



UNIVERSITY OF
KWAZULU-NATAL

INYUVESI
YAKWAZULU-NATALI

**‘Smoking Hot’: The Use of *Ntsu* as a Vaginal Sexual Stimulant among Women
at KwaDabeka Township (Durban, South Africa)**

by

Nokubonga Nokwanda Mazibuko

Student number: 209526985

**A dissertation submitted in fulfilment of the requirements for the degree of
Doctor of Philosophy in Anthropology**

at the University of KwaZulu-Natal (Howard College Campus)

May 2024

DECLARATION

This thesis is submitted to fulfil the requirements for the Doctor of Philosophy in Anthropology degree at the University of KwaZulu-Natal (Howard College Campus), South Africa.

I declare that this dissertation is my own work. All citations and references have been acknowledged. The dissertation has not been previously submitted for any degree or examination at this university or any other university.

Name: Nokubonga Nokwanda Mazibuko

Year: 2023



ISIFUNGO

Yethulwe ukugcwalisa izimfanelo zeziqo zobuDokotela Kwezobunjululwazi kwezeSayensi ecwaninga ngomuntu oyisilwane esiphilayo eNyuvesi yaKwaZulu-Natali (esigcemeni sase-Howard College) eNingizimu Afrika.

Ngiyefunga ngiyagomela ukuthi lona ngumsebenzi ocwaningwe yimi. Yonke imithombo yolwazi iveziwe ngokusemthethweni. Lomsebenzi awukaze ulethwe kulenyuvesi noma kwesinye isizinda semfundo ephakeme ngenhloso yokuthola iqhuzu.

Igama: Nokubonga Nokwanda Mazibuko

Unyaka: 2023



DEDICATION

This work is dedicated to every black woman whose excellence has been doubted, intelligence, insulted. The system is against us, but God is always on our side. What then shall we say to these things? If God be for us, who can be against us? (Romans 8:31 KJV).

To my late mother, Ms Zakhona Khuluse, and my late sister, Ayanda Mchunu.

Shadrack 'Babo' Mngadi and my late friend, Sphamandla "Deh" Gumede.

ACKNOWLEDGEMENTS

Glory and honour to my Lord and Saviour Jesus Christ.

Professor Maheshvari Naidu, I will forever cherish and respect you for making me realise my tenacity and resilience. Dr Balungile Zondi, *ngiyabonga Nondaba, Mancinza!* A special thanks to Dr Maropeng Mpya and Dr Darren Subramanien, who fought to ensure the success of this work. Not forgetting Prof Wilson Mpsanyana Makgahlela and Dr Gabriel Darong who became my unpaid therapists. Also, Dr Joseph Rudigi Rukema.

My aunt, Nomusa Njapha, for all the sacrifices you have made for me *babekazi nali ijazi elibomvu owalicela Ndlovukazi*. My siblings, I hope this work inspires you to believe in your dream and my son, Zukhanye, may you follow your name and be the light *mfana ka mumcool*. To my friends, *niyazazi nibaningi*. *Nginithanda utiligi into exaka usathane* and to the UKZN Teaching and Learning Office staff, which I met between 2014/15. Thank you so much for being such an amazing family to date.

The study would not have materialised without the willing participants. Thank you for allowing me into your life and sharing such sensitive information. *INkosi ithele umusa bomamazi*. I will not forget our song, *Aw'leth'idosha silibheme, alikho icala le-ntsu!*"

I acknowledge and register my appreciation of the financial assistance from the National Institute for the Humanities and Social Sciences, in collaboration with the South African Humanities Deans Association, towards this research. However, the views and opinions expressed and conclusions arrived at are those of the author and are not to be attributed to the NIHSS and SAHUDA.

ABSTRACT

This study probed the cultural influences on how women construct their femininity in society and examined sexuality through women's perceptions of their body, sex, and sexual pleasure using an African Feminist lens. The complexities of women's desire to assert an identity combined with the contestation of normative femininity, sex, gender, and power relations in a culturally saturated township community were unbundled. Hence, the study focused on the constructions of sexuality amongst young Zulu women who use *ntsu* (snuff) as a sexual vaginal stimulant at KwaDabeka, a township in Durban, KwaZulu-Natal (South Africa). Data was obtained from 18 women aged between 18-25 in various occupations. The study employed a qualitative, interpretive design.

