graan (2003), in an article which appeared in *Artists Action Around Aids*, that the struggle against apartheid in South Africa was a struggle for *human dignity, for democracy, for non-racialism, for gender equality* and he goes on to say that the same struggle is still with us in the form of this country's battle against HIV/AIDS.

In Prim's first analysis, she focuses on the woman in the picture, as well as the message. In the final interpretation, the message and its implications for young people are emphasised.

Transformation

The co-researcher, while acknowledging the usefulness of voluntary testing and counselling for HIV/AIDS, delves deeper into the plight of young people. The focus shifts from the effect of the message on the older woman to its effect on young people. An insight into the misinformation that only older people get HIV/AIDS, is offered. There is a heightened awareness about the fears which prevent young people from engaging in VTC.

Transformation trigger

Prim had asked her sexually active friends at school whether or not they had been tested for HIV/AIDS. Most of her friends indicated that they had not been tested because they had believed that older people contracted the virus. They had also talked about the fear that other young people had experienced when they associated certain symptoms with HIV/AIDS. One of their friends had suffered from a severe attack of influenza. The lymph nodes in his neck had swelled severely. He had associated the swollen lymph nodes, as well as his recurrent fever and night sweats, with HIV infection. He did not go to a clinic but used home remedies to recover. He was afraid that the health provider at the clinic would have diagnosed him as being HIV-positive. Their friend had subsequently recovered but he refused to be tested for HIV.

Picture 10 by Luv



Figure 6.10. Cyber-sex

Luv

First	Final
It is a cell phone. You will find maybe in magazines or T.V places where you can get pictures or information about love and other things. Cell phones are a way for teenagers to be free. Like they can phone or receive phone calls from anyone. Whereas if you receive on the house phone, you will be questioned by your parents.	<p>In the past few months, cell phones have been used to get dates and to listen to hot speeches. Cell phones are a great sex toy. The hot talk is by women who you can only imagine. They say things that make a guy feel like he wants it (sex).</p> <p>You can also send an SMS to a girl and block your number until you are ready to let her know you got the hots for her. For young people, it is cool and important to have a cell phone. In the breaks we show off with them. The richer kids have camera phones. The boys take some hot pictures and store them to show off in the breaks.</p>

Researcher Commentary

The use of a cell phone to make or receive a phone call is hardly mentioned. What emerges are a host of other uses. Privacy about communication is one need which is met by the phone. Other uses include a sense of freedom and an instrument as a means to stimulate sexual pleasure using erotic voicemails and pictures. Class distinction is possibly maintained by wealthier students possessing the more expensive and technologically advanced cell phones.

Transformation

The innocent use of the cell phone possibly by a sexually inactive young person in Luv First, is transformed into viewing the cell phone as a vital instrument for stimulating sexual pleasure, establishing boy-girl relations, showing off about one's sexual knowledge and maintaining class discrimination, in his final analysis. This signals that the use of the cell phone has gone beyond communication to the ideas of courtship and sexual indulgence.

Transformation trigger

Luv stated that he had downloaded porn "stuff" and other "adult things" using his cellphone. He stated that there were no restrictions in terms of accessing the websites. He believed that the pictures and the video clips which can be viewed are more damaging and contribute to the reckless sexual behaviour of young people.

6.2.5. Sexual spaces

The co-researchers also photographed spaces where young people sometimes exhibited risky sexual behaviour.

Picture 11 taken by Zuma



Figure 6.11. The Beach

Zuma

First	Final
<p>The Beach</p> <p>It may be an open area and seen as if nothing can happen because it is a public place but this is not true. It's the perfect place where different teenagers (from other places) can meet and engage in problematic activities (sex, drugs and crime). During the night time, when not many people are around, teenagers gather at the beach and have parties at the beach with no adult supervision, therefore giving them (teenagers) a big opportunity to do whatever they want, especially sexual activities and alcohol usage (underage drinking).</p>	<p>I don't think that there could be anything more romantic. Lying next to the person you love on the beach is the best. This picture is what life is about. I feel proud that I took it (the photograph). If only teenagers could say "yes" to life. By that, I mean, have a good time. But be safe. Don't drink alcohol at parties because you know what will happen. You will get drunk and feel brave. You will not think about how dangerous it is to have sex, especially without a condom. I say "No" to alcohol. "No" to taking a chance (with unprotected sex). "Yes" to loving my girlfriend. "Yes" to hanging out on the beach and having a good time. "Yes" to life.</p>

Researcher Commentary

The co-researcher feels adequately empowered to offer his advice to young people about what he thinks are the right and wrong lifestyle choices. There is a heightened sensitivity about the effects of making responsible decisions in his final analysis. Sexuality is portrayed as an attractive proposition, not a quick act of sexual intercourse but a romantic experience.

Transformation

In his first analysis, the co-researcher looks at how spaces like the beach, in figure 6.11 can be transformed into places where illegal, unsafe practices thrive. In his final analysis, he views this picture in a more positive light. He comes to the realization that lifestyle choices will determine whether this space would promote unsafe behaviour which can lead to death, or whether it would promote responsible behaviour which can result in an enjoyable, healthy life. The co-researcher implores young people to make safe decisions which will result in a healthy life. This signals a visible kind of youth activism (where the researcher becomes transformed into an activist). He sees figure 6.11, in the first analysis, as embedded with ingredients for death (crime, underage drinking, drugs), in the final analysis, as containing possibilities for a fun-filled life (*Yes to hanging out on the beach and having a good time*) - an optimist is born! He lightens up on the seriousness of the topic.

Transformation trigger

Zuma had become involved in a relationship with a girl whom he believed might become his girlfriend. He felt light hearted and starry-eyed. He indicated that he felt "so happy nowadays". Zuma lived near the beach and often visited it. It is possible that he viewed this space as a romantic rendezvous.

Picture 12 taken by Mandy



Figure 6.12. Sexual spaces in school

Mandy

First	Final
<p>This is a photograph of a lonely, isolated area in school. This place is right at the end of school where hardly anyone goes. Only those who want to have "fun" go here. "Fun" meaning smoking, engaging in sexual activities. This place attracts young people, especially young couples to go there and do what they have to do (cuddle, sex). This place can lead to murder, rape and becoming a drug hang out.</p>	<p>A lot of nonsense still happens here. It is sickening because our pupils know better. I feel that teachers or the RCL should put up posters. Not those that you usually see about condoms and stuff. Put up pictures of people who are dying with AIDS. Let the teens see what can happen. Let them see what people with AIDS look like when they are very sick. Our pupils must know that they can land up in the same situation. Teachers can put pictures of people with sores. Let the teens see this. Then they will think twice before doing sex here.</p>

Researcher Commentary

Sexual spaces inside the school are highlighted in figure 6.12. Because this area is isolated, it becomes a haven for illicit activities. In her final analysis, Mandy strongly advocates preventative action. The idea is to shock people into knowing about the

disease. This is in keeping with tenets of Rosenstocks Health Belief Model³³ in HIV/AIDS prevention, which reveals that the feelings of fear of a disease can serve as a way of halting unsafe sexual practices. The co-researcher motivates for using figuration, as alluded to in the Social Representations Theory (section 2.7.4), by stating that pictures of people who are sick with HIV/AIDS, will emphasise the degeneracy and suffering with which this disease is associated and will be "scared" of transgressing sexual norms.

Transformation

The activist in the co-researcher emerges. She no longer describes a sexual space. Instead, preventative action is strongly suggested. In her final analysis, there is almost a sense of anger and impatience that the co-researcher shows towards young people who persist with unsafe behaviour. The co-researcher motivates for a proactive stance to be adopted in the fight against HIV/AIDS. The co-researcher does not place the responsibility for this action solely on educators, but views the learner representatives as individuals who can share in this task. This reveals the co-researcher's confidence in the ability of learner representatives to resolve a problem; it shows a renewed confidence in the ability of youth to solve problems for youth.

Transformation trigger

Mandy's sister had acquired a boyfriend during the period between her first and final analysis. Her parents had disapproved of the boyfriend. Mandy's sister had taken to meeting her boyfriend secretly at this spot in the school. She realised the danger that her sister, who, according to her, is a good person, could face in an isolated area. This made her feel strongly about a form of preventative action which could shock starry-eyed lovers back to the real world.

³³ Rosenstock's Health Belief Model explores ways in which safe sexual behaviour can be developed. The model proposes that an individual is more likely to adopt safe sex strategies if the individual believes that s/he:

- (i) is susceptible to the disease
- (ii) will suffer negative consequences if s/he contracts the disease
- (iii) can take precautions which will reduce the likelihood of contracting the disease

6.3. Conclusion

The co-researchers' analyses were characterized by shifting positions, from reproducing gender to deconstructing and reconstructing it; this provided a partial response to the following research sub-question:

What impact does participating in an HIV/AIDS related research project have on young researchers' perceptions of gender and risky sexual behaviour?

The co-researchers showed an increasing capacity for analysing photographs, their analysis changed from linear, highly factual to deeper level interpretations. Their linguistic ability increased and they were able to express their views on gender and risky sexual behaviour more clearly. The development of greater sensitivity about moral issues characterised their transformation as co-researchers. They understood issues of sexuality as inextricably linked with political and religious influences as the project progressed. This became evident when the co-researchers readily explored racial and religious stereotyping as they applied to issues like homosexuality. The co-researchers developed a heightened awareness of how the broader society has robbed HIV/AIDS sufferers of human dignity. This was exemplified by their call for human dignity and non-racism to be embedded in strategies which form the battle against HIV/AIDS.

A realization of how gendered power relations impact on the construction of sexual reputations is revealed in the January 2005 analyses on *gender*. Sexually responsible behaviour by a young woman who elects to carry male condoms as a safe sex strategy, and the danger that this poses for her sexual reputation, is explored by co-researchers. A maturity in the co-researchers' views on how traditional ideas of masculinity and femininity, as well as risky sexual behaviour, is evident in the analyses on condoms.

On media, the political analysis of the slogan shows a maturity of purpose. The link between the political history of apartheid in South Africa and the spread of HIV/AIDS stimulates thoughts of activist strategy in the co-researchers. The fears which are associated with sexual transgression, that is, the fear experienced by a young person of being found guilty of contravening rules of morality by parents, the fear of having one's sexual reputation ruined in one's community, the fear of death, and how these fears impact on safe sex strategies, shows a growth in the co-researchers' perceptions of how HIV/AIDS as a disease is constructed by young individuals within their societies.

There is a move from a simple description of sexual spaces toward exploring activist strategies by youth for youth to encourage safe sex behaviour- this marks a transformation from researcher to advocate.

The use of photo voice showed transformation in the co-researchers whose awareness about the social construction of sexuality became heightened during the course of their work. Their initial analyses in May 2004, were linear and highly factual. A deeper analysis appeared when they looked at the photographs in January 2005. They attributed the changes in their interpretations to personal incidents and experiences in their lives. They indicated that the research process, especially the interviews, had opened their eyes to new ways of seeing the same picture. A greater maturity, combined with a definitive sense of proactive purpose, was evident in their final analyses.

There was a definitive sense of activist purpose in the co-researchers in the context of HIV/AIDS, and this became increasingly evident through the use of photo voice. The co-researchers' heightened awareness of the social construction of sexuality along axes of differentiation, especially the ways in which the process of gendering and its outcomes are legitimated by prevailing social norms, religion and politics, was a marked feature of this chapter.

CHAPTER SEVEN

Insight

Young People: On Becoming Researchers in the field of HIV/AIDS

7.1. Introduction

In this study, I explored the various factors which influence the role of gender and risky behaviour among young people through trained co-researchers who were secondary school learners. The co-researchers assisted me in formulating the interview schedules and the final questionnaires. They conducted interviews, administered questionnaires and took photographs as part of the data collection and generation processes. The enablement of co-researchers became increasingly dominant and grew to form a major focus of analysis. It is from this analysis that the objective of this work now includes recommendations in training and empowering young people to work as researchers, which I view as a methodological advancement in the field of researching HIV/AIDS.

The following insights have emerged in response to the first research sub-question, which is:

- 1. To what extent do young people respond differently to peers than to adult researchers?*

Young researchers (co-researchers, in my study) have a discourse which is peculiar to sexuality: this gives them added power to glean information. It is unlikely that adult researchers would be attuned to this type of linguistic and the accompanying emotional expression, which is critical to the quality of the data which is gathered. In this study, young people (who responded to enquiries made by the co-researchers) use terminology which is strong, bold and unadulterated, and this reflects an unleashing of sexual power. “Out of control” sexual desires are expressed without fear of reprisal from the co-researchers. Some female respondents have no inhibitions about their willingness to abort an unwanted foetus or to engage in sexual relationships with multiple partners.

Both male and female youth lay claim to adult status and demand the right to be regarded as autonomous individuals who control their own sexual decision-making. They are prepared to express their emotions and talk about their experiences, instead of passively accepting the ways in which sexuality is socially constructed. They challenge traditional masculine norms and seek to equalize power relations in heterosexual encounters. Candid information about issues which result in risky sexual behaviour, for example, the concern that monogamy is damaging to the masculine sexual identity, is expressed. They subscribe to name calling which can result in linguistic shock reaction, especially for adult researchers like myself, who are not in tune with the “lingua franca” of youth. Some respondents are upfront and uninhibited when they describe ways in which they use technology as a powerful tool to stimulate sexual pleasure. Their description of their sexual relationships reveals that several young people are sexually sophisticated.

The following insights are described in response to the second research sub-question, which is:

2. *What impact does participating in an HIV/AIDS related research project have on young researchers' perceptions of gender and risky sexual behaviour?*

The co-researchers' journal entries, as well as my interactive sessions with them, reveal progressive changes in their perceptions about risky sexual behaviour and the role of gender in the context of HIV/AIDS. The co-researchers are able to share their experiences instead of passively choosing to live with masculine norms. While they challenge the traditional construction of sexuality, they exhibit a heightened awareness of the differential axes along which gender is constructed. This occurs despite their different cultural identities. This is evident when they react to how gender, as a structure, divides work in the home and work in economic production (refer to journal entry dated 19/05/2004 in section 5.3). The co-researchers become increasingly aware of how cultural representations guard the boundary lines among genders to ensure that people know and practice that which is expected of them (refer to journal entry dated 03/06/2004 in section 5.3). During their deconstruction of existing gender patterns, they reveal increasing knowledge about how gender, as a modern social institution, seeks to construct women as a group to be subordinate to men as a group. The co-researchers

also reflect on how intergenerational power, as well as power in terms of gendered identities, combine to disempower young women (refer to journal entry in section 5.3 dated 11/06/2004). They critique long standing cultural norms which are perpetuated by institutions like the school and the church, and refuse to passively accept “truths” which these institutions promulgate.

The co-researchers’ general transformation and enablement in the field of research are marked by the following features:

- Promotion of knowledge networking among youth.
- Dialogical engagement about issues that concern them directly through their involvement in designing instruments, data collection and data generation, as well as data analysis.
- Fostering youth social identity in providing individuals (other young people who responded to their research probes) with the spaces to present themselves in *their* voice.
- Promotion of learning and change by, firstly, actively participating in a research project and secondly, taking action on issues that directly affect *them*.

At the end of their work, the co-researchers feel adequately empowered to offer advice to other young people about positive lifestyle choices and in this way, they exhibit a visible kind of youth activism. They motivate for a proactive stance in the battle against HIV/AIDS *by youth for youth*.

In my study, the training and enabling of young researchers is a primary methodological insight, which I elaborate on in section 7.2 of this chapter. The process of engaging co-researchers resulted in an increasing sense of my *effacement*³⁴ from this study. The gradual process of my *effacement*, from the co-researchers, as well as from the study, are discussed in section 7.3. In section 7.4, I look to the insights which were gained on

³⁴ A concept borrowed from M Gardiner, national co-ordinator of a Community Education Forum Project (CEPD). The project essentially sets up spaces to construct a forum (from the community) which gets enabled to work with schools in the community according to their own agenda. The main researchers feel a sense of effacement as the community education forum evolves its “own” research agenda.

account of contextual factors, and I use the tenets of the Health Belief Model (section 2.7.3 in this report), which were alluded to in the discussion of psychological models for AIDS prevention, as a framework for my discussion.

7.2. Working with young researchers: Emerging Insights

Both participatory action research as well as qualitative feminist research methodology, which informed my study, have the primary goal of transforming people who are involved in the research into researchers. The dual commitment of participatory action research is to study a system and to concurrently collaborate with members of the system in bringing about transformation towards what is collectively perceived to be desirable action. The importance of co-learning, which is a primary aspect of participatory action research, was achieved by training co-researchers and engaging in reflective sessions on the research process. This type of collaboration allowed for the generation of insights out of the joint space which was shared by the co-researchers and myself. This research shows that young people have the capabilities and are motivated to undertake research that concerns issues about people of their generation. With support, they can develop the maturity to address challenging social issues effectively.

My experience in working with the co-researchers has yielded following insights in respect of training and emotional maturity of young researchers. Firstly, training young people is different from training adults because young people have a lower attention span than adults. They also have different levels of cognition compared to that of adult researchers. In this study, the co-researchers' inability to use technology effectively (refer to section 4.3.1) was probably due to their lack of patience and their inattention to detail. This resulted in a loss of data. Research skills need to be developed by creating the opportunity for more practice sessions for young people (for example, the practical issues around data collection which include the selection of sites for capture of data and the use technological devices like cameras and dictaphones). Role playing as a preparation for conducting interviews is vital in developing interview skills. The main researcher needs to allocate adequate time for practice sessions. The research roles must be appropriate to young peoples' level of development and expertise, which might be different when compared to that of adult researchers.

An advantage of working with young people as researchers in their youth communities is that young people already possess a knowledge concerning the history and culture of that youth community. Young researchers are also aware of the body language, semiotics and slogan systems which operate within the cultural norms of the group. They do not need to be trained to unpack the verbal and non-verbal language of the group.

Secondly, young people experience extremes in terms of their emotions. They have higher highs (great excitement, high levels of confidence when things go right) and lower lows (bitter disappointment, feelings of being disempowered) when things go wrong in the field. The main researcher cannot expect young people to view their mishaps as a part of a learning curve during the process of research because, unlike adult researchers, young people may lack the maturity to deal with difficulties in this way. The main researcher needs to provide a highly supportive environment in order to nurture developing young researchers.

The third insight is that when young people examine data gathered by each other, it is necessary for feedback to be sensitive to their feelings. The main researcher needs to emphasise the need for constructive criticism of young peoples' research efforts by their fellow researchers. A sense of mutual respect should pervade all feedback sessions. Praise for each other's efforts needs to be encouraged to boost young researchers' confidence.