The numerous signals arising from the women's expressions of their sexuality, encompassing their acts of resistance, cooperation, mixed feelings, and advocacy in challenging and deconstructing male heterosexual dominance through vaginal practices, were scrutinised. Findings depict how these women contended with and contested social constructions of female sexuality, often disregarding the realities of their sexual lives and experiences. In the study, sexuality was a construct simultaneously being challenged and fashioned through the vaginal enhancement practices of *ntsu* (snuff).

Key words: *Ntsu* Snuff, Vaginal practices, *Hlonipha*, African Feminism, Zulu women

TABLE OF CONTENTS

Declaration	i
Isifungo	ii
Dedication	iii
Acknowledgements	iv
Abstract	v
Table of Contents	vi
List of Figures	xi
List of Appendices	xii
Abbreviations and Acronyms	xiii
Chapter 1	1
Introduction	1
1.1 Introduction	1
1.2 Background	2
1.3 Significance of the study	6
1.4 Research problem.....	9
1.5 Research questions and objectives	10
1.5.1 Research questions	10
1.5.2 Research objectives	10
1.5 Context of the study	11
1.5.1 Socio-cultural anthropology.....	11
1.5.2 Linguistic anthropology	12
1.5.3 Medical anthropology	14

1.7	My position in the study.....	15
1.8	Dissertation structure.....	19
1.8	Conclusion.....	20
Literature Review		21
2.1	Introduction	21
2.2	Gender socialisation, sex, sexuality, and culture	21
2.2.1	Sexuality and the African woman in the context of socialisation	27
2.2.2	Intersecting concepts	29
2.3	Culture, body, and female sexuality.....	30
2.4	Patriarchy, masculinity, and control of female sexuality	32
2.5	Construction of women’s bodies.....	34
2.6	Vaginal practices	36
2.7	HIV/AIDS in the cultural context of South Africa	40
2.8	The significance of snuff in the African (Zulu) context.....	41
2.9	Conclusion	44
Chapter 3		46
Research Methodology		46
3.1	Introduction	46
3.2	Research Design.....	46
3.3	Research paradigms: Critical theory and constructivism.....	47
3.4	Research site.....	49
3.5.	Sampling and the sample.....	50
3.6	Data collection.....	53
3.6.1	Participants	56

3.7	Data analysis	58
3.8	Validity and reliability	59
3.9	Ethical considerations	60
3.10	My experience	60
3.12	Conclusion.....	63
Chapter 4		64
Zulu Women's Knowledge of Their Bodies, Sex, and Sexual Pleasure through Socialisation		64
4.1	Introduction	64
4.2	Intergenerational knowledge	64
4.2.1	Grandmothers as custodians of knowledge	65
4.3	Lack of mother-daughter communication about sexuality	70
4.4	School as a space for information	73
4.5	Peers and information sharing.....	77
4.6	Media.....	79
4.7	Initiation schools	81
4.8	Intersection between culture and religion	85
4.9	Conclusion.....	88
Chapter 5		90
Cultural Connotations and Symbolism of the Zulu Woman's Vagina		90
5.1	Introduction	90
5.2	The use of <i>hlonipha</i> language about the vagina.....	90
5.2.1	Umsamo	98
5.2.2	Imbawula.....	101

5.2.3	Iziko/istofu	102
5.2.4	Additional pertinent names for the vagina	104
5.3	Vaginal practices	106
5.3.1	Food beliefs	107
5.3.1.1	Ginger	108
5.3.1.2	Cow's meat	110
5.3.1.3	Fruit and vegetables	111
5.3.1.4	Milk and eggs.....	112
5.3.1.5	Food as a contraceptive.....	115
5.3.2	Indigenous knowledge and sexual health	116
5.4	Conclusion.....	116
Chapter 6		118
Factors Inspiring the Use of <i>Ntsu</i> as a Vaginal Sexual Stimulant		118
6.1	Introduction	118
6.2	Historical indigenous practice	118
6.2.1	Ugwayi wezalukwazi	122
6.2.2	Ugwayi wedlozi/wabaphansi.....	124
6.2.3	Snuff in healing	127
6.2.4	Snuff as a (vaginal) sexual stimulant	131
6.2.4.1	Libido and ntsu	131
6.2.4.2	Vaginal use of ntsu.....	133
6.2.4.3	Peer pressure	137
6.2.4.4	Sexual self-esteem	141
6.2.4.5	The power dynamic.....	142

6.3	Conclusion.....	144
Chapter 7		145
Conclusion		145
7.1	Introduction	145
7.2	Summary of key findings.....	146
7.2.1	Socialisation of young Zulu women	146
7.2.2	Intersection between AIKS and Christianity.....	148
7.2.3	Hlonipha language.....	148
7.2.4	Beliefs about food	149
7.2.5	Socio-cultural foundation of the use of ntsu	149
7.2.6	Ntsu as a vaginal stimulant.....	150
7.3	Theoretical considerations.....	150
7.4	Concluding remarks	152
7.5	Future research	153
7.5.1	Expanding the current study.....	153
7.5.2	Research on ntsu.....	153
7.5.3	Mother-daughter communication.....	154
7.5.4	LO programme	154
REFERENCES.....		155
PRIMARY REFERENCES		155
REFERENCE LIST.....		155
Appendices.....		220
Appendix D: Ethical Clearance Letter		226

LIST OF FIGURES

Figure 2.1: Motivations for the use of vaginal practices	39
Figure 7.1: Sexual socialisation of young Zulu women	146

LIST OF APPENDICES

Appendix A: Informed consent letter	221
Appendix B: IsiZulu informed consent letter	223
Appendix C: Interview schedule.....	225

ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Treatment
HIV	Human Immunodeficiency Virus
KZN	KwaZulu-Natal
PID	Pelvic Inflammatory Disease
SRH	Sexual and reproductive health
STI	Sexually Transmitted Infections
TB	Tuberculosis
WHO	World Health Organisation

CHAPTER 1

INTRODUCTION

1.1 Introduction

Sexuality has been a subject of anthropology for decades. Anthropologists believe that what is often considered natural is cultural, given that humans create reality. Our understanding of sexuality, sexual desire, and pleasure is shaped by how gender is socially constructed. These constructions tend to be biased towards the patriarchal agenda, thus marginalising women and reducing their sexual function only to reproductive purposes and in turn, ignoring the issue of pleasure. While we can agree that there is no distinct African sexuality, studies show that within most African societies, sex remains a taboo subject, especially for women. Young girls are encouraged to preserve themselves for marriage, where they are expected to pleasure their husbands.

Pre-marital sexual activity is condemned. However, African feminists argue that such assertions are a product of the colonialist religious system, which influenced beliefs about sex and sexuality within African cultures. Studies about sexuality maintain the importance of understanding the intersection between gender as a cultural product and its influence on perceptions of sexuality. Such understanding is important as it defines how patriarchal structures within society define the understanding of gender and sexuality, granting sexual prowess to men whilst expecting women to be passive sexual agents. Within South Africa, culture defines normative and acceptable gender behaviour within society. This includes the area of sexuality, where cultural norms place men and women in different positions, expecting them to behave in culturally accepted ways. These are often hierarchical, suppressive, and punitive towards female sexuality.

This introductory chapter provides a brief background and main ideas in literature, guiding the study's ideas and concepts. It also seeks to present a case for the relevance of a study of this nature by drawing from relevant literature and presenting the key questions the study sought to answer. The research problem, the specific contribution of the study to the body of knowledge, as well as the main objectives of the study are provided in this chapter. The latter part deals with the researcher's positionality and, at the end, provides a summary of the chapters that are presented.

The study explored young Zulu women's understanding and construction of sexuality. Using African feminism as a lens, the study examined how sexuality and sexual pleasure are culturally understood and interpreted. Drawing attention to the use of *ntsu*¹ (snuff) as a sexual stimulant amongst Zulu women at KwaDabeka² Township in South Africa as a prism, the study sought to explain the influence of cultural socialisation on women's perceptions about their vagina, sex, and sexual pleasure. It argues that whilst the influence of colonialism and the introduction of religion has reshaped African societies' views on sexuality through the reinforcement of patriarchy and removal of sex and means of sexual gratification from the public domain, rendering discussions about sex as taboo and pleasure as something that is merely reserved for men; women still create spaces to discuss their sexuality and celebrate sexual prowess.

While the use of *ntsu* as a vaginal sexual stimulant by the young Zulu women in the study can be viewed in the context of conformity to the cultural standards about women's vaginas, on the other hand, it also presents sexual prowess. It transcends cultural conformity to understanding *ntsu* use as indigenous knowledge within young Zulu women's circles. Sexual pleasure, maintaining sexual self-esteem, and preserving erotic capital are central to using *ntsu*, debunking the essentialist view of African women as sexually passive.