The feminist mode of inquiry allows for difficult and uncomfortable questions (especially about issues of gendering) to be raised. It emphasizes the importance of intersubjectivity during the research process; the intersubjectivity among the co-researchers allowed for mutual creation of data. Young researchers require a degree of emotional maturity in order to address "uncomfortable questions"; this can be achieved by emphasizing the importance of being sensitive to the data which is captured by each researcher.

I borrowed from the five elements for successful research projects, where young people serve as researchers, from the Harvard Family Research Project (HFRP)³⁵. I view these elements, which include: (i) organizational and community readiness, (ii) training and support for involved youth, (iii) training and support for the adult staff, (iv) selecting the right team, and (v) sustaining youth involvement, as applicable to other research contexts in which young people do research.

(i) Organizational and community readiness.

A participatory organizational structure is essential if young people are to be enabled to serve as researchers. Adult researchers who can work with, listen to and respect young people as researchers, are vital to this structure. In the South African context, communities need to be prepared to listen to the voices of young people. This involves the development of new cultural patterns which are underpinned by intergenerational respect. A mutually empowering and respectful relationship between the wider community and its young people is critical for the development of youth as researchers.

(ii) Training and support for involved youth

A critical challenge in youth involvement in research is to provide suitable training and support. Young people need to be fully appraised of the nature of the work and they should understand the types of skills which are involved. Concrete, manageable steps will allow greater efficiency in the development of young researchers. In my study, the training began with involving the youth in taking photographs. This proved to be a task which generated enjoyment for the co-researchers. In addition, it boosted their confidence to perform the other research activities, like interviews, which were more difficult.

(iii) Training and support for the adult staff

Combating “adultism” which means fighting adult perceptions of youth is a major challenge for adults who are involved with youth researchers. Youth often feel that they do not have full representation in issues that affect them. Adults who make decisions on

³⁵ HFRP provides short, user friendly documents to highlight current research and evaluation work of youth. These documents provide practitioners, funders, evaluators and policy makers with information on the engagement of youth as researchers.
<http://www.gse.harvard.edu/hrfp/projects/afterschool/resources/issuebrief1.html>.

behalf of young researchers can inadvertently reinforce this perception. Personally, my experience of having worked with young people for almost two decades has given me the confidence to engage in research with them as partners. I believe in young people's motivation, creativity, intelligence and maturity.

(iv) Selecting the right team

Diversity is an essential feature of a good research team. Ethnic, gender, income and educational diversity make for a more credible research team. In my study, the co-researchers were not selected; they volunteered to work on this project. Fortunately, the research team comprised members who were diverse in terms of their race, gender and socio-economic backgrounds.

(v) Sustaining youth involvement

Young people may have extra-curricular and home commitments, and time may become a limited resource. Adults must recognize that young people will participate at different levels of intensity at different times. The co-researchers in this study did not participate actively during their school examination and other testing programs. They maximized their involvement from the beginning to the middle of each school term. Some of them collected data during their holidays.

The fact that other people, especially adults, are willing to listen to and consider what young people have to say, motivates them to remain involved in research. The development of a close, long-lasting relationship that goes beyond the "work" of research, between young people and adults, helps to sustain their engagement in research.

Another way of sustaining youth involvement in research is to formalize their participation by establishing policies which reflect the explicit commitment to attend to the voices and expertise of young people. Roberts (2003:27) reflects on youth participation in policy matters in the United Kingdom through the establishment of several units, including the *Children's and Young people's Unit*. She also alludes to the *United Nations Convention on the Rights of the Child, Article 12*, which focuses on the rights of children and young people to freely express their views on issues which affect

them. The Children Act for England and Wales, which was implemented in 1991, legislated the requirement for the views of young people to influence decisions which affect them. What these policies reveal is that at the highest levels of decision-making, there is a realization about the importance of listening to the voices of children and young people. Roberts (2003:28) emphasizes that research funders in the United Kingdom are interested in financing projects in which youth are seen as active agents and not simply as objects of research. She cites the Joseph Rowntree Foundation which is committed to exploring ways of ensuring that young people, who are central to the research or development project in which they are involved, are empowered by the process. This empowerment of young people through direct engagement in the research process is a benefit which can sustain their involvement.

When research participants become increasingly involved in the research process, the research and the researcher become what Schratz and Walker (1995:5) refer to as “inextricably locked”. Participatory action research causes the demarcations between research that is academic and practical, research that is scholastic and immediately useful, to become blurred. It requires the main researcher to relinquish claims to specialized expertise and to draw on his or her personal resources of, among other things, morality, cognition and imagination. The result, according to Schratz and Walker, is that the role of the researcher becomes increasingly diffuse. In my study, the co-researchers engaged in several research activities (outlined in chapters four and five), and my role became diffused or effaced from the actual research activities. I view the *effacement* of the main researcher as an almost natural consequence of engaging young researchers, not simply as field workers, but as active participants in all processes of the research.

7.3. An insight into *effacement* of the main researcher

In her poem, *Morning Song*, Sylvia Plath (1965) writes about her daughter a year after the child was born. The following excerpt from the poem explains the concept of *effacement*.

*I'm no more your mother
Than the cloud that distills a mirror to reflect its own slow
Effacement at the wind's hand.*

This stanza of the poem involves a wryly ironic sense of the mother's role: she produces the baby just as the cloud, affected by the wind produces the rain. However, in the process of production the mother herself is diminished, it's the child that becomes important just as the cloud is actually dissolved by the rain issuing from it. The opening line *I'm no more your mother* is not meant to be taken too literally. There is, after all, no rain without the agency of the cloud, just as there is no baby without the mother.

Effacement implies a withdrawal, to become unassertive. In the context of this study I, as the main researcher, the designer of the thesis, found myself tracking across the development of the thesis, a sense of *effacement* by the co-researchers as they engaged themselves in the frenetic collection and generation of data.

I clearly felt an angst of displacement, at times completely, at other times partially, in ways that found me moving out of the position of the commanding, controlling main researcher. Lather (2004) talks about feeling a little lost caught in enabling asporias that move towards practices that produce different knowledge and produce different knowledge differently. In my study, the different way of producing knowledge was achieved by engaging co-researchers to solicit, generate and interpret data. This resulted in the production of different types of knowledge, for example, the type of language among youth which included concepts of "playa", "pleasure principle" and "bedroom disease". The type of knowledge which was produced in young peoples' efforts to change gendered patterns of behaviour as a way of reclaiming power in sexual relationships emerged. New insights about sexual spaces in which risky behaviour gets enacted were achieved through the co-researchers, who, as deep insiders, were able to tap into issues of intimacy.

What I clearly experienced is a “forced” *effacement* at certain points of the study. This was especially felt during the photo voice sessions during which the co-researchers took complete control and effaced me completely from the study. Table 7.1 illustrates ways in which this *effacement* became operationalized in the study.

Table 7.1: Charting the *effacement*

Effacement moments of main researcher	Main researcher	Co-researchers	Increasing control of research project by co-researchers
Total control: no effacement at the beginning	Preparation Training sessions →	Photographs Interviews Questionnaires Journal entries	
Effacement begins partially	Planning stage Questionnaire design → Interview schedule →	Input in terms of pilot study Input in terms of certain questions	
Effacement strengthened	Data Collection Interview process Selection of interviewees Selection of interview site Determining times at which interviews will be conducted Use of probes to guide course of interviews		
Effacement complete	Photovoice Choice of data for photographs Taking photopics Techniques of using cameras Choice of sites Interpretation of photopics Deeper insights in interpretations of pictures		

As the main researcher, my *effacement* occurred on two levels, namely, from the research project itself and from the co-researchers. Table 7.1 details the ways in which I was gradually effaced from the research project after the co-researchers assisted me in the final compilation of questions which were admitted into the questionnaires and the interview schedules. This occurred during the planning stage. My *effacement* from the project increased when the co-researchers entered the field to collect and generate data. I could not make any input into the selection of interview candidates or the selection of sites where interviews took place and where photographs were taken. The co-researchers analysed their photographs independently, without any influence from me. The co-researchers grew increasingly independent from me and I felt effaced from their activities, as well as from them.

Admittedly, I regained some degree of control during the report writing process, in order to fulfill my academic obligation to this study. The reporting on the findings of this study was guided by the co-researchers' voices and feelings which were embedded in their journal entries. I refrained from analyzing their photographs because I wanted their voices to be heard fully, without being filtered through my interpretations. This resulted in a degree of *effacement* during the report writing process.

My report contains rich, thick data which was obtained through the co-researchers. I applied the tenets of the Health Belief Model (refer to section 2.7.3 for details) to some of these findings, which could have arisen out of contextual factors of the research participants.

7.4. Application of psychological theories to HIV/AIDS risk reduction

Many theories for HIV/AIDS prevention were discussed in section 2.7. I propose the use of certain psychological models within emancipatory theory frameworks in order to develop a model for intervention.

I examine the notions of risk and gender among young people ³⁶ against the background of the constructs of the Health Belief Model (HBM). I look to Glanz et al (2002) who

³⁶ The study was designed to enable young people to examine the notions of gender and risk in the context of HIV/AIDS

outline the following constructs of the HBM: perceived susceptibility, perceived severity, perceived benefits, perceived barriers and self-efficacy.

Perceived susceptibility: refers to one's perception of one's risk for contracting HIV. Thompson et al (1996:52) indicate that many youth do not believe in the benefits of recommended actions to prevent HIV/AIDS because their experience is that the dangers of unprotected sex are exaggerated. An example is that adolescents, whose knowledge (prior to becoming sexually active) is that sexual intercourse will result in pregnancy or sexually transmitted diseases, and who subsequently engages in unprotected sexual intercourse, with no manifestation of either of these consequences, believe that their prior knowledge was wrong. As a result of this experience, they are not motivated to use contraceptives.

Morris et al (1996:63) focus on reasons for young peoples' denial of their personal vulnerability for HIV/AIDS. They assert that denial of threatening information (also referred to as cognitive avoidance) allows people to ignore information which is in opposition to their current high risk behaviour. Denial becomes counterproductive when people choose not to avert risky behaviour.

I assessed young peoples' perceptions of their personal risk as well as their perceptions of the risk faced by other young people for HIV infection. Most of the respondents in my study believed that they were personally at risk for HIV/AIDS. A comparatively larger number of respondents believed that other people were at risk for the disease. Young people, who believe that others are more susceptible to the disease than themselves, are likely to believe that HIV risk reduction programs are more applicable to other people. Many participants in this study attributed their risk for HIV-infection to non sexual activities, for example, the accidental mixing of blood or being pierced by a needle by a criminal. The respondents in my study offered risky sexual behaviour as the reason for other people being at risk for HIV/AIDS (refer to appendix D, pages 3, 34, 36 and appendix F, Interview 8, page 2). The implication is that young people who view non sexual risks for transmission of HIV as applicable to themselves will not see the need for applying safe sex strategies to themselves. They will perceive HIV intervention programs, which are based on safe sex strategies, as being effective for other people.

Perceived severity: involves one's feelings concerning the severity of the disease. Most of the respondents in my study associated HIV/AIDS with death; they were not evasive about the seriousness of the disease. Yet, they viewed pregnancy as a more immediate problem than HIV/AIDS among women. This might suggest the reason why many young people use non-barrier methods (for example, contraceptive pills) instead of condoms during sexual intercourse. This choice of contraception fuels the spread of HIV/AIDS.

Perceived benefits: refers to one's beliefs in the efficacy of recommended action to reduce risk of HIV/AIDS. An insight revealed by my study was that young people constitute their own ideas about recommended actions to reduce risk of HIV infection. These ideas are based on their life experiences and are influenced, to a large extent, by their peers. Several respondents in my study held views of "recommended actions" to reduce their risk which were troubling, and are discussed below:

- HIV/AIDS is a bedroom disease. The perception for reducing risk of infection is to engage in sexual intercourse outside of the bedroom.
- Contraceptive injections and contraceptive pills can prevent transmission of HIV.
- Condoms are ineffective against HIV transmission. In some cases, communities believed that condoms were used to spread the virus among African people (refer to appendix G).
- Adoption of certain positions during sexual intercourse prevents the transmission of HIV.

These respondents held their own notions of HIV/AIDS reduction strategies, which were, in fact, dangerous sexual practices.

Perceived barriers: this involves one's opinion of the physical and psychological costs of advised action. In my study, the cost of using condoms as a safe sex strategy was too high for some of the respondents because it interrupted sexual activity and it dulled sexual pleasure. This reminded me of Butler's (1999) assertion in Youdell (2005:253) that sex and desire are deeply intertwined and form the central constituents of gender and sexuality. The pursuit of physical pleasure was viewed as the main reason why young people engaged in risky sexual behaviour. The benefit of pleasure outweighed

the cost of possible infection with HIV, for many respondents. The psychological costs of using condoms as a way to prevent HIV transmission were equally high. Some girls elected not to request that their male partners use a condom because they believed condoms destroyed their male partner's sense of power and control. The girls reproduced gender power relations in this way. Some boys in the study believed that condoms impacted negatively on their masculine status, central to which were sexual relations which emphasized male dominance, together with male heterosexual virtuosity and potency. One respondent equated the use of a condom with expecting a girl to "eat an unpeeled banana", which he found to be preposterous. There were female and male respondents who viewed condoms as archaic sexual items, only used by people who were out of synch with youth culture. Having one sexual partner was also viewed as damaging especially to the male sexual identity. One girl believed that if she had multiple sexual partners, this would serve to equalize power relations between herself and her partner.

Self-efficacy: refers to one's confidence in one's ability to take action. Many respondents believed that they were empowered by virtue of their knowledge about HIV/AIDS to take "correct" action. Some participants in my study demanded the right to make independent sexual decisions and believed that they were "old enough" to care for their sexual health. Many of the respondents exuded a great deal of confidence about their sexual behaviour.

What this reveals is that elicitation research in terms of these tenets of the HBM, when undertaken by co-researchers who are peers of the research participants and serve as deep insider researchers, yields candid information which may form an integral part of intervention programs. The following guide represents one way in which young people can be enabled to undertake research in the field of HIV/AIDS.

7.5. Young people in research activities

In response to the central question asked in this study, the following guide is proposed.

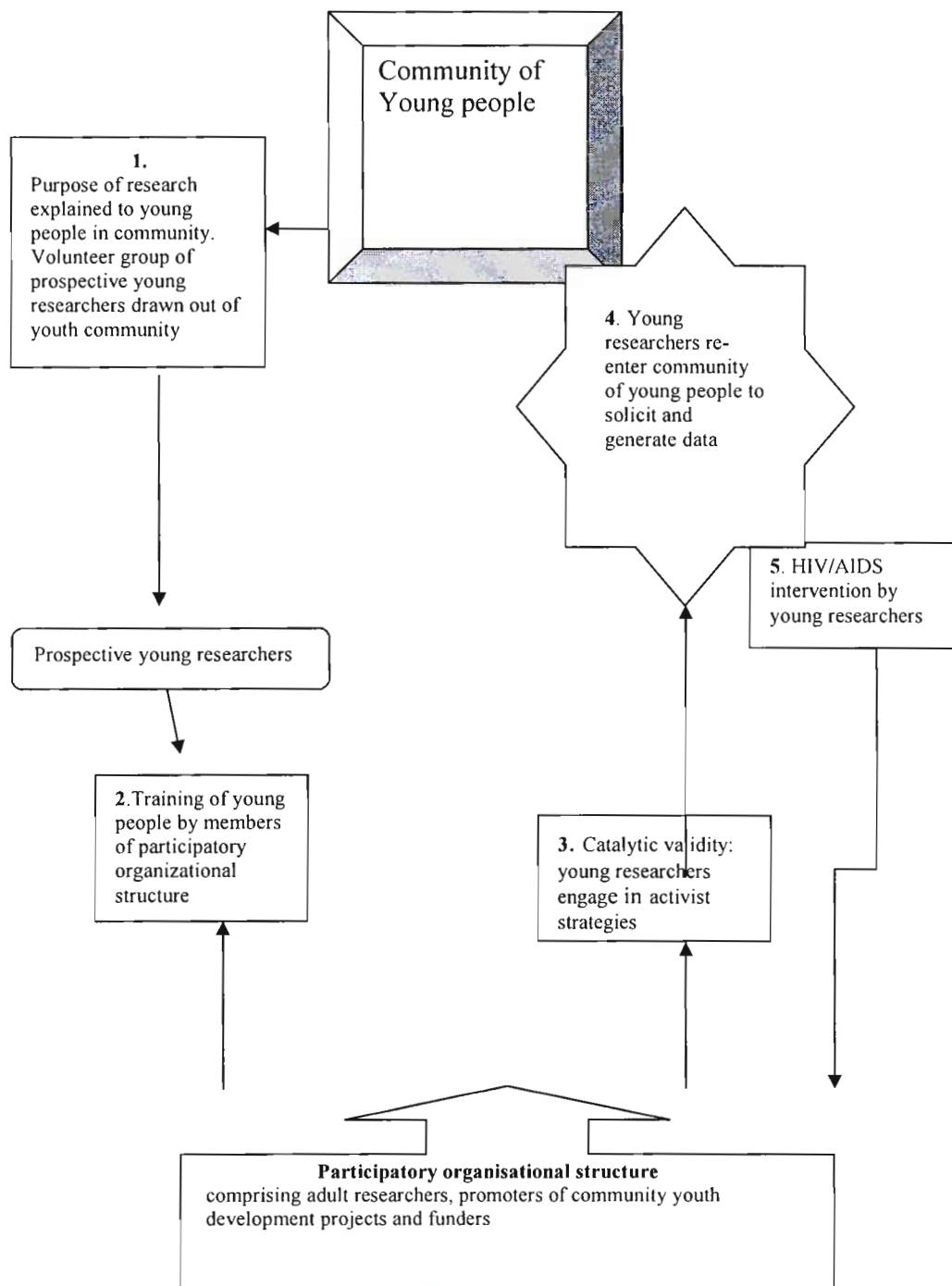


Figure 7.1: A template to engaging young people in research

A recommendation of my study is that researchers enter a community (step 1 in figure 7.1) and explain the purpose of the research (in this case, risky behaviour in the context

of HIV/AIDS) to young people in a community. Young people are then fully appraised of the nature of the research and the skills which they, as researchers, would be expected to execute. Step 2 in figure 7.1 shows how prospective young researchers engage with and are trained by members of a participatory organizational structure to enable them to carry out research. Catalytic validity enables young researchers, who have a heightened understanding of the purpose of the research, to leave participatory organizational structure and enter the field, with a view to carrying out research. This is represented by step 3. Young researchers solicit and generate data in step 4. They afford other young people in the community the opportunity for their previously silenced voices to be heard. Other young people are empowered by being given the opportunity to speak about issues which affect them, to their peers, in an environment of reduced power differentials between the researcher and the researched. Finally, young researchers return to participatory organizational structure where they collaborate with other researchers in analyzing the data, creating context specific intervention strategies (step 5) and writing research reports.

7.6. Implications of this study: The future research agenda

This study has revealed how young people can be engaged to solicit the type of data from their peers which unleashes details of sexuality in a way that disrupts “static truths”. This could be attributed to the minimizing of principle of hierarchy which is entrenched in research in general. In addition to enabling young people to engage in work for young people, this type of research creates a space for co-operative learning.

Young researchers can enable one to examine the notion of power, which organizes the categories of sex to make its gender inscriptions appear to have a natural origin, from new perspectives. It allows for analysis of data that begins by not taking categories for granted but by questioning their autonomy and naturalness. Future research projects, where youth researchers play a role, can make possible the examination of various versions of power, politics and identity, and create a space for different formulations around these areas. A more sophisticated understanding of power, politics and identity can be obtained by engaging young people in research.

7.7. Concluding remarks

In this chapter, I have discussed how young people can become actively engaged in understanding social problems which affect them and in adopting strategies to resolve these problems through research activity. I cautiously suggest that adults who investigate and theorise about risky behaviour among young people are “theory hunters”. The “what we (adults) can do for them (young people) in the form of “benevolent intervention” reproduces power differentials.

I have shown how the main researchers become effaced from the research project as well as from the young researchers during the course of a study. This is a natural consequence of applying feminist methodologies (alluded to by Olesen, 1994; Luke, 1992 and Lather, 2004), which call for research participants to become researchers themselves. It involves a process during which the main researcher becomes lost over uneven social spaces, and experiences, what Lather (2004) refers to as “a slippage of the self”, while entering zones of unequal access to the hegemonic language of the youth. This “getting off track” of the main researcher involves exposing oneself and one’s work to the risk of doing things differently, in order to obtain knowledge from and as community of young people.

The use of feminist research methodologies, which intersect with tenets of participatory action research (reflexive critique, dialectical critique, collaborative resource, risk and plural structure, detailed in section 3.5), can empower marginalized groups, for example, young people, to generate data and formulate intervention programs. These programs can take into account contextual factors which impact on sexual decision-making of young people, in order to become effective in the struggle against the HIV/AIDS pandemic.

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Appendix A

Ganges Secondary School
61 Jammu Road
Merebank
14/04/2004

Dear Parent/ Guardian

Request for participation of learner: HIV/Aids programme

We live in times which demand much effort from our educators and our children. At Ganges Secondary, we are not only concerned about the academic success of our learners, but also about their personal safety and well-being.

I am an educator at the school and I am studying the spread and impact of HIV/Aids in our community as well as at our school. In order to address this threat in our society, I have engaged in a study to determine what our children need to know about HIV/Aids. I will design a program which will meet the needs of our children to help them to make safe choices to prevent becoming infected with HIV.

This is a sensitive topic and the views of the children about contraception and sexual intercourse will be a part of the study. Part the study will be based on the following aims of the sexuality education programme, as prescribed by the National Education Department:

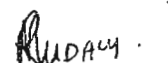
- *Abstinence from or postponement of sexual activity*
- *If sexual activity has already taken place, to encourage changing this lifestyle*
- *If the choice is made to continue this lifestyle, responsible behaviour is essential.*

We cannot watch over our children during every minute of the day. Our children are under great pressure from their friends and the media to become involved in dangerous behaviour (examples: taking drugs, using and abusing alcohol, smoking cigarettes, becoming involved in sexual intercourse). We need to assist our children to make positive lifestyle choices.

It is our responsibility, as parents and educators, to assist and train our children to make safe decisions. Our children must be trained to recognise dangerous situations or activities and not become involved in them.

I am seeking your permission for your child/ ward to participate in the HIV/Aids prevention education programme. The name of your child/ ward will be kept confidential at all times.

Yours faithfully


Mrs R Mudaly

I, the Parent/ Guardian of _____ in grade _____ hereby grant/ do not grant permission for my child/ ward to participate in the HIV/Aids prevention programme.

Signature of Parent/ Guardian

Date

Print name of witness	Signature of witness
1.	
2.	

Ganges Secondary
61 Jammu Road
Merebank
27/02/2004

Dear Parent/ Guardian

Permission for participation of child/ ward in research project

I am conducting a research project about the reasons which underly the spread of HIV/AIDS among our youth. In order to do this, I request your permission for your child's/ ward's participation to train as co-researchers in this project. Your child/ ward will be involved in training programmes which include research methods in:

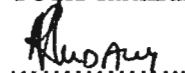
- (i) *visual literacy (taking and interpreting photographs).*
- (ii) *administering questionnaires to grade 10 learners at school.*
- (iii) *interviewing learners from school.*

Issues about why young people engage in risky behaviour which can make them susceptible to HIV infection will be explored.

Your child/ ward,, in grade, has agreed to participate as a co-researcher in this project. The training will be done during relief periods and the breaks. Interviews and the taking of photographs may be done out of school.

I hereby seek your consent to allow your child/ ward to engage in this research project.

Yours faithfully



Mrs R Mudaly

Reply slip

I,, the parent/ guardian of in
grade, hereby grant consent for the participation of my child/ ward to train
as a co-researcher in the field of HIV/AIDS among youth.

.....
Signature of parent/ guardian

Appendix B

Merebank: A Case of Unplanned Urban Development

The Merebank area is sad testimony of the effects of poor planning, which allowed polluting industrial development and residential development to occur side by side. Merebank, an Indian residential township of about 50 000 people, may more aptly be described as an island surrounded by a sea of polluting industries. It is located 16 kilometres south of Durban, Natal. The residential area finds itself on the doorstep of industry in every direction. There are two giant oil refineries on either side, a massive paper mill, a chromium processing plant, an airport, and a multitude of chemical processing industries. Some industries have embarked on large-scale expansion programs and are physically creeping into the community hinterland. Many houses border the factories directly, and some families live only 20 metres from an oil refinery.

Environmental problems include noise from industry and aircraft; an atmosphere loaded with combustible emissions and sulfur dioxide; contamination of the local land, river, and ocean; heavy-duty industrial traffic flow; and general neglect of the area. The atmospheric pollution crisis is aggravated during the winter months when the polluted valley is subjected to temperature inversions, thereby forcing the pollution closer to the ground.

For almost three decades, very little attention was paid to the residents' well-being. Industrialists conducted their operations with impunity. They have presented themselves as untouchable elites charged with technical superiority and unchallengeable power, and argued that the burden of proof lay with the residents. The community's efforts to obtain information and to advocate change have been met with resistance from both the companies and the local authorities. Community activists reported that when they approached local authorities to find out exactly what is being emitted into the air, they were told that such information was confidential. As a result, members of the community and workers in the factories have no clear idea of the dangers that they face as a result of local industry. For decades the local residents have complained, but to no avail.

Recent surveys conducted in the area reveal a high incidence of chest-related ailments that can be related to the high levels of sulfur dioxide and other chemical contaminants in the atmosphere. A study among children in the Merebank area showed that they were 10 times more

likely to develop respiratory problems than children outside the area. Recently, there has been a spate of industrial disasters in the neighbourhood, including a bromine gas leak, oil tank explosions, worker injuries, and industrial traffic accidents. As if to underscore the dangers that the Mission witnessed, the day after we visited Merebank a large section of the community had to be evacuated following a bromine gas leak.

The local civic organization, the Merewent Ratepayers' Association (MRA), has now established an Environmental Project Unit (EPU). The EPU has been able to bring local industries and local authorities to the table to discuss sound environmental management. The EPU aims to persuade industries to conform to acceptable environmental, health, and safety standards and to generate environmental awareness in the community. It is currently playing an important role in environmental policy formulation at local, regional, and national levels. The EPU management and the council of the MRA want Merebank to be declared a special area and are calling for a full environmental impact assessment to be conducted to establish an acceptable coexistence between industry and the community and to determine maximum permissible levels of pollutants.

A large proportion of the South African population relies on coal for cooking and heating and is potentially at risk from high levels of indoor pollution. The use of coal for cooking and heating is also a major cause of outdoor air pollution in urban areas. Recent studies have found that exposure to particulate matter in South Africa is several times higher than health guidelines allow (Terblanche et al. 1993). This exposure has been directly associated with a high incidence of respiratory illness, which is the second highest cause of infant mortality in South Africa.

Indoor pollution problems are further exacerbated by poor urban planning with respect to the location of residential areas and health facilities. For example, in the city of Port Elizabeth, the Empilweni Chest Hospital, in the community of New Brighton, is downwind of the General Tyre, Eveready, and Novaboard factories. As a result, prevailing winds carry air pollution from these factories to the hospital.

The critical task of achieving reduced levels of urban air pollution will be addressed in part by electrification and, in the longer term, by the development of cleaner energy sources and improved energy efficiency. Air pollution monitoring and control efforts in South Africa have not, to date, been focused on personal exposure, even

though this is the most accurate indicator of risks to public health. Furthermore, control of air pollution outside factory premises falls under the Department of Environmental Affairs and Tourism, whereas inside the factory gates it falls under the Department of Labour. Many local authorities do not have the technical capacity to monitor air pollution within their areas.

4.2 South Durban

Location and history

Durban is the largest city of the KwaZulu-Natal province and has a population of approximately 2.3 million. The city is located on the eastern seaboard of South Africa around a flourishing harbour, which handles seven times more cargo than all of South Africa's other harbours combined.

The development of south Durban as an industrial hub was initiated in 1938 following lobbying of the pre-apartheid white local government by local industrialists. Subsequent apartheid industrial planning was substantially modelled on the precedents set by Durban. Most of south Durban was deliberately zoned for industrial development, and black people were forcibly removed to make way for industrial complexes. At the same time, residential areas for black people were located close to these dirty industries in order to facilitate easy access to cheap labour. Toxic dumps and a major sewerage works were also located in the area. In south Durban, the result is a patchwork of residential and industrial areas located cheek by jowl. Racial restrictions also led to overcrowding in many of the residential areas and local people had to bear with poverty as well as inhumane working and socioeconomic conditions.

The area now has a population of about 285,000 people, and black communities comprise an overwhelming majority of this population. Low-income communities are located in Clairwood, Jacobs, Isipingo, Merebank, Wentworth, Umlazi, Amanzimtoti and Umbogintwini. The Bluff, a white and predominantly working class area, also borders on industrial areas.

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The harbour development over the years has led to the complete destruction of the once extensive mangrove swamps and highly toxic chemicals were stored in massive volumes in close proximity to the residents. In 1946, the development of an airport in south Durban resulted in most of the surrounding wetland areas being drained. During the 1950's and later, heavy petrochemical industries, Engen and Sapref (Shell & BP) refineries, were permitted to develop in close proximity to residential areas on land that had been used by local people for market gardening. For more information on the history and environmental problems of communities in South Durban, refer to <http://scnc.udw.ac.za/~ub/cbos/sdcea>

South Durban communities have a long history of environmental concern. The transition to democracy enabled a more robust articulation of this concern. In 1993, a group of community organisations and NGOs formed the South Durban Environmental Forum (SDEF) to coordinate civil society action on air pollution. This forum was the forerunner to the South Durban Community Environmental Alliance (SDCEA) which was constituted in 1997.

Industrial profile

South Durban is the industrial hub of Durban. It is 'home' to two of the largest oil refineries in Southern Africa. South Durban has the largest concentration of petrochemical industries in the country and it refines approximately 60% of South Africa's petroleum. There are five major industrial belts located in the South Durban Basin (SDB): the valley industrial belt; the Jacobs industrial belt; the Navy/Mobeni industrial belt; the Island View industrial belt and the Prospecton industrial belt.

The valley industrial belt, nicknamed "cancer valley" (after Cancer Alley in California) is occupied by the Engen and Sapref refineries, a Mondi paper mill, an international airport, a sewage treatment plant, a busy south coast freeway, a polluted Umlaas canal, landfill sites and

various mills, processing and manufacturing industries. All are located close to residential and recreational areas.

Prospecton is an industrial area that separates the two residential areas of Isipingo. The largest employers there are Toyota Manufacturing, Sasol Fibres, South African Breweries, and Republican Press. To the south of Prospecton is the giant AECI Umbogintwini chemical complex. 15 plants are located on the site and most have been sold off to different companies as AECI 'unbundled' in the mid 1990s.

Island View is the port terminal for the import of chemicals for the whole of Southern Africa and an increasing volume of exports. This complex stores toxic chemicals, some of which are potential and known carcinogens. The odour problem emanating from this industrial belt is well noted. It is connected to the refineries by pipelines running beneath the residential streets of Merebank, Wentworth and the Bluff and is located adjacent to the Bluff. The remaining industrial belts consist of many smaller processing and manufacturing factories. In total, the South Durban Basin contains some 600 industries, including the two oil refineries.

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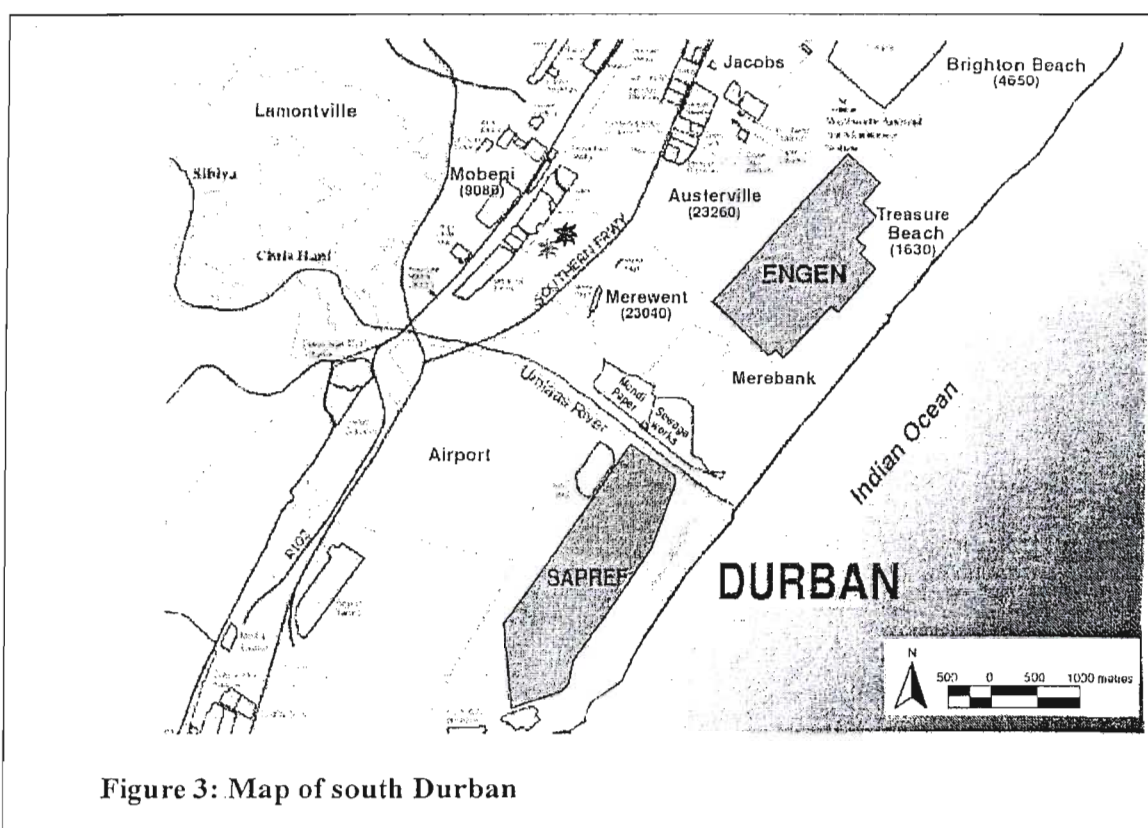


Figure 3: Map of south Durban

* - Location of Siyazama Secondary School (research site)

Figure 3: Map of south Durban

Health Status

Until recently, there were no formal studies examining the effects of pollution on health in the South Durban Basin. However, there is now a growing body of evidence linking increases in health problems with increased levels of noxious gases, elevations in daily average and/or maximum exposures to sulphur dioxide, and certain meteorological conditions.

Appendix C

Dear Student

The spread of HIV/Aids in South Africa affects young people greatly because, even if they do not contract HIV, many of them know people who are infected with the virus. Their lives will be affected either directly or indirectly by HIV/Aids.

The Department of Education in South Africa as well as in many other parts of the world view the school as a suitable place to teach young people about HIV/Aids. I am interested in learning about how the spread of HIV among the youth may be reduced. I am doing this work as a student registered with the University of Kwazulu Natal.

You are invited to fill in the following questionnaire, which will help me to determine what your needs are in HIV/Aids education. A part of the questionnaire also deals with how young men and young women are viewed in a society where HIV/Aids affects large groups of people.

You do not need to write your name on any piece of written information involved in this study. Your name (identity) will be absolutely confidential and will not be released to any person for any reason.

Thank you for your valuable time and contribution to this work.

Yours faithfully

R. Mudaly

Section A

Biographical details

Please indicate your responses with a tick (✓) in the appropriate blocks or write in the space provided.

1. What is your age? _____

2. What is your gender? Male ☐ Female ☐

3. What is the occupation of your parents/guardian?

Occupation	Mother	Father	Guardian
Miner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Farmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clerk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Factory Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Labourer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secretary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic Worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleaner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Machinist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does not work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Whom do you live with?

Mother ☐ Father ☐ Both parents ☐ Guardian ☐ Other ☐

5. What is your Parent's/ Guardian's highest level of Formal education?

Please state the highest grade or qualification.

Formal Education	Father	Mother	Guardian
Primary school (state grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary School (state grade)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
University / Technikon (state qualification)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section B

In this section we would like to know what **you think** you need to know about HIV/AIDS.

1. What is HIV/AIDS?
Know a lot ☐ Know very little ☐ Know average ☐
2. How is HIV transmitted?
Know a lot ☐ Know very little ☐ Know average ☐
3. How can HIV infection be prevented?
Know a lot ☐ Know very little ☐ Know average ☐
4. Speaking to a partner about sexual intercourse
Know a lot ☐ Know very little ☐ Know average ☐
5. How to say "no" to risky situations
Know a lot ☐ Know very little ☐ Know average ☐
6. How to leave a risky/ dangerous situation
Know a lot ☐ Know very little ☐ Know average ☐

Section C

1. Studies have shown that most young women are forced to participate in sexual intercourse? What are your views on this statement?