1.2 Background

African feminist scholar Tamale (2011, p.16) suggests that "researching human sexuality without looking at gender is like "cooking soup without pepper" and that researching sexualities without a gendered analysis renders the research flat, empty and morose. She maintains that both gender and sexuality are products of culture and society, which have a significant role in maintaining and regulating power relations within societies. She further emphasises gender as a critical analytical lens through which any data on sexuality is interpreted. This implies that gender and sexuality are intertwined and inseparable. Therefore, one cannot ignore gender when studying the social constructions around sexuality. It is important to note that sexuality is not exclusively biological but also socially constructed

¹ *Ntsu* is a brand for snuff (smokeless tobacco is traditionally sniffed), which is commonly available in townships especially at *spaza* shops. There is another brand known as *taxi*, but *ntsu* is commonly used and famous.

through legal, cultural, and religious forces that are driven by a politico-economic agenda (Tamale, 2016). This shows the importance of considering the social constructions that shape the understanding and practice of sexuality, which is the focus of the study and, therefore, renders it relevant.

Mantell, Needham, Smit, Hoffman, Cebekhulu, Adams - Skinner, Exner, Mabude, Z., Beksinska, Stein, & Milford (2009, p. 3) observe the social constructions of gender in interpreting the intersectionality of certain rights, access to resources, power, and participation in public life through a cultural lens. They maintain that gender and gender roles regulate the acceptable behaviour and how women perceive themselves and their attitudes. This regulation of what is acceptable prescribes the permissible and punishable actions within societies and have a potential possibility to confine individuals into certain gender roles that are acceptable to society. This may also influence the ways in which individuals perceive sexuality.

According to Salo (2001), gender, in all its diverse manifestations, has been part of the central organising principles for African societies in past and present. Within most African contexts, gender is defined according to societal roles and functions. Responsibilities and roles are gendered; women are responsible for homemaking and reproductive work, whilst men are expected to perform productive work (Manfre & Rubin, 2012). The connotations attached to maleness and femininity determine the opportunities one may have in life. The binary opposition between hegemonic masculinity and emphasized femininity is portrayed in how hegemonic masculinity is defined through sexual prowess, whilst emphasised femininity is associated with shyness and concealment of sexual desire. In concurrence with this, Ngubane (2010) asserts that several norms make it inappropriate for women to be knowledgeable about sex or to seek advice on sexually related matters. This is a different case for men who are allowed to seek knowledge about sexuality and have multiple sexual partners.

For long, African women have been subjected to cultural traditions described as oppressive and limiting women's advancement. In contrast, men have had highly preferential access to activities in which society accords greater values and exercise which permits power over others (Njogu & Ocharadson-Mazurui, 2006). This shows how the dictates of custom and community pervasively govern women (Salo, 2001). African feminists, however, argue that these gender biases are a product of colonisation, which imposed Western religions, marriage, and legal systems (Akin-Aina, 2011; Tamale, 2011; Mikell, 1997). Their argument is centered on the

introduction of religion. They assert that such had a major influence on the understanding of sexuality within African contexts.

The introduction of Messianic religions conveniently brought moralistic and controlling views about sex while legitimating the superiority of men over women (Ahlberg, 1994). The influence of Messianic religions on African sexualities (practices, feelings, ideas, fantasies, excitement, and aesthetics) cannot be ignored as these threatened the indigenous cultural and traditional sexual practices informed by African traditional religions (ATR). Positive conceptualisations of African sexualities, including the African female body, have been negated by Messianic religions (Tamale, 2016). African feminists assert that these religions were a product of the colonial invasion, which distorted African systems through an imposition of Western religion and education in African societies and further interpreted African traditions favouring men's control over women, putting men at an advantage at women's expense (Calhoun-Brown, 1996). Prior to colonialism, African women enjoyed respect and prestige and were conferred responsibilities from the homestead to the broader African societies. They were farmers, wives, chiefs, elders, priestesses, and mothers (Amadiume, 1997).