- 2.1.1. Do the men in your community have rights in deciding about sexual activity?

Yes ☐ No ☐

- 2.2.2. Do the women in your community have rights in deciding about sexual activity?

Yes ☐ No ☐

- 2.2. Explain your answers to the above question.

3.1. What do you understand by "contraception".

3.2. Whom do you think should be responsible for contraception?

Male ☐ Female ☐

3.3.1. Why do you think **young men** carry condoms?

It is a sign of love for your partner ☐

It shows that you are a grown man (you are no longer a child) ☐

It means you are willing to have sexual intercourse ☐

Other reason ☐

If you stated other, please explain.

3.3.2. Why do you think **young women** carry condoms?

It is a sign of love for your partner ☐

It shows that you are a grown woman (you are no longer a child) ☐

It means you are willing to have sexual intercourse ☐

Other reason ☐

If you stated other, please explain.

3.4. Who should carry condoms?

Male ☐ Female ☐ Both partners ☐

3.5. What would you think about a **boy** if you saw him carrying condoms?

3.6. What would you think about a **girl** if you saw her carrying condoms?

4. What do you think **young women** can do to prevent the spread of HIV/Aids?

5. What do you think **young men** can do to prevent the spread of HIV/Aids?

Section C |

1.1 Do you believe that you can contract HIV?

Yes ☐ No ☐

1.2. Explain why you feel this way?

1.3. Do you believe that other people are at risk for contracting HIV?

Yes ☐ No ☐

1.4. Explain why you feel this way?

1.5 Why do you think the following people become involved in behaviour which can lead to HIV infection? Place a tick (✓) if you agree with any of the reasons given below.

Reason	Young women	Young men
1. Sexual intercourse gives pleasure.		
2. Sexual intercourse shows a person's love for a partner.		
3. It indicates that a person is a man/ woman.		
Other reasons. Please explain.		

1.6 What are the risks which a young person faces when he/ she participates in sexual intercourse?

For men?

For women?

1.7 If you become involved in sexual intercourse as a young person, how will your future be affected?

Section D

What are your personal belief or practices on the following issues:

Belief/ Attitude	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
1. I change my behaviour to suit my friends because I want to be accepted by them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My friends give me a great amount of comfort when I am depressed or in some kind of trouble.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I believe that to have a relationship with one partner is a safe choice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I believe that to have a relationship with several partners is "cool".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I believe that HIV/Aids is a growing problem among young people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I am embarrassed to ask for advice about contraception or sexually transmitted diseases.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I believe that all sexually active people should undergo voluntary testing for HIV to prevent transmission of HIV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I believe that it is wise to practice safe sex by using condoms every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I believe in waiting to have sexual intercourse until I know and trust my partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix D

Table 1: Knowledge about HIV/AIDS

Perception	B1 : What is HIV/AIDS	B2 : How is HIV transmitted	B3: How can HIV infection be prevented
Knows a lot	54.0	73.4	66.1
Know very little	11.3	8.9	8.9
Know average	34.7	17.7	25.0
Total	100.0	100.0	100.0

Table 2: Skills to prevent HIV/AIDS

Perception	B4: Skills involved when speaking to a partner about sexual intercourse.	B5: How to Say "No" to risky situations.	B6: How to leave a risky / dangerous situation.
Knows a lot	20.2	59.7	45.2
Know very little	11.3	16.1	19.4
Know average	41.9	23.4	34.7
Missing	1.6	0.8	0.8
Total	100.0	100.0	100.0

Classification or comparison studies of C3.2, C3.4, D 1.1, D1.3 as per Gender and Age.

1. Gender –Comparison:

C3.2

			A2: Respondent's Gender		Total
			Male	Female	
C3.2 : Whom do you think should be responsible for contraception	Male	Count	18	17	35
		% of Total	14.5%	13.7%	28.2%
	Female	Count	12	36	48
		% of Total	9.7%	29.0%	38.7%
	Don't know	Count	3	5	8
		% of Total	2.4%	4.0%	6.5%
	Both	Count	5	6	11
		% of Total	4.0%	4.8%	8.9%
	Missing	Count	11	11	22
		% of Total	8.9%	8.9%	17.7%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C3.4

			A2: Respondent's Gender		Total
			Male	Female	
C3.4 : Who should carry condoms	Male	Count	7	9	16
		% of Total	5.6%	7.3%	12.9%
	Female	Count	1	0	1
		% of Total	.8%	.0%	.8%
	Both parents	Count	41	66	107
		% of Total	33.1%	53.2%	86.3%
Total	Count	49	75	124	
	% of Total	39.5%	60.5%	100.0%	

D1.1

			A2: Respondent's Gender		Total
			Male	Female	
D1.1 : Do you believe that you can contract HIV	Yes	Count	36	59	95
		% of Total	29.0%	47.6%	76.6%
	No	Count	12	16	28
		% of Total	9.7%	12.9%	22.6%
	Missing	Count	1	0	1
		% of Total	.8%	.0%	.8%
Total	Count	49	75	124	
	% of Total	39.5%	60.5%	100.0%	

D 1.3

			A2: Respondent's Gender		Total
			Male	Female	
D1.3 : Do you believe that other people are at risk for contracting HIV	Yes	Count	40	70	110
		% of Total	32.3%	56.5%	88.7%
	No	Count	5	3	8
		% of Total	4.0%	2.4%	6.5%
	Missing	Count	4	2	6
		% of Total	3.2%	1.6%	4.8%
Total	Count	49	75	124	
	% of Total	39.5%	60.5%	100.0%	

2. Age –Comparison:

1 C3.2:

			C3.2 : Whom do you think should be responsible for contraception					Total
			Male	Female	Don't know	Both	Missing	
A1 : Respondent's Age	14	Count	1	0	0	0	0	1
		% of Total	.8%	.0%	.0%	.0%	.0%	.8%
	15	Count	22	33	2	6	18	81
		% of Total	17.7%	26.6%	1.6%	4.8%	14.5%	65.3%
	16	Count	7	12	4	3	4	30
		% of Total	5.6%	9.7%	3.2%	2.4%	3.2%	24.2%
	17	Count	4	0	2	2	0	8
		% of Total	3.2%	.0%	1.6%	1.6%	.0%	6.5%
	18	Count	1	2	0	0	0	3
		% of Total	.8%	1.6%	.0%	.0%	.0%	2.4%
	19	Count	0	1	0	0	0	1
		% of Total	.0%	.8%	.0%	.0%	.0%	.8%
Total		Count	35	48	8	11	22	124
		% of Total	28.2%	38.7%	6.5%	8.9%	17.7%	100%

2. C3.4

			C3.4 : Who should carry condoms			Total
			Male	Female	Both parents	
A1 : Respondent's Age	14	Count	0	0	1	1
		% of Total	.0%	.0%	.8%	.8%
	15	Count	14	1	66	81
		% of Total	11.3%	.8%	53.2%	65.3%
	16	Count	2	0	28	30
		% of Total	1.6%	.0%	22.6%	24.2%
	17	Count	0	0	8	8
		% of Total	.0%	.0%	6.5%	6.5%
	18	Count	0	0	3	3
		% of Total	.0%	.0%	2.4%	2.4%
	19	Count	0	0	1	1
		% of Total	.0%	.0%	.8%	.8%
Total	Count	16	1	107	124	
	% of Total	12.9%	.8%	86.3%	100.0%	

3. D1.1:

			D1.1 : Do you believe that you cant contract HIV			Total
			Yes	No	Missing	
A1 : Respondent's Age	14	Count	1	0	0	1
		% of Total	.8%	.0%	.0%	.8%
	15	Count	63	17	1	81
		% of Total	50.8%	13.7%	.8%	65.3%
	16	Count	22	8	0	30
		% of Total	17.7%	6.5%	.0%	24.2%
	17	Count	6	2	0	8
		% of Total	4.8%	1.6%	.0%	6.5%
	18	Count	2	1	0	3
		% of Total	1.6%	.8%	.0%	2.4%
	19	Count	1	0	0	1
		% of Total	.8%	.0%	.0%	.8%
Total		Count	95	28	1	124
		% of Total	76.6%	22.6%	.8%	100.0%

4. D1.3:

			D1.3 : Do you believe that other people are at risk for contracting HIV			Total
			Yes	No	Missing	
A1 : Respondent's Age	14	Count	1	0	0	1
		% of Total	.8%	.0%	.0%	.8%
	15	Count	76	4	1	81
		% of Total	61.3%	3.2%	.8%	65.3%
	16	Count	26	2	2	30
		% of Total	21.0%	1.6%	1.6%	24.2%
	17	Count	5	2	1	8
		% of Total	4.0%	1.6%	.8%	6.5%
	18	Count	1	0	2	3
		% of Total	.8%	.0%	1.6%	2.4%
	19	Count	1	0	0	1
		% of Total	.8%	.0%	.0%	.8%
Total		Count	110	8	6	124
		% of Total	88.7%	6.5%	4.8%	100.0%

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D1.5 : Why do you think young women and men become involved in behaviour which can lead to HIV infection.

	Frequency	Percent	Valid Percent	Cumulative Percent
Sexual intercourse gives pleasure	92	74.2	74.2	74.2
Sexual intercourse shows a person's love for a partner	12	9.7	9.7	83.9
It indicates that a person is a man / woman	3	2.4	2.4	86.3
Other reasons	5	4.0	4.0	90.3
Missing	12	9.7	9.7	100.0
Total	124	100.0	100.0	

Classification or comparison studies of D 1.5 as per Gender

			A2: Respondent's Gender		Total
			Male	Female	
D1.5 : Why do you think young women and men become involved in behaviour which can lead to HIV infection.	Sexual intercourse gives pleasure	Count	36	56	92
		% of Total	29.0%	45.2%	74.2%
	Sexual intercourse shows a person's love for a partner	Count	3	9	12
		% of Total	2.4%	7.3%	9.7%
	It indicates that a person is a man /	Count	0	3	3
		% of Total	.0%	2.4%	2.4%
	Other reasons	Count	2	3	5
		% of Total	1.6%	2.4%	4.0%
	Missing	Count	8	4	12
		% of Total	6.5%	3.2%	9.7%
Total	Count	49	75	124	
	% of Total	39.5%	60.5%	100%	

Modified analysis D 1.6 a & D 1.6b.

D1.6a : What are the risks which a young person faces when participates in sexual intercourse : For Men

	Frequency	Percent	Valid Percent	Cumulative Percent
AIDs, HIV, STDs	95	76.6	76.6	76.6
Early death	7	5.6	5.6	82.3
Becoming a parent (Father), Pregnancy (falls pregnant)	16	12.9	12.9	95.2
Ruining the future	6	4.8	4.8	100.0
Total	124	100.0	100.0	

D1.6b : What are the risks which a young person faces when participates in sexual intercourse: For Women

	Frequency	Percent	Valid Percent	Cumulative Percent
AIDs, HIV, STDs	49	39.5	39.5	39.5
Early death	1	.8	.8	40.3
Becoming a parent, Fall pregnancy	67	54.0	54.0	94.4
Ruining the future	1	.8	.8	95.2
Personal feelings of guilt	1	.8	.8	96.0
Problems with society	5	4.0	4.0	100.0
Total	124	100.0	100.0	

Analysis of E1 to E9 as per Gender & Age

1 As per Gender

C1 : Studies have shown that most young women are forced to participate in sexual intercourse? What are your views on this statement * Q1 : Gender of the respondent

			Q1 : Gender of the respondent		Total
			Male	Female	
C1 : Studies have shown that most young women are forced to participate in sexual intercourse? What are your views on this statement	No answer	Count	9	9	18
		% of Total	7.3%	7.3%	14.5%
	Agree / Yes .Women are raped	Count	24	51	75
		% of Total	19.4%	41.1%	60.5%
	Yes - In order to meet financial needs	Count	0	2	2
		% of Total	.0%	1.6%	1.6%
	No- disagree	Count	12	7	19
		% of Total	9.7%	5.6%	15.3%
	May be	Count	4	5	9
		% of Total	3.2%	4.0%	7.3%
	Missing	Count	0	1	1
		% of Total	.0%	.8%	.8%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C3.1:

C3.1 : what do you understand by " contraception".

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	62	50.0	50.0	50.0
	A pill for women	6	4.8	4.8	54.8
	Used by women bot to fall pregnant	43	34.7	34.7	89.5
	A kind of protection / pills and condoms	9	7.3	7.3	96.8
	Safeguard against STDs	4	3.2	3.2	100.0
Total		124	100.0	100.0	

C3.1 vs. Gender

C3.1 : what do you understand by " contraception". * Q1 : Gender of the respondent

			Q1 : Gender of the respondent		Total
			Male	Female	
C3.1 : what do you understand by "contraception".	No answer	Count	26	36	62
		% of Total	21.0%	29.0%	50.0%
	A pill for women	Count	4	2	6
		% of Total	3.2%	1.6%	4.8%
	Used by women bot to fall pregnant	Count	15	28	43
		% of Total	12.1%	22.6%	34.7%
	A kind of protection / pills and condoms	Count	3	6	9
		% of Total	2.4%	4.8%	7.3%
	Safeguard against STDs	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
Total	Count	49	75	124	
	% of Total	39.5%	60.5%	100.0%	

C3.3.1:

C3.3.1 : Why do you thnk young men carry condoms

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	1	.8	.8	.8
	To be safe.Protect from HIV.Responsible behaviour	30	24.2	24.2	25.0
	To impress friends	8	6.5	6.5	31.5
	Just in case of sex.They will be protected	3	2.4	2.4	33.9
	Tp prevent pregnancy	1	.8	.8	34.7
	Want / willing to have sex	48	38.7	38.7	73.4
	Sign of love for a partner	22	17.7	17.7	91.1
	Shows that you are a grown man / women	11	8.9	8.9	100.0
	Total	124	100.0	100.0	

C3.3.1 vs. Gender

C3.3.1 : Why do you think young men carry condoms * Q1 : Gender of the respondent
Crosstabulation

			Q1 : Gender of the respondent		Total
			Male	Female	
C3.3.1 : Why do you think young men carry condoms	No answer	Count	1	0	1
		% of Total	.8%	.0%	.8%
	To be safe.Protect from HIV.Responsible behaviour	Count	14	16	30
		% of Total	11.3%	12.9%	24.2%
	To impress friends	Count	2	6	8
		% of Total	1.6%	4.8%	6.5%
	Just in case of sex.They will be protected	Count	1	2	3
		% of Total	.8%	1.6%	2.4%
	Tp prevent pregnancy	Count	0	1	1
		% of Total	.0%	.8%	.8%
Total	Want / willing to have sex	Count	20	28	48
		% of Total	16.1%	22.6%	38.7%
	Sign of love for a partner	Count	9	13	22
		% of Total	7.3%	10.5%	17.7%
	Shows that you are a grown man / women	Count	2	9	11
		% of Total	1.6%	7.3%	8.9%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C 3.3.2**C3.3.2 : Why do you think young women carry condoms :**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	2	1.6	1.6	1.6
	To be safe.Protect from HIV.Responsible behaviour	30	24.2	24.2	25.8
	To impress friends	4	3.2	3.2	29.0
	Just in case of sex.They will be protected	4	3.2	3.2	32.3
	In case of rap	1	.8	.8	33.1
	Tp prevent pregnancy	4	3.2	3.2	36.3
	Want / willing to have sex	57	46.0	46.0	82.3
	Sign of love for a partner	15	12.1	12.1	94.4
	Shows that you are a grown man / women	7	5.6	5.6	100.0
	Total	124	100.0	100.0	

C 3.3.2 vs. Gender

3.3.2 : Why do you think young women carry condoms * Q1 : Gender of the responden
Crosstabulation

			Q1 : Gender of the respondent		Total
			Male	Female	
C3.3.2 : Why do you think young women carry condoms	No answer	Count	1	1	2
		% of Total	.8%	.8%	1.6%
	To be safe.Protect from HIV.Responsible behaviour	Count	13	17	30
		% of Total	10.5%	13.7%	24.2%
	To impress friends	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
	Just in case of sex.They will be protected	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
	In case of rap	Count	0	1	1
		% of Total	.0%	.8%	.8%
	Tp prevent pregnancy	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
	Want / willing to have sex	Count	23	34	57
		% of Total	18.5%	27.4%	46.0%
	Sign of love for a partner	Count	5	10	15
		% of Total	4.0%	8.1%	12.1%
	Shows that you are a grown man / women	Count	4	3	7
		% of Total	3.2%	2.4%	5.6%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C3.5

C3.5: What would you think about a boy, if you saw him carrying condoms

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	2	1.6	1.6	1.6
	Ready / Wants / Likes to have sex	24	19.4	19.4	21.0
	Wants to be careful.Practice safe sex.Is responsible	53	42.7	42.7	63.7
	I am unaffected	4	3.2	3.2	66.9
	Person is sexually active	18	14.5	14.5	81.5
	Boy / Girl is too forward / doing adult things	21	16.9	16.9	98.4
	In case of rape	2	1.6	1.6	100.0
	Total	124	100.0	100.0	

C3.5 vs. Gender

3.5: What would you think about a boy, if you saw him carrying condoms * Q1 : Gender of the respondent

			Q1 : Gender of the respondent		Total
			Male	Female	
C3.5: What would you think about a boy, if you saw him carrying condoms	No answer	Count	2	0	2
		% of Total	1.6%	.0%	1.6%
	Ready / Wants / Likes to have sex	Count	10	14	24
		% of Total	8.1%	11.3%	19.4%
	Wants to be careful.Practice safe	Count	20	33	53
		% of Total	16.1%	26.6%	42.7%
	I am unaffected	Count	0	4	4
		% of Total	.0%	3.2%	3.2%
	Person is sexually active	Count	8	10	18
		% of Total	6.5%	8.1%	14.5%
Total	Boy / Girl is too forward / doing adult things	Count	9	12	21
		% of Total	7.3%	9.7%	16.9%
	In case of rape	Count	0	2	2
		% of Total	.0%	1.6%	1.6%
		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C3.6:

C3.6: What would you think about a girl, if you saw him carrying condoms

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	4	3.2	3.2	3.2
	Ready / Wants / Likes to have sex	27	21.8	21.8	25.0
	Wants to be careful.Practice safe sex.Is responsible	44	35.5	35.5	60.5
	I am unaffected	3	2.4	2.4	62.9
	It is the right thing to do	3	2.4	2.4	65.3
	Person is sexually active	15	12.1	12.1	77.4
	Boy / girl is fooling around	1	.8	.8	78.2
	Girl is forward / promiscuous / too fast / a bitch	21	16.9	16.9	95.2
	Boy / Girl is too forward / doing adult things	3	2.4	2.4	97.6
	I would be disgusted /shocked / feel dirty	3	2.4	2.4	100.0
	Total	124	100.0	100.0	

C3.6 vs Gender

C4 : What do you think young women can do to prevent the spread of HIV/ Aids

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	3	2.4	2.4	2.4
	Have safe sex.Use condoms.Use protection	31	25.0	25.0	27.4
	Abstain	59	47.6	47.6	75.0
	Attend workshops.Do research.Educate /talk about it among	4	3.2	3.2	78.2
	Do not prostitute oneself	6	4.8	4.8	83.1
	Engage in sexual intercourse only after marriage	6	4.8	4.8	87.9
	Be faithful to one partner. Do not have sex with many partne	13	10.5	10.5	98.4
	Dress up properly. Do not be bitchy	2	1.6	1.6	100.0
	Total	124	100.0	100.0	

C4 vs. Gender

**C4 : What do you think young women can do to prevent the spread of HIV/ Aids * Q1 :
Gender of the respondent**

			Q1 : Gender of the respondent		Total
			Male	Female	
C4 : What do you think young women can do to prevent the spread of HIV/ Aids	No answer	Count	2	1	3
		% of Total	1.6%	.8%	2.4%
	Have safe sex.Use condoms.Use protection	Count	15	16	31
		% of Total	12.1%	12.9%	25.0%
	Abstain	Count	24	35	59
		% of Total	19.4%	28.2%	47.6%
	Attend workshops.Do research.Educate /talk	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
	Do not prostitute oneself	Count	1	5	6
		% of Total	.8%	4.0%	4.8%
	Engage in sexual intercourse only after	Count	2	4	6
		% of Total	1.6%	3.2%	4.8%
	Be faithful to one partner.	Count	4	9	13
	Do not have sex with	% of Total	3.2%	7.3%	10.5%
	Dress up properly. Do not be bitchy	Count	0	2	2
		% of Total	.0%	1.6%	1.6%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

C5**C5 : What do you think young men can do to prevent the spread of HIV/ Aids**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	6	4.8	4.8	4.8
	Have safe sex.Use condoms.Use protection	39	31.5	31.5	36.3
	Abstain	45	36.3	36.3	72.6
	Attend workshops.Do research.Educate /talk about it among	4	3.2	3.2	75.8
	Do not prostitute oneself	5	4.0	4.0	79.8
	Engage in sexual intercourse only after marriage	4	3.2	3.2	83.1
	Be faithful to one partner.				
	Do not have sex with many partne	20	16.1	16.1	99.2
	Do not kiss on the mouth if you have sores	1	.8	.8	100.0
	Total	124	100.0	100.0	

C5 vs. Gender

C5 : What do you think young men can do to prevent the spread of HIV/ Aids * Q1 : Gender of the respondent

			Q1 : Gender of the respondent		Total
			Male	Female	
C5 : What do you think young men can do to prevent the spread of HIV/ Aids	No answer	Count	3	3	6
		% of Total	2.4%	2.4%	4.8%
	Have safe sex.Use condoms.Use protection	Count	16	23	39
		% of Total	12.9%	18.5%	31.5%
	Abstain	Count	22	23	45
		% of Total	17.7%	18.5%	36.3%
	Attend workshops.Do research.Educate /talk	Count	0	4	4
		% of Total	.0%	3.2%	3.2%
	Do not prostitute oneself	Count	1	4	5
		% of Total	.8%	3.2%	4.0%
	Engage in sexual intercourse only after	Count	0	4	4
		% of Total	.0%	3.2%	3.2%
	Be faithful to one partner.	Count	7	13	20
	Do not have sex with	% of Total	5.6%	10.5%	16.1%
	Do not kiss on the mouth if you have sores	Count	0	1	1
		% of Total	.0%	.8%	.8%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

D1.2

D1.2 : Explian why you feel this way

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	10	8.1	8.1	8.1
	Any one can get HIV	26	21.0	21.0	29.0
	It can be trasmitted accidentally.	48	38.7	38.7	67.7
	You can never be certain about future events	3	2.4	2.4	70.2
	Sleeping / having sex with infected partner	4	3.2	3.2	73.4
	I am careful / educated	20	16.1	16.1	89.5
	Could be raped	4	3.2	3.2	92.7
	I am careless / do not know enough about HIV / AIDS	2	1.6	1.6	94.4
	They are careless	1	.8	.8	95.2
	Condoms do not prevent HIV/ AIDS	1	.8	.8	96.0
	HIV/ AIDS cannot be seen therefore one cannot get it	1	.8	.8	96.8
	God punishes for not believing in the bible	1	.8	.8	97.6
	I do not have sex	3	2.4	2.4	100.0
	Total	124	100.0	100.0	

D1.2 vs. Gender

D1.2 : Explian why you feel this way * Q1 : Gender of the respondent Crosstabulation

			Q1 : Gender of the respondent		Total
			Male	Female	
D1.2 : Explian why you feel this way	No answer	Count	5	5	10
		% of Total	4.0%	4.0%	8.1%
	Any one can get HIV	Count	11	15	26
		% of Total	8.9%	12.1%	21.0%
	It can be trasmitted accidentally.	Count	18	30	48
		% of Total	14.5%	24.2%	38.7%
	You can never be certain about future events	Count	1	2	3
		% of Total	.8%	1.6%	2.4%
	Sleeping / having sex with infected partner	Count	1	3	4
		% of Total	.8%	2.4%	3.2%
	I am careful / educated	Count	9	11	20
		% of Total	7.3%	8.9%	16.1%
	Could be raped	Count	0	4	4
		% of Total	.0%	3.2%	3.2%
	I am careless / do not know enough about HIV / AIDS	Count	2	0	2
		% of Total	1.6%	.0%	1.6%
	They are careless	Count	0	1	1
		% of Total	.0%	.8%	.8%
	Condoms do not prevent HIV/ AIDS	Count	0	1	1
		% of Total	.0%	.8%	.8%
	HIV/ AIDS cannot be seen therefore one cannot get it	Count	1	0	1
		% of Total	.8%	.0%	.8%
	God punishes for not believing in the bible	Count	0	1	1
		% of Total	.0%	.8%	.8%
	I do not have sex	Count	1	2	3
		% of Total	.8%	1.6%	2.4%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

D1.4

D1.4 : Explain why you feel this way

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No answer	17	13.7	13.7	13.7
	Any one can get HIV	18	14.5	14.5	28.2
	It can be trasmitted accidentally.	24	19.4	19.4	47.6
	You can never be certain about future events	1	.8	.8	48.4
	Sleeping / having sex with infected partner	14	11.3	11.3	59.7
	Unfaithful to one's partner	1	.8	.8	60.5
	I am careful / educated	3	2.4	2.4	62.9
	Could be raped	1	.8	.8	63.7
	I am careless / do not know enough about HIV / AIDS	6	4.8	4.8	68.5
	They are careless	36	29.0	29.0	97.6
	They are careful	2	1.6	1.6	99.2
	HIV/ AIDS cannot be seen therefore one cannot get it	1	.8	.8	100.0
	Total	124	100.0	100.0	

D1.4 vs. Gender

D1.4 : Explain why you feel this way * Q1 : Gender of the respondent Crosstabulation

			Q1 : Gender of the respondent		Total
			Male	Female	
D1.4 : Explain why you feel this way	No answer	Count	11	6	17
		% of Total	8.9%	4.8%	13.7%
	Any one can get HIV	Count	9	9	18
		% of Total	7.3%	7.3%	14.5%
	It can be trasmitted accidentally.	Count	11	13	24
		% of Total	8.9%	10.5%	19.4%
	You can never be certain about future events	Count	0	1	1
		% of Total	.0%	.8%	.8%
	Sleeping / having sex with infected partner	Count	5	9	14
		% of Total	4.0%	7.3%	11.3%
	Unfaithful to one's partner	Count	1	0	1
		% of Total	.8%	.0%	.8%
	I am careful / educated	Count	1	2	3
		% of Total	.8%	1.6%	2.4%
	Could be raped	Count	0	1	1
		% of Total	.0%	.8%	.8%
	I am careless / do not know enough about HIV / AIDS	Count	1	5	6
		% of Total	.8%	4.0%	4.8%
	They are careless	Count	10	26	36
		% of Total	8.1%	21.0%	29.0%
	They are careful	Count	0	2	2
		% of Total	.0%	1.6%	1.6%
	HIV/ AIDS cannot be seen therefore one cannot get it	Count	0	1	1
		% of Total	.0%	.8%	.8%
Total		Count	49	75	124
		% of Total	39.5%	60.5%	100.0%

Appendix E

INTERVIEW SCHEDULE

1. The school, media and community tell us many things about HIV/AIDS. What do you need to know about HIV/AIDS?
2. Do you think that young women are forced into having sex?
3. Do young women have the right to decide about sexual activities?
4. Do young men have the right to decide about sexual activities?
5. Why do you think so?
6. What do you understand by the word "contraception"?
7. Should the male or female partner be responsible for contraception?
8. What would you think if you saw a young woman carrying a packet of condoms in her pocket?
9. What would you think if you saw a young man carrying a packet of condoms in his pocket?
10. What are your views about using condoms during sexual intercourse?
11. Would you be embarrassed to ask for advice about contraception and sexually transmitted diseases?
12. How do you think young men can prevent the spread of HIV?
13. How do you think young women can prevent the spread of HIV?
14. Do you believe it is possible for other young people to contract HIV?
15. Why do you think so?
16. What do you think are some of the main reasons why young people have sexual intercourse?
17. In your opinion, are women or men responsible for the spread of HIV/AIDS?
18. Do you think HIV is a growing problem among young people?
19. Why do you feel this way?
20. Do you engage in sexual intercourse?
21. Many boys/ girls are attracted to you. Why is this so?
22. What is your idea of a good time?

Appendix F

Interview 1

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
1	Interviewer	Isiah	M	Upper middle	Merebank	16	African
	Interviewee	Eliza	F	Lower middle	Lamont	17	African

The first question is "The school, media and community tell us many things about HIV/AIDS. What do we need to know about the disease?"

Er... communities do tell us about this disease and what you have to know is.. um.. what you have is this disease kills you..

OK. Do you think that - er - young women are often forced into having sex?

Yes. I think so.

Why?

Um... Yes and no. Because.... No one is forced to have sex.

OK. Do young women have rights to decide about sexual activity?

They do, because it's their life, they have to decide for themselves, so, yes, I think they do have rights.

And do young men have rights to decide?

It also applies from the above, yes, they also have rights.

What do you understand about the word "contraception"?

Contraception. Contraception its- something that is used to prevent... from being pregnant like a pill or an injection.

Should the male or female partner be responsible for contraception?

Yes. They should be. Cause it protects them from being HIV and AIDS.

OK. What do you think when you see a young man carrying condoms?

Er.. I see a young, responsible man who thinks of himself and his future.

And a woman?

For a young woman who carries a condom. I think she is a bitch.

Why do you think so?

Cos there's no need for a condom. I mean. Hello! That's a waste of time.

How do you think young men can prevent the spread of HIV/AIDS?

Umm.. from abstaining. I think. That's the only way, cause a condom also, is like a waste of time, as I've said.

And women?

Women. A pill, injection. I think this can help them from umm.. falling pregnant and getting the disease.

Now, I'd like to get more personal ... and I don't ... since famously, you are the renowned bitch of the millenium, since that's what you're called...

Uh hmmm

Umm.. are you on the pill?

No. I don't see the need for a pill. I think I am old enough to take care of myself. I don't need.... I don't need a pill.(very assertive)

Umm. Since you did mention before the interview, that you don't use condoms, what, what if you fall pregnant?

I don't think I'll fall pregnant. I... I ... I ... don't know. I.. I have that thing, that I don't fall pregnant. That is how I am.

OK. And if you do fall pregnant, would you consider having an abortion?

Obviously. I don't need a baby. I don't need someone to cry for me. I've got ways, I've got people to see.

Do you believe it is possible for you to contract HIV?

To?

Contract HIV.

No.

Why do you think so?

(Pause)

It's because of the position that you use when you're having sex.

So, you're saying that the positions you have are somewhat superior and umm... they'll prevent you from getting HIV?

Yes.

OK. Do you believe it is ... umm.. possible for other young people to contract HIV?

I think so.

Er... Why do you think so about that?

As I've mentioned...you.. need to know how to do it correctly. You need to know the ways of doing it correctly.

And clearly, you are a master in this.

(Laughs) So they say.

(Both laugh)

Er.. in your opinion, are men or women the people who are most likely to spread HIV?
Do you think men or women are most likely to spread HIV?

I think men.

Why?

Cos most of the time men are the ones who sleep with most girls, everywhere, and, usually they don't use condoms. So you sleep with a girl, and the other one, and you get HIV from that.

Since clearly you're taking on the role of men, would you consider yourself more of a threat to young men?

Umm.. I think so cause as you have heard before, I am a B-I-T-C-T-H (spells out the word).

OK. What do you think are some of the main reasons why young people have sexual intercourse?

I think let's just enjoy it... er... I'm talking from experience... ooh ... it's like ... Oh! my word! I can't explain it. Cause it's so much fun... talking from experience, as I've said ... I think so.

OK.

Just having fun, I think.

Do you think that HIV/AIDS is a growing problem amongst young people?

I think it is... I think it is... cause once you are HIV and AIDS, obviously somewhere along you are going to be AIDS. You are going to have AIDS which will prevent you from having a great future, which means you won't be able to - to - attain your goals. It is a big problem.

What are some of your goals since clearly, you are not planning to have a child. Just having sex from one boy to another. What are your goals?

My goals. My goal is to go from one boy to another to another to another to another until I am satisfied. That's all.

To get more personal, how often do you do it?

How... meaning a day, a week, a month?

A week.

A week? Maybe four or five a week.

And, are these different boys?

Obviously, yes.

Do you know their names?

Some of them I do, some of them I don't.

And what would you say, what would you say their age is?

It's from 16 to 27.

And, how old are you?

I am 16.

OK. Don't you think that in some way, you are shortening your life and your future?

No, I am not. What I know is I am having fun and fun and fun. I am not shortening my future, not at all.

What are your views about using condoms during sexual intercourse?

There is no need to use a condom. You see, when you are kissing and touching and you've got that feeling then you pull out for a boy to put on a condom. I just lose interest so I don't see the need for a condom.

OK. Would you be embarrassed to ask for advice about contraception or sexually transmitted diseases?

No. I wouldn't be.

Why wouldn't you be?

Cause it helps. Though I'm a bitch - I know I am- but sometimes I need advices to know what- what I should do and what could help me from being HIV/AIDS.

OK. I noticed that many boys, in fact, even girls, are attracted to you. Why is this so? And how does this make you feel?

I've been involved with many of the boys and I've got tired of boys. I've been like around the world with boys and I thought maybe its time to change and I got involved with girls. I don't know why they are interested in me, but they are. So, I don't know. But I just got tired of boys and I thought "Maybe it's time to change. Lemme just go for the girls".

And how does this make you feel?

Well, it makes me feel good. Cause I've had boys. Now I have girls. So I have everything.

OK. Are you sexually active and if so, how many girls, and in this case, boys as well, both boys and girls, have you slept with?

Excuse me?

Are you sexually active?

Yes. I am.

How many boys have you slept with?

I've lost count. I'm sorry, I can't give you the number. (Laughs). I've had many.

OK. Why do you engage in sexual activity?

Well. They are so much fun. They are so much fun. You just can't get enough of them. They are like ... I don't know ... ice cream or what - they are fun- that's the word I can use.

Is there something better you can possibly do with your life except sleep with boys and girls?

Right now, I haven't seen anything that I can do. So I think boys it is- or girls, cause I've had enough of boys. So, I think girls it is.

And what about school? Do you go to school?

I do go to school.

And doesn't this interfere with your studies?

No. They don't. Cause I do these things on my own time and my schoolwork is- have its own time.

What's your idea of a good time?

Sex.

Oh! So, where do you do it? At home?

It depends where I am. I may be at school, I may be at home.

And how do you do it at school?

Well, at school, we usually have studies at about 4 0' clock, so whoever I have to do it with, we usually wait till all the people are gone. So we use the teacher's table, and we do it like- Oh! You know! That is all I can say.

OK. Any last words? Maybe a piece of advice to young people.

Young people?

Yeah.

Have fun when you have fun but be careful of HIV. I might be a bitch but I do take care of myself.

OK. Thank you very much.

Interview 2

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
2	Interviewer	Prim	F	Lower middle	Merebank	16	Indian
	Interviewee	Patsy	F	Lower middle	Chatsworth	15	Indian

The school, media and community tell us many things about HIV and AIDS. How do you feel about this?

Well this disease is like common, and condoms don't really work. So (laughs). Some of them are really, you know, want to have sex, but how are they going to use condoms if it's like 99% not true. So, Ja.

Do you think that women are often forced into having sexual intercourse?

Ja.(Yes). Most of the time, but some of them, the teenage girls, they want to do it.

Do young women have the right to decide about sexual activities?

Yes, of course they do.

And do young men get to decide?

Yes.

What do you understand by the term "contraception"?

(Laughs). Oh! It's like- it prevents pregnancy. Er- instead of using a condom or something, you might have to use birth control.

Should the male or female partner be responsible for contraception?

Yes. Both.

What do you think when you see a young woman carrying a condom?

I think it's good.

And when you see a young man carrying a condom?

I also think it's good. You have to be safe rather than being sorry.

How do you think young men can prevent the spread of HIV?

Young men. They can't abstain. They can never. Cos they always want to - they always want to ... you know ... have sex... so... they have to use a condom.

And young women? How do you think they can prevent the spread of HIV?

Birth control. Contraception.

Do you believe it is possible for other young people to contract HIV?

Yes. It is.

In your opinion, do you think men or women are more likely to spread HIV?

Men. Definitely men. Those bastards!

What do you think are some of the main reasons why young people have sexual intercourse?

Some of them because of fun. When they go to like house parties and stuff, they get drunk. Drugs. They can't control their horny selves. (laughs). Oh! These guys! And girls also. When they get drunk they are also very horny. So ja. And sometimes in the clubs.

Do you think HIV is a growing problem among young people?

Yes. Definitely.

And why do you feel this way?

They don't want to use protection cause they are so caught up in the moment.

What are your views about using condoms during sexual intercourse?

In my opinion, I don't like it. (laughs). It's not very comfortable. It's better skin on skin. (embarrassed laugh).

OK. Would you be embarrassed to ask for advice about contraception and sexually transmitted diseases?

No. I wouldn't.

And, are you sexually active?

Well, definitely. (laughs).

Er- why are you sexually active?

In the beginning, I didn't like it. I wanted to wait for marriage and stuff like that, but -- I guess when you fall in love it's like the first time, you want to experience it with the guy you are in love with. Then. I like got used to it and it was like I can't stop.

Many boys are attracted to you. Why is this so?

I guess they so taken in by beauty, they don't look at your inner self, your heart and stuff like that. They just want what's on the outside.

And how do you feel about these boys reacting to you in this way?

Sometimes, I think it's stupid. Cause, you know, all boys are dogs, perverts. They- and they are really bastards, so ... (laughs).

How many sexual partners have you had?

I will say, about five.

And lastly, what is your idea of a good time?

My idea of a good time? (laughs). Oh! Let me think about this. Er... like a threesome and (laughs) you know like one girl and like five guys. And something in the shower. It's like overnight, and strawberries and cream and those body pastes and just licking it up. Oh! That's like too good! (laughs).

OK. Thank you for your time and for being so open with me. Bye.

Interview 3

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
3	Interviewer	Luv	M	Upper working	Umlazi	16	African
	Interviewee	Reeves	M	Lower middle	Umlazi	17	African

The school, media and community tell us many things about HIV/AIDS. What do you think you need to know about this disease?

As the media tells us, this disease kills and there is no cure for it.

Do you think that young women are often forced into having sex?

Before, they used to be but now, they are just asking for it.

What do you mean "they ask for it"?

By wearing those short skirts. To me it just translates as "Take me home, babe".

Do you think that they have a right to decide about sexual activity?

I think so.

How do you think they do?

By dressing appropriately.

And. What is your idea of dressing appropriately?

Wearing untempting clothes. You know, I am a teenager. My hormones lose control at a time.

What do you mean that your hormones lose control at times?

I can't explain it. Just this feeling that's penetrating my penis and this means I must get it.

Get what?

Sex. You know, what we are talking about.

So, it is okay if I assume that you are sexually active.

Yes, I am. Since the age of 12. And now I am going to turn 17 and still I am not exhausted.

What do you think when you see a young man carrying condoms?

Oops! What are those! (mocking laugh)

What do you mean "What are those"? (laughing)

Hello! Which country do you come from? Condoms are just a waste of time. Why must I wear one?

So, since you see them as a waste of time, what do you think when you see other young men, with the exception of you, carrying a condom?

Well, maybe they are responsible. But look at this. Will you eat an unpeeled banana?

No.

Exactly. Women see a dick with a condom as an unpeeled banana. So, re! No condoms means more sex!

What do you think when you see a young woman carrying a condom?

I just see a bitch.

Why?

Well, as she is carrying a condom, she is already expecting it - to be fucked.

How do you think young men can prevent the spread of HIV/AIDS?

I think they can prevent it by having a single partner or abstain.

Why do you use "they" instead of "we"?

Cause I'm excluded.

How are you excluded?

Duh! Because I cannot get this disease.

How do you prevent yourself from getting the disease? I mean, you said before, that a condom is a waste of time.

Location, location, location and location. I believe that sex HIV is a bedroom disease. So I do not have sex in a bedroom.

Okay. This is a bit interesting. Where do you have it?

At (in) the car, at my school prefect room, as well as (the) toilet.

Prefect room? How? Tell me exactly. Because the last time I checked, prefect rooms were made for prefect meetings.

We, as the prefects, we are (entrusted) with discipline at school and we are given our own room. So we do our own thing in our own room. So, we can have group sex without them knowing.

Who's "them"?

My girlfriends or the bitches.

So, at school, you mean you have sex with people who are not your girlfriends?

Obviously! Duh! Get a life!

Now, how do you think young women can prevent the spread of HIV/AIDS?

It is the same (as for men) but it would be annoying for me because I will have less partners to fuck.

What do you think are some of the main reasons why young people have sexual intercourse?

Because of their hormones. It turns a bit faster. It's very embarrassing for them to wank, so they just find one of the bitches to fuck.

Do you think that HIV/AIDS is a growing problem amongst young people?

Yes. As their hormones turn a bit fast, they are so active to it, they like it (sex) more.

What are some of your goals?

My goal is to go somewhere and find a good person or a better girlfriend.

Does this mean that you are planning to get married and settle one day?

No. having one partner is boring.

Okay. So, how many times do you do it (have sex)?

Twice or thrice a week.

Are these different girls?

Yes. One partner is boring. I told you so.

And, as with your girlfriends which you mentioned earlier, how often would you say you do it with them because you change (partners) all the time.

Ja. Because, you know, when you are having sex with a single person, it's just boring. You need to know all the styles and all of the stuff. Sometimes, I have sex with my girlfriends just twice a month, just to make them happy.

Do you know all these girls' names?

No, I just know my girlfriend only. The other ones, we just meet at the party or somewhere.

And with your permanent girlfriends, how many of them are there?

Three. And there may be more than three. Just for me to know. By that I mean the number increases by those who are not my girlfriends.

What would you say are these girls' ages?

From 17 to 25.

I've asked you about your age. What are your views about using condoms during sex?

Ja. It might be perfect but for me it is a (waste) of time. Because when you are on the action, it's just wasting your time.

Would you be embarrassed to ask for advice about contraception?

Yes. As I'm the age of 17. No one is expecting me to have sex. So, it's annoying for me.

Why are so many girls attracted to you?

Because of my style, my look, everything that I wear are so perfect for me, and they find it attractive.

How does this make you feel?

Good, as in now. Perfect. In my friends, it seems like I'm on the edge.

How many girls have you slept with?

Do you really want to know that? I mean, I have been sleeping around since the age of 12. I'm 17 now.

So, in other words, you've .. er...

I lost count.

What is your idea of a good time?

It's when I get an orgasm and reach the point of ejaculation, this makes me feel macho!

And any last words? Or maybe, a piece of advice to young people.

If you have the same problem as mine, it would be best for you to wank if you are not old enough for sex. Otherwise, you will be so hooked, you won't escape. Like me.

And, you've mentioned the word "wank". Can you please specify, what do you mean about wank?

Ha ha. (laughs aloud).

Thank you very much. The information which I have obtained from you will remain private. Thank you.

Okay. Fine by me.

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
4	Interviewer	Candy	F	Upper working	Merebank	16	Indian
	Interviewee	Sunshine	M	Upper working	Merebank	16	Indian

The school, media and community tell us many things about HIV and AIDS. What do you need to know about this disease?

Well, to say it is life-altering is the least. Because, when you get this disease, your life as you know it ends. Everything stops. Because once you have this disease, you are considered an outcast. Sort of like you carry the Black Plague.

Do you think that young women are forced into having sexual intercourse?

No.

Why do you think so?

Well, for one, when I go to the clubs, all you have to do is just use a vest, and act a bit dizzy. And trust me, the girls are on you before you even think of getting onto them.

Okay. Do you think women have the right to decide about their sexual activity?

Yes.

Why?

Because, how can I put this? They are offering their bodies on the line. So they should have made the choice before they did it. So they do have a choice, obviously.

And young men?

Well, to young men it's kind of instinctive. It is a choice, but with every man it leans 90% on the "yes" side.

What do you understand by the term "contraception"?

..... and the rubber glove. (laughing)

(laughing) Who told you this?

I felt it for myself.

Should the male or female partner be responsible for contraception?

I think both parties should be involved in the contraception department because seeing that both of them are doing it, it should be both their responsibilities.

What do you think when you see a young man carrying a condom?

He's a smart man.

And a young woman?

She's very prepared.

How do you think young men can prevent the spread of HIV and AIDS?

First of all, by becoming responsible. I mean, I think about the rubber glove story. It's kind of true but at the end of the day you are still doing the same thing (still having sex). Only the feeling is a bit different. But it saves your life in the process.

And how do you think young women can prevent the spread of HIV and AIDS?

It's also contraception for women as well. By even abstaining, which is normally what they do. And even, I think, to stop giving blow jobs as well. Because I read in an article that when a girl gives a man a blow job, the thing that goes down her mouth carries the different, opposite genes that she has. Therefore, HIV/AIDS is caused.

Do you believe it is possible for you to contract HIV?

Yes, it is. It's possible for anyone to contract HIV. No one is safe from it.

Please tell me why you feel this way.

Let's put it this way. Even if you have sex or you don't you are still going to get HIV some way or another. More probably if you have sex. Because if you're not (sexually active) - these days you know the darkie ous are running rampant around. If they come and poke you with a needle or something you are still going to get HIV/AIDS. Even small things - getting cut with a bottle- you can have (contract) HIV/AIDS. It can happen to anyone at anytime.

Okay. Do you believe it is possible for other young people to contract this disease?

Yes, it is.

Tell me why you feel this way.

As stated above. Plus young people are very stupid as well.

In your opinion, are men or women the people most likely to spread HIV and AIDS?

Men.

Why?

Men are known as the dog nation. Which is true, because they don't tend to sleep with one person. They tend to sleep around like whores.

But you are a man.

Does it mean I have to cover up for them?

No, it doesn't.

What do you think are some of the main reasons why young people have sexual intercourse?

Just for being known as being "the man" or being known for having a certain reputation that is known as the untouchable. So, if you have sex you come out and everyone finds out, you know that this is a hot person in the school. It's kind of to get the reputation and just to satisfy the curiosity.

Do you think that HIV and AIDS is a growing problem among young people?

Yes.

Why do you feel this way?

Because while researching some statistics, I found out that over the past few years the percentage of HIV/AIDS patients in South Africa increased by at least 25%. And it's being spread into babies and stuff. So, generally, more of the young people are contracting it.

Why do you do this kind of research on this kind of topic?

It applies to me in some ways. And it's nice to know stats about your country, to know where you stand in it.

So, it just interests you to know what the future is going to be like?

Yes, it does. Seeing that I am a part of it.

What are your views about using condoms during sexual intercourse?

It's basically the safest thing to do. Because some of us live by the saying "it's better to be safe than sorry". Sure, the feeling gets a bit numb, and it takes away some of the fun in it but at the end of the day, at least when you come out, you know you are safe.

So, you are saying that you are sexually active?

You could say that. Although, the last time I had it was last year. Seeing that this year I am in matric and stuff. It's very hard to get time.

Would you be embarrassed to ask for advice about contraception or sexually transmitted diseases?

No.

Why?

Because it's a very relevant topic. It should be discussed and it should be known. And information should be wanted by everybody. So, by asking for it, there is nothing to be shy of. You are just doing what is logical and what is right to do. to find out about where you stand and what you should do to prevent it (sexually transmitted diseases).

I've noticed that you are very popular around the girls. And they are really attracted to you. Why is this so and how does it make you feel?

Most of all, this is so because.... How can I put it? It may not be so much because of my looks, but more because of the things I do. like, maybe, you know, training and karate and stuff. I'm a very physically active person. And how does this make me feel? It makes me feel over the moon. Because to get so much attention from beautiful girls, I might add, it makes you feel a whole lot better about yourself.

Okay. Now, I'm going to ask you a kind of a personal question. Why are you sexually active?

It started of because of my curiosity. Because, I was at this party and everywhere I looked, there was one guy and one girl going into the same room. and just walked past and I heard these noises and I'm thinking "what does it feel like and why do so many people want to do it"? I got a bit drunk, of course I mean, we're all men, we're stupid. And then one thing led to another and I reckon "I got nothing to lose, let me just do it".

How old were you when you first had sexual intercourse?

Fifteen and a half.

Do you remember the first girl you were with?

No.

Okay. This is the last question. What is your idea of a good time?

My idea of a good time is - me and my girl, alone on the beach, somewhere on the Bahamas and the moon is bright and out, and we are just on the tip of the water, and the water is just coming over us as we are doing it (having sex). And the light is shining on us, and there is this breeze, and the water and the whole environment must be perfect. It's like the sort of environment that will cater for animals. Ja. Oh! As well as lots of food, lots of other women. Me, myself and I.

One last question. What turns you on?

Honestly, a very intellectual person. I think most of the time I get turned on by a girl I can have a smart conversation with. You know, it just doesn't have to be around bullshit. You can have a nice conversation and she can be witty and stuff. I think that turns me on. Because its kind of like a challenge. Like, being an Arian, you look for competition. So, if she acts smart with you, it's like the thrill of the chase when you meet a girl who is witty and smart. She gives you a run for your money. That's the beauty about it.

Thank you so much for giving us the time to do this interview. We are really grateful, knowing you are so busy. Thank you.

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
5	Interviewer	Kesh	F	Upper working	Merebank	16	Indian
	Interviewee	Moonlight	F	Upper working	Merebank	16	Indian

So, how does he (Sunshine) behave?

In school, he is quite innocent and he ... he hides behind a mask but when we go to other places he is quite aggressive and he is perverted. What attracted me to him was, if he wants something, he just goes and gets it.

Is he very popular with the girls?

Yes.

Doesn't this offend you?

Not really.

Why?

Cause I can be a player and one can get played by one.

Are you sexually active?

Duh! Do you think that a guy who is sexually active will go for a girl who isn't?

How many sexual partners have you had?

There's been so many that- like- I've lost count.

And was Sunshine your first?

No. but he doesn't know that. He thought I was a virgin.

This is a very personal question, but I want to know how old you are.

Sixteen.

And how long have you been going with Sunshine?

About a month.

The school, media and community tells us many things about this (HI) virus. What do you need to know about it?

I don't think I need to know anything cause what I know is what I know and these people come and tell me. But it's not like I'm interested.

Do you think it's possible for you to contract the HIV virus?

No. Cause you like use a condom.

Do you think it's possible for other young people to contract the HIV virus?

It depends - if they use a condom or not- if they are on birth control.

Do you use a condom every time you have sex?

No. Not all the time.

Why?

Cos, sometimes it's uncomfortable and it makes a guy feel kind of - you know- underpowered, and he feels like he is not in control.

So, you say you are doing it for the guy, and not for yourself?

To a certain extent.

What do you understand by the term "contraception"?

Basically, birth control. And when a girl goes on a pill she prevents her (from) being pregnant.

Would you be ashamed to ask for advice about contraception?

No.

Why?

Because it's a subject that many people know about. And, I mean. It's life. So you have to know about it.

What do you think when you see a young man carrying a condom?

He's a bastard because maybe he might try to force a girl - an innocent girl- into having sex with him.

What do you think when you see a young girl carrying a condom?

She's one of my own! Cos she's a player, a player!

But doesn't this make you sexist? Isn't it possible for a girl to force a guy into having sex?

A girl can, like only overpower a guy if he is like, small in size. Like having a small package, if you know what I mean. Other than that, a girl can never force a guy into having sex. I mean, baby, come on, we offer it, you'll definitely want it.

How do you think young men can prevent the spread of HIV and AIDS?

By having no sex. Or safe sex, using a condom. And those damn dogs, you know, bastards, must stop taking advantage of women.

How do you think young women can prevent the spread of HIV and AIDS?

By abstaining. (inaudible) ... those damn dogs. And by giving them a kick in a place where it hurts. So that they won't have children. And show them a point. So they will know, not to (overpower) me. Cause I'm a woman and I'm proud of it.

In your opinion, are men or women the people most likely to spread the HIV virus?

It's definitely the damn dogs of men, who force and (overpower) women into having unprotected sex.

Why do you feel this way?

Because, it's just a sickly... men are the dogs in the relationship. I mean, they overpower women. I mean, they go to clubs, they go to sniff joints, they have sex with prostitutes.

Okay. What do you think are some of the main reasons why young people have sexual intercourse? You in particular.

For the pleasure of it. I mean, once you get started, it's kind of like you have to do it - all the time.

Do you think that HIV and AIDS is a growing problem among young people?

Yes.

Why?

Because some people are like forced into it while other choose to be irresponsible.

What are your views about using condoms during sexual intercourse?

Sometimes, it's uncomfortable. And then you get other times when it's there for protection, and the sake of being used. I wish we can show those bastards who is the boss in the relationship.

I've noticed that you are very popular among the guys. How do you feel about this? And how does Sunshine feel about this?

Well what I do behind Sunshine's back wouldn't hurt him. Cause he wouldn't know it. And what I do with his friends especially- he doesn't even notice it.

What do you mean "with his friends"?

You know, you kind of like- get tired of the guy. And you like get attention from his friends. And you like- go after his friends.

Do you think that being sexually active affects your academic performance?

No, not at all.

And Sunshine's?

No.

Okay. What is your idea of a good time?

A night away on the beach. With my guy. After a nice dinner, taking a romantic stroll with the moonlight shining on us.

When you say "guy" what do you mean - Sunshine or all Sunshine's friends?

All his friends. And other guys, who are my contacts at other schools.

Okay. I'd like to thank you for doing this follow-up interview with me. Thank you once again, Moonlight. You've been a star!

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
6	Interviewer	Zuma	M	Lower working	Umlazi	15	African
	Interviewee	Ndu	M	Upper working	Lamont	16	African

(Interviewee was sexually active, not currently sexually active, very fearful that he might have contracted HIV/AIDS. Interview punctuated by pauses, hesitation to confess fears, hesitation to indicate why he does not like to talk about AIDS).

The school, media and community tell us many things about HIV/AIDS. What do you need to know about HIV/AIDS?

I need to know how you get AIDS.

Do you think that young women are forced into having sex?

No. Not at all. Not at all.. they are not forced.

Why do you think so? Can you please tell me?

Of course I can. You know, nobody forces you to do sex. It's what you think you have to do. so, you are not forced to do sex. What I can say is it's voluntary. Ja. That's what I can say.

Okay. What do you understand by the word "contraception"?

Well - I'm not... to tell you the truth, I don't want to confuse myself about this thing. AIDS and all this stuff. Because I tell myself I must do what is safe. Which is, if I am having sex, I must use a condom. So, I don't want to stress myself with those things. I hope you understand. So, I don't want to read this kind of book. No, I don't want to. Because I know what I'm supposed to do.

(Respondent is tense, nervous, unhappy about something. He wants to evade the topic of HIV/AIDS.)

Thank you. What would you think if you saw a young woman carrying a packet of condoms in her pocket?

A young woman of what age?

Fifteen to eighteen.

Well, I can't say anything. But I will say "good". Because I know these young women, this young generation - they cannot wait. So, they like to have sex. Just as long as she knows what to do in order to be safe when you do sex. Just so long as they practice safe sex.