The colonial rule introduced changes to African cultures. This had consequences for gender roles, affecting the rights available to women. The gender paradigm was stirred. Colonial discourses about gender and sex separated men from women and reshaped the perceptions and notions around sex. As asserted by Agbaje et al. (2019), the greatest injustice of the colonial system was the negation of women's experiences. This included negating women's sexual experience and the erroneous sexualisation of men's and women's bodies as primitive. There was a shift from the inculcation of sex education to young minds through mechanisms such as songs, proverbs, and maxims to the introduction of policies regulating and controlling the gendered norms and sexual cultures of Africans.

Though pre-colonial African cultural norms were not universally egalitarian, sexuality was not a concealed subject but was conceived as dynamic and spiritual (Agbaje et al., 2019). Practices that were accepted before the introduction of Islamic and Christian religions changed since these religions described some African sexualities as deviant and illegitimate through the process of proselytisation and acculturation. This resulted in the reduction of African sexualities to a universalised and essentialised culture that became integrated into the colonialist so-called 'enlightened culture' (Tamale, 2016). This depicts how colonial influences distorted the understanding, meaning, and practice of sexuality in Africa. This is a

cause for concern given that what is now understood as African sexuality may not be an accurate, authentic representation.

The influence of the colonial introduction of Messianic religions on African sexuality is also ascertained by Delius and Glaser (2002), who wrote from a South African perspective. They argued that in the 19th century, there were differences between Christian and traditional teachings. There was sexual openness in African societies. For example, Pedi³ children were exposed to sexual practices and sexual language used by their parents, whereas Christians judged this as immoral and forbade it. As Christianity expanded in the 19th century, together with industrialised capitalism, migrant labour systems were introduced as most left their homes to find jobs in the city. Most traditionalists also converted to Christianity, emphasising Christian morality, Western education, and abstinence from sex.

Christian views obliterated traditional forms of sexual socialisation and viewed them as immoral and dangerous. Ahlberg (1994) calls for a consideration of how the Christianisation process introduced changes in the African context and shape how and what changes take place. Furthermore, Christian missions were determined to overhaul the practices of the native people by attacking African customs, which they presumed evil and had to be denounced.

Cultural norms that regulate the practice of and discussions about sex persist. In the Zulu culture, children are restricted from initiating conversations about sex. Culture significantly shapes people's perceptions about sex and SRH. The Zulu society is mostly patrilineal, with males maintaining family lineage from their fathers. Ndida et al. (2017) assert that adults do not discuss sex with children as this is considered disrespectful and outrageous, but often delegate discussions about sex to state institutions such as schools and health institutions. These conservative attitudes towards sex and the suppression of topics about pleasure are common in most black communities where conversations about sexuality are conducted in hushed tones in proverbs and are mostly reserved for adults (Munyai, Makhado, Ramathuba & Lebese, 2023; Salisu, 2023).

It is, therefore, evident that whilst gender and sexuality within most African contexts is culturally understood, it is unfortunately based on cultural understandings tainted by colonial legacy. It is however essential to note that our understanding and interpretation of sexuality

³ Pedi people are part of the South-African Bantu groups mostly found in Limpopo province.

and how we experience sexuality is heavily influenced by culture. This is further explained by Tamale (2016), who asserts that how and with whom we have sex, how we express pleasure, why, under what circumstances, and the outcomes are all forms of behaviour communicated through the institutions of culture, religion, and law. She further explains that it is through these institutions that sexuality is interpreted. Therefore, it is important to understand how cultural (and religious) norms and values are institutionalised within African sexualities.

1.3 Significance of the study

Chandra-Mouli, Neal & Moller (2021) emphasised the need to address the sexual and reproductive health (SRH) of young women in sub-Saharan Africa, given how culture prescribes rules of sexual conduct between men and women which in turn shapes knowledge, beliefs, and practices regarding sexuality. Considering the cultural ideology of sexuality is essential given how culture impacts the way in which women understand and navigate their sexuality (Achen, Atekyereza & Rwabukwali, 2021). This highlights the need to understand young women's construction of sexuality as one of the important aspects of SRH studies. Such is emphasised by Okechi (2018) who advocates for considering culture in sexual matters within the African context, where issues on sexuality are concealed, resulting in challenges to access to accurate sexual information for young women.

In most parts of the world, women's sexuality is shaped by religious beliefs, patriarchy and family traditions. Culture heavily influences how people in general perceive sexuality. It dictates what is considered as normal and abnormal (Atallah & Martin Redon, 2023). Simamane (2013) advocates for understanding how young women construct their sexuality and the intersecting factors that inform their constructions of sexuality, including culture, poverty, risk behaviour, and gender inequalities. The cultural influence on women's construction of sexuality is vital to explore, especially within the South African context, where the hegemony of masculinity is deeply entrenched (Shefer & Foster, 2001). This is emphasised by Remes et al. (2010) and Spaumer (2017), who suggest that most African cultures expect women to be submissive. This submissiveness calls for women to be silent and proper women in the context of family, marriage, and childbearing. Silence is equivalent to respect (Maathai, 2007). However, Ebila (2015) perceives such silence because of fear instilled in women.

Women's promotion of subservient behaviours grants men control over everything, including sexual intimacy and pleasure (Uwah & Wright, 2012). Baloyi (2010, p. 6) also adds that topics

on sex have remained constrained in many African contexts and reserved for bedroom talk within marriage. While sex is possible without marrying, it is perceived as sex without meaning and regulated through taboos and rules that downplay the pleasure element within the South African context, Chauke (2014) and Ndida et al. (2011). Perceived by both males and females as taboo, discussions on the subject are often concealed through euphemisms and polite language (Naidu & Mazibuko, 2016).

Sexual pleasure is projected as a male demand forcing women to participate in risky sexual activities such as dry sex (Oriel, 2005; Chauke, 2014). Uwah and Wright (2012) argue that male sexual prowess is often praised. Male sexual desire is perceived as uncontrollable; therefore, sexual activity becomes an important expression of masculinity. Such explanations of sexual pleasure portray women as powerless, desperate, and lacking sexual agency. The pertinent literature offers evidence of black men attempting to control black women's sexuality (Khumalo et al., 2020; Ratele, 2006, 2008; Noar & Morkoff, 2002; Fiaveh et al., 2014).

According to Scorgie et al. (2009), understanding vaginal practices must recognise and address the broader social contexts in which they are embedded. Leclerc-Madlala and Mazibuko-Ngidi (2018) also call for understanding the structural approaches that acknowledge and attend to social contexts in which these practices are embedded. Nyanzi (2011) also maintains that most research on sex and sexuality in African contexts is limited mainly to positivist biomedical models with little emphasis on sexual pleasure. There is limited literature focusing on the sociocultural implications of vaginal enhancements. Most studies only focus on sexual health, with research on vaginal practices amongst women within the context of diseases such as HIV and STIs (Phiri, 2024; Cham, Corr, Weaver, Eriksen & Paplova et al., 2023; Lazaraus et al., 2019; Crann et al., 2018; Mandal et al., 2014; Ekpenyong & Davis, 2013; Smit et al., 2011; Hilber et al., 2010; Gafos et al., 2010; Leclerc-Madlala, 2008; Bagnol & Mariano, 2008; Myer et al., 2004). This de-eroticises sex to an act that is devoid of meaning. Therefore, the significance of this study is justified given its contribution to knowledge on the role played by cultural socialisation in informing Zulu women's perceptions of sexuality and their attitude towards vaginal practices.

When considering female sexuality in sub-Saharan Africa, attention is mostly on danger and victimisation. This essentialist approach renders African women sexually passive. Although there have been changes, much attention is still on HIV/AIDS, sexual violence and contexts which seek to control risk-taking behaviours (Graham & Mphaphuli, 2018; Fine & McClelland,

2006). Whilst these are important, researchers also need to pay attention to the daily self-conceptions, perceptions and performances of gender as a normal aspect of life (Graham & Mphaphuli, 2018).

Tamale (2016) argues that sexuality in the African continent is constructed upon complex scriptures and pluralist articulations reinforced by capitalism and patriarchy. The ideological premises from which African religions and sexuality operate dictate a separation of the public and private spheres. She further calls for scholarly attention on law and sexuality in the lives of Africans and on how organised religion, spiritual convictions, culture and the law shape, challenge, and potentially transform the sexuality of African people. Sutherland et al. (2014) asserted that most research on sexuality in Africa bears a prevalence of Western epistemologies with often ahistorical and generalising perspectives and a focus on health and development perspective, which often neglects the important conceptual issues such as normative notions of masculinity and femininity, the racialisation of sex and the marginalisation of alternative sexualities.