Why do you think this young generation enjoys having sex at a young age?

It's because of the world today. Everything has changed- everything's changed. So, I think, that's the cause. And most of the time, parents used to say "we must tell children the truth". So, the time we tell children the truth (about sex), sometimes they watch TV, so, that's how they get exposed to sex.

Do you engage in sexual intercourse?

No.

Do you believe it is possible for other young people to contract HIV?

Ja. I think it's possible.

Why do you think so?

Because you see, as I said before, sex is voluntary. Nobody forces you to do sex. So, it's all in the mind. So, think before you do something.

(Respondent is encouraging young people to consider the consequences of engaging in sexual intercourse before actually doing so.)

In your opinion, are women or men responsible for the spread of HIV/AIDS?

Are men or women responsible?

Yes. What do you think. Is it men or women?

I think both men and women are responsible.

Because...?

Because today, if you are a man with one woman, some people think that you are a fool. And women too. Women, they don't want to have one man. They don't want to be a one man woman. So I think both are responsible.

Okay. What are your views about using condoms?

During sexual intercourse?

Yes.

I like that. I think if they are using condoms, it's the same (feeling) as when they are not using condoms. There's no difference. You feel the very same thing. So, people, keep using condoms in order to stop the spreading of AIDS. There's no difference.

(Respondent appeals to young people to condomise.)

May I please ask you, why don't you engage in sexual intercourse?

It's because before, I wasn't thinking of AIDS, and thinking how dangerous it is. I just said "ah, AIDS and stuff. People who catch this are people who are older than me." But as time goes on, you look at people who die because of AIDS. That's when I started to wake up and think about AIDS. I'm usually scared. Most of the time, I'm scared when you talk about AIDS. Because, I said maybe, maybe:... Because, to be honest...

(Silence, tension prevails.)

It's been two times, two times not wearing condoms in my life.

(Respondent engaged in unprotected sex twice.)

So, that's why I'm scared. So, I think maybe I have AIDS. Although I know that I did it at an early stage (age). So, for sure, I didn't catch it. But, you never know. You'll never know.

Respondent tries to be optimistic that he did not contract HIV but quickly lapses into fear that he might be infected.

Are young girls attracted to you?

Ja, ja. (yes)

Why is this so?

I think it's the way I am. Because most of the time, if you are a man, you say "I want to attract girls".

How does this make you feel?

Well, most of the time, it makes me feel happy, but sometimes, when things become hectic, I feel I shouldn't have done this.

May I ask, what is your idea of a good time?

For what?

Just having a good time. Whether it's sex or not.

I think, go to school. Finish up at school. When you finish school, go and look for a job. Once you find a job, you can find yourself a girlfriend.

(Respondent wants the chance to be happy, healthy, live a normal AIDS-free life.)

Do you believe in abstinence (from sex)?

Ja. Ja (yes, yes) I do.

Why do you believe this?

I do because it helps you to stick to your goals. This is what our parents used to tell me that "your attitude gets a man's altitude".

Thank you very much for your time and hospitality.

Thanks.

(A sad interview. Respondent lives in real fear. I will suggest to interviewer to assist respondent in going to a voluntary testing service, and to receive counselling. Respondent is intelligent and yearns for a successful, healthy life.)

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
7	Interviewer	Kovi	F	Lower working	Merebank	15	Indian
	Interviewee	Raj	M	Upper middle	Bluff	16	Indian

The school, media and community tell us many things about HIV and AIDS. What do you think you need to know about this disease?

It's deadly and it kills people.

Do you think that young women are often forced into having sexual intercourse?

Yes. Because in today's day and age, when they go out, a boy and a girl, if the girl doesn't want to have sex with the boy, then the boy will leave her.

Do young women have rights to decide about sexual activity?

Yes.

Do young men have rights to decide about sexual activity?

Yes.

Why do you think so?

Because everybody, they have the right to say no.

What do you understand by the word "contraception"?

Er- condoms.

Should the male or female partner be responsible?

The male.

What do you think when you see a young woman carrying condoms?

She's desperate. She's a whore.

What do you think when you see a young man carrying condoms?

He's prepared. He doesn't want to get AIDS.

Do you think that young men can prevent the spread of AIDS?

Yes.

How?

Yes. By carrying condoms and practicing safe sex.

How do you think young women can prevent the spread of AIDS?

(By) always insisting on a condom.

Do you believe it is possible for you to contract HIV/AIDS?

Yes. Everybody is likely, no, not likely - it's possible to have AIDS.

Do you believe it is possible for other young people to contract HIV/AIDS? Please tell me why you feel this way.

Everybody is affected by AIDS in South Africa.

In your opinion, are women or men the people who are most likely to spread the disease. Why do you feel this way?

Men. Because they have the most (inaudible)

Okay. What do you think are some of the main reasons why young people have sexual intercourse?

Peer pressure.

Do you think that HIV/AIDS is a growing problem among young people? Why do you feel this way?

Yes. Because there are so many teenagers having sex today.

What are your views about using condoms during sexual intercourse?

It's right because it can prevent AIDS.

Would you be embarrassed to ask for advice about contraception or sexually transmitted diseases?

Yes.

Many girls are attracted to you. Why is this so and how does it make you feel?

I don't know why they are attracted to me. (inaudible)

How many girls in the past have you been with?

Four.

Are you sexually active?

Yes.

What is your idea of a good time?

A threesome.

Okay. I'd like to thank you for your time and I hope that you feel confident that I will keep this between you and me.

(Respondent feels that condoms can prevent the spread of HIV but does not consider the danger inherent in engaging in sexual intercourse with multiple partners. Idea of a threesome does not appear to be cause for concern in spreading HIV.)

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
8	Interviewer	Mandy	F	Upper working	Merebank	15	Indian
	Interviewee	Vusi	M	Lower working	Merebank	15	African

The school, media and community tell us many things about HIV and AIDS. What do you need to know about this disease?

Nothing much. I already know most of it. So I don't need to know anything.

Do you think that young women are often forced into having sexual intercourse?

No. a girl has sex whenever she is ready.

Do young women have rights to decide about sexual activity?

Yes.

Do young men have rights to decide about sexual activity?

Yes.

What do you understand by the word "contraception"?

It is the prevention girls take before having sex so that they don't become pregnant.

Should the male or female partner be responsible for contraception?

Female.

Why do you think this?

(No response)

What do you think when you see a young man carrying a condom?

Nothing much. Maybe he is playing it safe.

What do you think when you see a young woman carrying a condom?

That will create a bad impression. Because maybe she is looking for sex or something.

How do you think young women can prevent the spread of HIV and AIDS?

By asking their boyfriends to use condoms.

Do you believe that it is possible for you to contract HIV/AIDS?

Yes.

Why do you feel this way?

You (I) could get it by needles and stuff, from coming into contact with blood which is infected with AIDS.

Do you believe that it is possible for other young people to contract HIV?

Yes.

Please tell me why you feel this way.

By having more than one sexual partner and coming into contact with blood that is HIV.

In your opinion, are men or women the people who are most likely to spread HIV and AIDS?

Male.

Why do you feel this way?

I have heard about a male that did that but not yet a female.

What do you think are some of the main reasons why young people have sexual intercourse?

For the males - because of the experience and because some of their friends do it, they also want to do it.

Do you think that HIV/AIDS is a growing problem among young people?

Yes.

Why do you feel this way?

Everyone wants to experience it but they are not fully aware of the diseases they can get from it.

What are your views about using condoms during sexual intercourse?

It's good and it should be practiced more often.

Would you be embarrassed to ask advice about contraception or sexually transmitted diseases from anyone else?

No.

Why?

I have friends who can tell me about this kind of stuff.

Many girls are attracted to you. Why is this so?

I don't know. Maybe it's because I'm good-looking or something.

How does this make you feel?

A bit proud. Any boy would like all the girls to like him.

Are you sexually active?

No.

Why?

I am aware of the consequences.

How many girls have you had in the past year?

One.

Why?

Not many were to my liking.

Do you believe in abstaining from sex until marriage?

Not really. Because if you have the right partner at the right time, I think it could be done.

What is your idea of having a good time?

With my friends or with my girlfriends?

Anyone.

Go out to the movies or the beach or something to relax.

Thank you for your time. Everything that has been said here will remain confidential
Bye.

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
9	Interviewer	Nadi	F	Lower working	Merebank	15	Indian
	Interviewee	Vijay	M	Upper middle	Bluff	15	Indian

Interview was well done. Atmosphere sounded relaxed. Not rushed. Good use of probes.

Hi. Firstly, I would like to say thank you for doing this interview and everything that will be said here will remain confidential

Okay. Question number 1:

The school, media and community tell us many things about HIV and AIDS. What do you need to know about this disease?

Everything that is good and can be useful to everybody's life.

Do you think that young women are often forced into having sexual intercourse?

Yes. But it is also their fault. They should learn to say "no" because they should know what is right and what is wrong.

Do young women have rights to decide about sexual activity?

Yes. It depends on what they want and what they don't want. They should know what is good.

Do young men have rights to decide about sexual activity?

Yes. If they think they are old enough and they have done everything besides that (engaging in sexual activity) then they should proceed.

What do you understand by the word "contraception"?

I don't know.

What do you think when you see a young man carrying a condom?

You think he is going to have sex but he is trying to avoid AIDS.

What do you think when you see a young woman carrying a condom?

Mostly the same but the young girl will be more afraid. She doesn't want to fall pregnant or get the disease.

How do you think young men can prevent the spread of HIV and AIDS?

By using a condom and by being faithful to your partner.

How do you think young women can prevent the spread of HIV and AIDS?

By not having sex at all. Unless they know that their partner is faithful to them. And not breastfeeding when you realise that you have AIDS.

Do you believe it is possible for you to contract HIV? Please tell me why you feel this way.

Yes. Because anything can happen. Someone with a needle can just poke you and that might contain the virus or germ or you can just be forced to have sex. Because at that time you only feel "sex is good, sex is good".

Do you believe that it is possible for other young people to contract HIV? Please tell me why.

Yes. Because the disease is everywhere now. It is known in 80% of the world, no 60% have already contracted it. And since there is no cure, it seems to be spreading wild.

In your opinion, are men or women the people who are most likely to spread HIV. Please tell me why you feel this way.

Yes. Because knowing what will happen, they still do things like having unprotected sex and breastfeeding while having the disease, and raping and taking drugs with the same needles at the same time.

What do you think are the main reasons why young people have sexual intercourse?

Because of the teenage (period) which influences the opposite sexual hormones (desire for the opposite sex) to react and they play in your mind and you just feel like having sex.

Do you think that HIV and AIDS is a growing problem among young people?

Yes, it is. Because people, while they are growing, they like to do all sorts of different things and sex and AIDS is one of the things.

What are your views about using a condom during sexual intercourse?

I don't think it is exactly right. Although it works only 60% and 40% could be the minus point of using it. Although there is a 60% chance that you won't contract it (when using a condom) there is a 40% chance that you will (contract HIV).

Would you be embarrassed to ask for advice about contraception or sexually transmitted diseases?

Yes. At this age. Because at this age no one should think about things like that.

I notice many girls are attracted to you. Why is this so and how does it make you feel?

It makes me feel good in one way but in the other not very good because maybe as a friend or a best friend or as a sister but in another way, because of diseases like AIDS and things it's not that good because I might feel like having sex with them or they might feel the same way about me.

Do you engage in sexual activities?

No.

If you are not sexually active, do you think you will abstain until marriage?

Yes. I might.

What is your idea of a good time?

A good time? Having fun. The people around you also having fun. Not making anybody feel bad. Staying happy. No trouble.

What, in your eyes, is a simple, good of heart person?

A person that cares about you. A person that will help you in any problem. And a person that advises you when you are in problems. Like when a girl falls pregnant, they give advice, and try to get you out of trouble.

Thanks again, Joey. I really appreciate your time. Thank you.

Interview Number	Participants	Pseudonyms	Sex	Socio-economic background ¹	Residence	Age in years	Race
10	Interviewer	Suri	F	Upper middle	Merebank	15	Indian
	Interviewee	Kurti	F	Upper working	Merebank	15	Indian

Interviewee: 15 year old Indian girl with another girlfriend who piped in responses intermittently.

The school, media and community tell us many things about HIV and AIDS. What do you need to know about this disease?

Nothing really. It's actually a nagging thing to us because everyone is telling us "HIV, HIV, AIDS is bad. You are going to die" or whatever. "You get it through sex". But we don't really need to know anything.

Okay. Do you think that young women are often forced into having sexual intercourse?

Yes and no. Because some women got a mind of their own. They want to do it, and they will do it. But others, they are either raped or they have like abusive parents, where they force them into sexual intercourse.

Do young women have rights to decide about sexual activity?

Yes.

Do young men have rights to decide about sexual activity?

Yes

What do you understand by the word "contraception"?

It's a way of protecting yourself from getting sexually transmitted diseases or preventing yourself from getting HIV/ AIDS.

Should the male or female partner be responsible for contraception?

I think both. Both of them should be responsible as individuals.

What do you think when you see a young man carrying a condom?

Prepared.

What do you think when you see a young woman carrying a condom?

Very prepared. (laughs). No, actually, desperate.

How do you think young men can prevent the spread of HIV and AIDS?

To keep their uh uhms in their pants. And actually, to just stick to one sexual partner. Stop being players.

How do you think young women can prevent the spread of HIV and AIDS?

Abstain. And close their legs.

Do you believe it is possible for you to contract HIV?

Yes. No. Yes. HIV can be spread through a lot of ways like needles, being injected with needles when they are out in a club or something.

Do you believe it is possible for other young people to contract HIV?

Yes.

Why?

Because they don't use protection and they always mess around with people they barely even know. Okay. That's one. And they always use- continuous use of needles like for drug use. Same needle used for everyone.

In your opinion, are men or women the people who are most likely to spread HIV and AIDS?

Men. I think it will be men. (laughs).

Seriously. Why?

Because guys are more sexually active. They are more known to be sexually active with other people or many partners. Even though there are female prostitutes, but the guys give the female prostitutes the disease.

What do you think are some of the main reasons why young people have sexual intercourse?

Peer pressure. I think also, parents that tell their teenagers "abstain from sex". They don't want them to go and have sex and learn from their own experiences, and learn from their own mistakes. That like- aggravates (encourages) them to have sex.

Do you think that HIV is a growing problem among young people?

Yes.

Why?

Because nobody uses protection. Everybody just jumps into bed to want to get their (inaudible) on.

What are your views about using condoms during sexual intercourse?

It's very uncomfortable, but it has to be used. Unless, of course, if you are married and you trust the person. Then that is a different thing.

Would you be embarrassed to ask for advice about contraception or sexually transmitted diseases?

No.

How do you feel about the attention you receive?

Charming. From boys. Charming, at times, but then boys can also be annoying. And, it's the way they approach the person and talk to them. That depend on (determines) our reaction.

Do you engage in sexual intercourse?

Is that a trick question?

No.

Yes. Yes.

Why?

Because it feels good and in a way it gets you closer to your partner. Exactly. (laughs)/

What is your idea of a good time?

Okay. My idea of a good time- going out for supper. Spending time with my boyfriend. Going to a club. Dancing in a nice way. I love dancing. Just chilling with your friends. And if you are referring to sexual intercourse it's like (inaudible). Foreplay first. Oral sex first- before you get into sexual intercourse. And the person has to make you feel loved.

Thank you so much for this interview. I promise you that this interview will remain confidential.

Appendix G

Zuma: Journal

22/04/04

Today I acknowledged (saw) that parents can learn a thing or two about life from their children. How they communicate with one another (their relationship) and also how they think about their surroundings. I'm talking in terms of both the child and the parent. Sometimes parents have big problems that seem to have no solutions but if the parent has a good relationship with the child, the child will probably have a solution to help the parent (i.e. if they are bonded in peace. Like parent, like child).

23/04/04

There is nothing much to say, except that it is Friday, and I know that most boys from KwaMashu, Umlazi and other places are going to the workshop in Durban to try and get as many girlfriends as they can. This usually happens on Friday, no other day except Friday. Some, or most children, are also going to big parties or clubs to get drunk and party till the sun rises again at dawn. That's all I have to say about this day.

24/04/04

It's a quiet Saturday, but it was enjoyable for me. There are people who just found out they are HIV (positive). I feel terrible for them. Did you know that the number of people dying of HIV/AIDS has increased doubled. In 2002, 300 people died a day of HIV/AIDS. A few days ago I found out that more than 600 people are now dying each and every day because of this virus. Unbelievable! I think that by the year 2006, it will be 900 a day. Just imagine that! I hope I'm not one of these people in the future.

25/04/04

Sometimes I wonder if I'm human, or should I say, Am I seen as human to my friends? Because sometimes you have to be in the go to be in the flow. That is not always easy, or you don't always want to be in the go (you know, force things to happen just because your friends are doing it). To myself, I think I am human, no matter what anyone says. I am myself.

26/04/04

Life as a teenager can be so daunting, because you have to be perfect to everyone and everything, that is, if you want to be praised by everyone. That is not what I want to say for today. I just want to say...

A few days ago (I just remembered) my friend told me last week he had the best sex he has ever had. The girl he was with stayed from 6pm to 10pm and the whole time, they were having sex. He told me she did everything there was to do (even oral sex) for him. I was so amazed and shocked to think this girl is not even 18 years old and already she was more experienced than her age. That is what my friend said, and I thought : "What worries me is whether he used a condom or not". Only he, that girl, and their hearts know.

PS. The friend happens to be my best friend.

27/04/04

It is Freedom Day and I hope everyone had a happy day. It is good that we now have freedom all over our country and hopefully, it will last forever. Now I just wish we could have freedom from AIDS and never look back again, only forward at the bright future of peace and harmony.

28/04/04

A good evening to my journal. Today was a day just like a new day. I think sometimes it's weird, when you were small, 5 to 6 years ago, you used to wish you were 15 or 16 years. You thought it was cool and exciting (just because you never knew the negative side of it). Now that you are 16 years, you wish to be 5 years old again. That is what happens to many people in this world, especially after having a good lesson of reality. I sometimes wish I was 6 years old again (not that I regret growing up). Back in that time, I was not at risk of getting HIV/AIDS as much as I am today.

29/04/04

Time flies when you are living, especially if you are a teenager. I mean I was planning to study most of my subjects at home (to improve on knowledge) and that was at about 6 pm. After doing what I was supposed to do in the house, I try to go and study and then I check the time and I see it's already 9 o'clock, and that just sucks. At least I can get another chance. For a person who has AIDS, time flies 10X faster and there is no chance of another time.