Makoni and Meinhoff (2004) also encourage the production of systematic knowledge of African societies from an African perspective. This is also noted in Tamale (2005), who stresses the need to go beyond the traditional studies of African sexuality, which primarily focuses on reproduction, violence, and disease, to explore the area of desire and pleasure. Hence, we gain deeper insights into this complex subject. The study considers these concerns and contributes to the ongoing academic research on the notions of sexuality as an area of pleasure by exploring the conceptions of agency, sexual desire, and sexual power among young Zulu women as well as their understanding of love and sexuality using vaginal practices and explains the purposes and meanings attached to the use of snuff as a vaginal sexual stimulant. This is a response to the call by African feminists for research on female sexuality to go beyond just focusing on SRH but also to pay attention to erotic aspects (Marais, 2019; Bakare-Yusuf, 2013; Nyanzi, 2011; Tamale, 2011; McFaden, 2003).

This study explains young Zulu women's reliance on vaginal practices, particularly *ntsu* from a socio-cultural perspective. Several African studies have documented women's use of vaginal practices to enhance their desirability to men (Scorgie et al., 2010; Green et al., 2001; Brown et al., 1993). However, Hugo (2012) offers that there is still room to explore how agency is exerted through the body and physical interactions and how these are culturally and socially informed. The study does not seek to determine whether women should or should not use

vaginal sexual enhancements, which could include surgery, douching and washing with different substances and washing inside the vagina for several purposes stated in the literature, including hygiene and desirability to male counterparts (Alcaide et al., 2017). Instead, I sought to explain the sociocultural, interpersonal, and individual factors which motivate women to use *ntsu*/ snuff for vaginal enhancement. The study also explored women's perceptions about sex and examines whether they see the vagina as a symbol of power that can control the man or whether it is a symbol of subordination.

1.4 Research problem

Clarke (2008) explains how sexuality is defined by some behaviours and how some relationships become qualified as sexual and pays attention to the learning of such in society. This suggests that some behaviours are qualified as normative or acceptable as others are disqualified and labelled abnormal by society. For example, Chauke (2014) asserts that some African cultures expect women to submit to their husbands. Any sign of independence is viewed as abnormal or against societal cultural norms. This female subordination and compulsory submissiveness exclude women from sexual discourses.

Foucault (1998) argues that sexuality is a cultural construct, and its meaning is derived from language as discourse. Each societal institution has a discourse about sex, a way of thinking and talking about behaviours and actors involved in sexual expression (DeLamater & Hyde, 1998, p. 14). Gagnon (1990, p. 3) describes this as an instructional system about sexuality. This implies that each culture has its own language and discourses about sex and sexuality and a set of rules prescribing what is acceptable.

These discourses are prevalent in the Zulu culture, whereby gender and sexuality are described through the concept of *ukuhlonipha* (respect), divided into speech and practice. *Ukuhlonipha* is learned through socialisation. The act and practice of respect exists in the Zulu and Sotho societies (Rudwick & Shange, 2009). *Isihlonipho* is a sociolinguistic term for euphemisms as a politeness strategy (Luthuli, 2007). In the use of *isihlonipho*, “the speaker (in most cases women) regulates their choice of linguistic forms to show her sense of place” (Trudgill, 1974, p. 4). The constructions of masculinity and femininity are prescribed in terms of behaviours which are perceived as respectable and acceptable. These entrench marginality by associating images of women’s bodies with secrecy and dramatising every aspect of their lives, from birth, sexuality, menstruation, and death. This marginality is expressed through expectations,

obligations and restrictions associated with the constructions of the body (Ngubane, 2017; Ngubane, 2010; Hanretta, 1998).

In speech, *hlonipha* is portrayed using euphemisms when referring to sex, sexual activity, and the woman's body, especially the genitalia. It is also prevalent in describing the practice of having multiple sexual partners whereby men are praised as *amasoka*⁴ whereas women are demonised as *izifebe*. While the *amasoka* label encourages having multiple sexual partners, *izifebe* is derogatory. This demonstrates how the isiZulu language is gendered in terms of sexuality, deterring women from freely expressing agency and sexual liberation. These are embedded in cultural socialisation. This study delves into these issues and probes how the Zulu women from KwaDabeka township understand and define their sexuality within the context of vaginal practices, specifically, the use of *ntsu*.

1.5. Research questions and objectives

1.5.1 Research questions

The study sought to answer the following research questions:

1. What cultural socialisations do Zulu women receive about their bodies, sex, and sexual pleasure?
2. What are the cultural connotations attached to the Zulu woman's vagina?
3. What inspires Zulu women to use snuff as a vaginal sexual stimulant?