30/04/04

Well, it's the end of the month. Time to go cash your cheque if you are an employee, time to go to church if you are an apostle (actually, time to get cleansed), time to go party and score someone if you are a bored teenager. If you are going to do some of the things mentioned above or not, I hope you have a good time. And even if you are not going to do anything this Friday, please pray that you are alive and ain't one of the thousands of people who are going to be infected with HIV this end of month.

01/05/04

It's a new month. To some, it's good and to others, it's bad. But to people who are in this world, both mentally and physically, life goes on and each month is appreciated as it should be because there will not be another April or May of 2004. I wish people can realise that and accept it.

02/05/04

We must express our feelings. Expression is a way of life.

03/05/04

Hope, for the future is in our hands. If we don't stop the killing of the large number of people dying every day then nobody will. I beg of the world to unite together and force

AIDS to flee from our planet, or else there might be a big chance of no future generations.

04/05/04

I won't lie. It hurts me to see someone who's like a mentor to me suffer from a ruthless killer. But there is nothing I can do because I hardly see the person. Maybe, if I got the chance to talk to him, I would help him face his fears (hopefully).

05/05/04

There has been a lot of joy today for many people I saw. I hope it lasts forever. And I can ask. Don't you dislike it when people pretend for absolutely no reason just to have an image which appeals to everyone?

06/05/04

It's a typical day but at least I will wake up and it will be a new day for me.

*

07/05/04

I sometimes wonder why people have mood swings. It is very strange. I would not like to have mood swings, or AIDS, for that matter.

08/05/04

Teenagers of today can be stressed so easily, because they bring it upon themselves. You must realise that I'm also a teen of this generation. I have no idea how the teens of past generations were.

*

09/05/04

The queen of pop died today, of all days, and it was Mother's Day. I feel the pain her son must be going through. But he should not cry because hopefully, wherever she goes, she will be in peace. But there will be so many fans who will mourn for her and there will be those who will say "Brenda who?". It kind of makes you realise that life really does go on, and it should.

10/05/04

A big challenge landed on my doorstep today. The project leader said we have to take photos that relate to what we think sexuality is. Now I am wondering whether my pictures will relate to what I think, or whether I will get correct ones. But that doesn't worry me a lot, because I know I can do this, even though it will be the first time I get to use a camera. (To me, it's like "Wow!").

11/05/04

War is so unfair. People have to die for their country as if it's some kind of honour and some people get injured so bad that even their mind is blocked out with bad memories. Yet the war continues. But in terms of HIV/AIDS, you do not have to die for your country or protect anyone. So then why do people still go to war with AIDS? Instead, they should leave it alone and stop attracting it.

12/05/04

Today it is my father's birthday. I wish I could buy him his dream car, which is a Volvo or a Toyota double cab. What makes me happiest is that he's still alive and breathing to see his birthday and live it. The question is "Will I, being (a part of) the generation today, be able to live to an age that is above 40 or even 30 years because AIDS is destroying our nation and it is decreasing age (people's lifespans).

13/05/04

Slowly but surely, June exams are coming. Hopefully, I will accomplish them and pass superbly. It will be hard but I must make sure I study. The fact is, HIV is still killing people.

14/05/04

I respect and honour the character Bassanio, created by Shakespeare, because he defines the theme of Appearance versus Reality. All that seems gold and ornamental outside, is purely wicked and dirty inside. This is the world we live in, where looks are deceiving and real good is hidden behind the so-called weary and ugly. Respect, Peace and Love.

15/05/04

I am supposed to be going on a trip tomorrow the whole day but I have no money and therefore I am not going. I dearly wanted and needed to go. You know this happens to many people around the world, because they do not have money. Some people can't even feed themselves. To me, I believe that is more painful. I know one day I'll have enough money to do whatever I want and I will be healthy and wealthy. If I am not killed by infections or other reasons.

16/05/04

What people do to get attention sometimes amazes me because what is the point of receiving when you are not transmitting (giving) attention to others or the purity of a good heart? Ask yourself "Is there a fall after the pride?".

*

17/05/04

Hello! What a fast day this was! I felt like I travelled (forward) in time or something. I have one wish on this planet Earth. I wish I could go to a time where there was no HIV/AIDS because it's sickening just listening about the number of people who are dying from it.

18/05/04

Hello! It happened to me again. I felt like I was a day ahead of everyone (like it's a Wednesday). Maybe something is going to happen on Wednesday or maybe not. It was show and tell in Afrikaans and boy, was I nervous! Thank God we were not being filmed otherwise people were going to pay just to watch all the wannabe Afrikaaner chefs! Well, that's it for today. Peace.

19/05/04

I wonder how different the world would be if girls could do what the boys can do. I mean, everything, we boys can do, but then again, I do not wish to know because it will be very strange to see something like that.

*

20.05/04

Today is Ascension Day, the day Jesus Christ rose and ascended to heaven, but why should earthlings celebrate this, I ask. Shouldn't they be finding or trying to find a way in which they can ascend to heaven one day just like Jesus did? I don't mean to intimidate but it just amazes me when people ignore the truth that you try to tell them. This is all so weird. Peace.

21/05/04

Ah, yes! The famous Friday. People are going to party and spend as much money as they want but they've forgotten about their families. Who will pay the electricity bill? The wife who does not have a job and has 3 to 6 children asks herself while the husband is out and about with young girls who want him for his money, and not his silly charms or the brains he thinks he has. That's the way the world spins these days. It's very unfair.

22/05/04

I am so disappointed (with) myself because I forgot it was my mother's birthday. In the morning, I wondered why she was so moody and then she threw a tantrum at me, letting me know it was her birthday, and that my father also forgot. I tell you, that nearly killed me. My mom always remembers our birthdays (my father's and mine), but I forgot. I wonder if that says anything about how women in this world are treated? But I apologised and gave her a big huggy bear hug because I really was suppose to say happy birthday to my mom. Peace.

23/05/04

I wonder why women say "It's a man's world". I hope to get a sophisticated woman who can tell me why. Because these days, we get women doing (the) jobs our great forefathers used to do and many women these days are breadwinners of their households, instead of men. This does not mean I am saying that women rule the world, although in the Hindu culture, there is a male God who gets His power from a female God. Very interesting.

24/05/04

One of my teachers said that the man and the woman can never trust one another to the maximum. "Why is this (so)?" I asked. She said it is because even if the couple is married, they can't keep track of one another when they are not in contact. Because one day the husband (although married) can meet the Kylie Minogue lookalike in a deserted place. She offers him a taste of herself. He will not resist temptation. The same can apply

to a woman if she meets a hunky man. But then does this mean males and females should just get babies and stay single, instead of getting married? I don't know.

25/05/04

Does true love still exist? Chances are most people will say no because nowadays, so many people are divorcing, one can actually think it is a trend. The reason I say this is because hip hop artist Snoopy-dog has divorced his wife after seven years of marriage (unbelievable!). He says the reason is because they have (irreconcilable) differences. I think they shouldn't have bothered in the first place if it took them 7 years to see that. But I think (I don't know) that there is true love in this world because Kirk Douglas just renewed his vows with his wife after 50 years (yes, you heard and read right), 50 years of marriage. Now that's what I call true love on the planet Earth. Wow!

26/05/04

The myth that women are from Venus and men are from Mars might be true. Because, if you notice the way people are divorcing from marriages, the main cause of breakage will be because of their differences. That is why bachelors are on the increase. They cannot stand the ways of women. They want to find out what women want but they can't see it. I hope I find a woman who will love and understand me for who I am. I must do the same for her. (we will) learn the vital values of true love and life together.

27/05/04

It's shocking what some species (individuals) do to impress others. For example, if a female likes a male and the male does not like her, she will do everything in her power to lure him. (the same applies vice versa). Why can't people be honest with one another because sometimes the male will lie to the female and have her as his play toy, not his lover. But that's life. We just have to accept it.

28/05/04

Year 3000. Peace on Earth. No pollution. No wars. No violence. No HIV/AIDS or bad infections. Just peace on Earth. Only in our dreams will this happen, or maybe the world will have to end to in order stop this chaos on planet Earth. The way things are happening rapidly, I actually think the end is coming nearer and closer. Peace to the world.

29/05/04

I do not feel like writing today.

30/05/04

"A woman scorned is dangerous", say some people. Well, if this is true, I wonder how dangerous a man will be if he is scorned or does it only apply to the female? I wonder.

31/05/04

The end of the month. The time for married couples to calculate their money for the next month. If something goes wrong, there is always the other to blame, even if it's a mistake.

Couples must stop assuming things about a person that aren't there. Honesty is the (best) policy.

08/06/04

It's winter and I'm sure many unmarried men and women will be using each other as blankets, but the problem is with the youth. The boys exchange girls and change girls like they are metal tazos or trading cards. Even though they know the risk of AIDS and they try to use condoms, but I wonder how long will or can they resist temptation. Because there are those who say "what the heck". They might as well enjoy life while it lasts. No wonder HIV/AIDS is spreading so fast among the youth.

09/06/04

Women say men rule the world. They are right.. Women say they want to rule the world. If they wanted to they could because there are more women in the world.

10/06/04

I received the camera to take photos about "sexuality". I hope I get pictures worth looking at. Teenagers are very weird.

11/06/04

Some people say it's money that makes your sex life. Some people say it is the physical aspect that makes up true love. If this is the case for us youth, then why don't we marry each other and stop the spread of AIDS? Many teens speak as if they are adults, and also act like adults. I wonder what goes through these teenagers' (minds).

12/06/04

men and women are of the same species. The difference is that women think they are smarter, just because they grow faster than men.

13/06/04

People can live together for years as lovers and have sex and even babies but fail when it comes to commitment (to marriage). One of the two or both refuse because they have been drugged with lust. They will fail to try (to commit to marriage), especially the man, and this causes dying alone at old age. Women at least try (to commit to marriage). But not all men are failures. There are those who challenge themselves and get the love of their lives. People, especially teens, must remember all good things come with patience and GOD. We must not jump the gun.

14/06/04

There is a teenage girl and her boyfriend that I wanted for my picture for the AIDS project. I asked the couple for their permission. The man did not have a problem but the teenage woman did. Later in the day, when I saw the teenage woman walking in the street, I approached her and asked for the second time why she did not want me to take a photo of her and her man. She replied it's because she did not want a photo of her and the boyfriend she was with. She wanted to take a picture with another of her boyfriends because the boyfriend she was with is dull and they (their relationship) will not last. She

is just using him because he works at Toyota. I could not believe my ears because I never thought that this girl was a "user". I know her as a quiet and respectable person. It just shows what school girls today are capable of.

15/06/04

life is not a joke. People must take it seriously, because there is a boy who killed himself because his girlfriend said she had AIDS. This, later on, was found to be a lie. The girl was just joking. I feel sorry for him.

10/06/04

My seven year old brother asked me who I was going to marry. I was shocked and amazed that a seven year old would ask such a thing.

11/06/05

I wonder if the problem of men insulting women would stop. Because everything the woman does, especially if it is not domestic, like driving a car, she is regarded as either useless or not strong enough. Men can't expect women to be perfect, like robots. What I mean is that men should stop criticising women for not being perfect because men are not perfect themselves.

12/06/04

young couples, around where I live, like to stand and cuddle up on the streets at night. This feels awkward to other people and they ask themselves why the couple do not go into the house because it is winter. But I understand why they do this. Because you live life as a teen and not earn your own money. No parent would allow you to do such things in their house.

13/06/05

teens who go clubbing are so addicted to it. I had a friend who was a clubber. He liked it so much and got himself into drinking a lot of alcohol. He went clubbing so much that he is addicted to alcohol and smoking. And to think that it all started out as something that is fun. Nowadays, I wonder if he is okay, because I no more school with him. The bad thing about clubbing is that it can put you into a lot of trouble with other people.

14/06/04

I was amazed the first time I heard that a woman grows 4 times faster than a man. That is when I realised why men like to marry women that are younger than them. But that does not explain why King Mswati III marries such younger women than him. It is disgusting to see a young woman still at school marrying men who can be their fathers. But I do not blame the women. It's the man, King Mswati III, who must stop this sickness from continuing. I understand it's his culture but what he is doing is unnecessary and wrong and even he knows it.

THE LATE GREAT BLACK RACE

*A full blown Black holocaust is in progress
Abundant evidence reveals that*

AIDS IS MAN MADE GERM WARFARE

*Created to destroy undesirables
(Blacks , hispanics and other people of colour , also homosexuals)*

Headlines all over the Europe carried the AIDS conspiracy story suppressed in America. You have been greatly lied to about AIDS. AIDS did not originate from the green monkeys, it was specially created by the American government to kill the people of colour around the world- especially Blacks . This is why countries with vast black populations (Africa, Haiti , Brazil etc) are heavily infected with AIDS . AIDS was developed between 1969 and 1972. The virus was first released in Africa by the W.H.O (WORLD HEALTH ORGANISATION) which is really the WORLD DEATH ORGANISATION) in 1975 with laced doses of small pox vaccine Program.

THE LONDON TIMES (05/11/87) reported that over 100 million African were infected with the AIDS -laced small pox vaccine program. According to Dr Robert Strecker ' without a cure the entire black population of African will be dead within 15 years ". Some countries are well beyond epidemic status . ' John Lear , the pilot son of Lear jet inventor, writes that Africans now almost 100 % infected . Lear also writes that the stated goal of the U.S NAVY for the AIDS virus was infection of 75% Of the world's population before 1995 (The Whole Life Times 11/91

AIDS was introduced into US in 1978 in New York, San Francisco and Los Angels with laced dosis of the Hepatitis B Vaccine distributed by the Center for Disease Control who specifically targeted white homosexual males . Lear writes . HIV -1 one form of AIDS , has been AIRBORNE in South East ~~Asia~~ (which has vast number of blacks) for a number of years

William Cooper discloses in his booking expose book Behold a Pale Horse 'Since large populations were to be decimated, the ruling elite decided to target the undesirable elements of society. Specifically targeted were the black Hispanic and homosexual populations.

In his video The Strecker Memorandum Dr Roberts Strecker refutes with documented evidence , virtually everything the government and so-called experts have told you about AIDS . He asserts that AIDS is a mammade disease, condoms will not prevent AIDS . And AIDS can be carried by mosquitoes. If you think you are safe because you are not gay or promiscuous or because you are not sexually active then you had better watch his video very carefully. He shows you how AIDS was actually predicted, requested , created and deployed. And now it threatens existence

of mankind because IT WORKS. An independent researcher/ lecturer Zear Milles has compiled the most extensive documentation tracking the AIDS virus featured on Montel Williams show (04/14/92). which addressed the AIDS conspiracy, he stated ' The reason for the AIDS virus was for the US and other Western powers to again seek to dominate and recolonize the African continent for the tremendous amount of raw materials and resources after the year 2000 (AIDS was created) for population reduction and elimination for the African continent.

You Can catch AIDS From Saliva & via Condoms & Surgeons Gloves
There is no such things as SAFE SEX. The condoms are worthless as far as the HIV-virus is concerned for the very pores in the rubber material are large enough to allow easy passage of the virus through the material. This is true for surgical rubber hand gloves as well. This fact puts surgeons, dentists etc at even greater risk than any other group of people. The virus moves (in) both directions

WHY IS THE BLACK MALE AN ENDANGERED SPECIES ?

Dr Cress Welsing writes ' The reason that the black male has been central to the issue of white supremacy...(they) represent the greatest threat to white genetic survival because only male ... can impose sexual intercourse and Black males have the greatest generic potential (of all non-white males) to white generic annihilation. Thus black males must be attacked and destroyed in a power system designed to assure white generic survival. The destruction of black males now is indirect, so that the black male victims themselves can be led to participate in and then be blamed for their Own mass deaths

The chain of events begins with the denial of full scale employment and advancement of black males so that they cannot adequately support themselves, their wives and their children. In turn large numbers of black male children grow up without their fathers guidance . This leads to frustration, depression and failure in school. Once this atmosphere is established , drugs are placed deliberately in the black community. The drugs are then used to ' street treat ' black male frustration and depression. The high prices for which the drugs are sold provide the black male population with the illusion that finally they are beginning to make some money and to share in their ' American dream '. Guns are then placed at a disposal of the same black males persons supposedly to aid them in enforcing payment for drugs sales. More important the strategy is for black male to kill and destroy one another and then carry the blame. (no black males manufacture the chemicals for drugs use, nor do any black males manufacture guns, nuclear etc)

Failing to comprehend the environmental context of the white supremacy system and its ultimate goal of the white genetic survival black people also fail to grasp the deeper sense of what actually is occurring in front of our

eyes .. that the massive death of black males constitute the genocide of black people (as it takes black males to black babies and ensure future black generations) The high rate of black male incarceration contributes in genocidal fashion to the prevention of black births and the black male supported development of all black children particularly boys. Black males must help one another to understand that they are being led by the dynamic of white supremacy to inflict extreme damage upon themselves , one another and ultimately to the black race. Black males must understand that, contrary to white to what is said , the war being conducted in urban centers is not against drugs but black males for the purpose of white genetic survival. Drugs are used simply as the means to achieve the end . That is why drugs are plentiful , while black males are dying in ever-increasing numbers.

Because of their extreme victimization under educational system and police brutality and arrest black males, and high rate of unemployment, underdevelopment, prison incarceration, school failure and drop out, alcoholism , drug use & addiction, homicide rates, increasing suicide rates And homeless and shortest life span.

Interview 2 - conducted at his house - at

This interviewee ("K") wasn't very open when we started. He gave short answers - I didn't want to press too much in case he decided to quit.

~~But I remembered the lesson I had~~
But I knew this couldn't be the case the whole interview so I ~~was~~ got less tense and sat comfortable on the couch - he did the same.

When I asked him question 8 - I nodded and smiled at his answer hoping to get him to trust me - it worked and we ended up laughing at question 10 at this time he opened up easily. It seemed "K" saw me as "old fashioned" when I talked about condoms, clearly reiterating the message that he is a "safe" man.

- I tracked down "K" to get more info about ~~sex~~ being a bedroom divorce. He said this is so because he believes you ~~can~~ get Aids only if you have sex in the bedroom. If you change location, like him then you are sure to be "Aids free". He said he made this theory up when he found out, "through self research", he added that ~~as~~ most of the Aids victims are people that have sex in the bedroom. He seemed pretty convinced and he clearly left no room for me to debate this issue.
~~He~~

This interview went pretty much smoothly even though I did feel "K" was making me feel inferior (by his "Ha ha's" and "Hahaha's")