1.5.2 Research objectives

To reflect the research questions, the research objectives included the following:

1. To identify and discuss the various ways Zulu women receive socialisation about sex and sexual pleasure.
2. To identify how the use of language shapes the understanding and fashioning of the young Zulu women's genitalia.
3. To probe the perceived implications of using snuff as a vaginal stimulant.

⁴ See Hunter (2004)

1.5 Context of the study

Sex in all cultures is the subject of beliefs, customs, rules and norms. This is why anthropology of sex is faced with the difficulty of understanding what people think and say about sex as well as what they do. Beliefs about sex often influence the time and type of people that individuals have sex with. Customs include practices for evading restrictions on behaviour. This study was concerned with the socio-cultural, interpersonal and individual factors which encourage young Zulu women to use *ntsu* as a vaginal sexual stimulant. Through exploration of the intersection of gender, sexuality, culture and beliefs which motivate for the use of *ntsu*, the study overlapped between socio-cultural anthropology, linguistic anthropology and medical anthropology.

1.5.1 Socio-cultural anthropology

Socio-cultural anthropology merges social and cultural anthropology together. It is mostly concerned with racial, social and cultural contexts and how human beings adapt to their circumstances in different ways which overtime build and improve culture (Scot, 2022). Furthermore, this branch of anthropology highlights the difference between gender, sex and sexuality. Gender is defined as culturally constructed, sex as a biological make-up and sexuality/ sexual orientation as who an individual may be sexually attracted to. Additionally, it argues that gender is socially and historically constructed and therefore, an assumed, learned and performed identity (Mukhopadhyay, Blumenfield & Harper, 2017).

Issues of gender remain a matter of interest for anthropologists and often raise theoretical concerns. Brownell and Besnier (2020) asserted that an anthropology that adopts gender and sexuality as its starting point provides a different understanding of matters of general concern in the discipline. Furthermore, it contributes a subtle perspective that exposes and complicates power and inequality wherever it may be hidden given how human sexuality is culturally shaped. The concept of humans as either heterosexual or homosexual is a culturally and historically specific invention (Mukhopadhyay et al., 2020). The central theme in anthropologically informed gender studies is the relationship between sex and gender across societies and cultures. Therefore, understanding of gender requires attention to the cultural definitions of personal and social value (Brownell & Besnier, 2020).

The study probed how Zulu women's sexuality is culturally shaped and regulated. It also explained how these women experience gender and sexuality through the prism of the culture

in which they have been raised and exposed. It highlighted how Zulu women's sexuality tends to be suppressed in the post-colonial culture and discussed the various ways Zulu women receive socialisation about sex and sexual pleasure. The intersecting patterns in culture, gender, religion, and sexuality as well as the learned and shared behaviours and beliefs on sexuality were explored. The different social institutions that influence sexual socialization were studied. These included the education/ school system, religion, family and the media. This linked the study to socio-cultural anthropology.

1.5.2 Linguistic anthropology

Language becomes unconsciously embedded in people's brains. It is an action that constitutes gendered realities. Similar principle applies to gender and sexuality. People learn about categories of gender from culture. Every society has a gender ideology/ cultural model of gender (Mukhopadhyay et al., 2020). Language is an important source through which humans talk, write about and interpret the world. It provides labels through which individuals and groups can invoke identities. It is also an indispensable means through which humans make sense of erotic activities.

Linguistic anthropology is concerned with language as a form of social interaction. It regards language as one of the ways in which people create and sustain cultural beliefs, relationships and identities. It is an interdisciplinary field which is dedicated to language as a cultural resource and speaking as a cultural practice. Additionally, it is a cognitive and social achievement that provides intellectual tools for thinking and acting in the world. Feminist sociolinguistics and linguistic anthropologists have examined hyper correlation, standard vernacular language and theories about language and the construction of social identity (McElhinny, 2014).

This study could not ignore the intersection between culture, gender, beliefs about gender and language given how 'speech necessitate the body as well as the manner in which discourses about the body shape the ideologies of gender, sexuality, morality, race, language and the understanding of what counts as a legitimate, culturally intelligible body' (Pinto, 2012 p. 105). It was therefore essential to delve into how language shapes the ways in which young Zulu women understand, perceive and treat their bodies. This is an essential contribution to linguistic anthropology from the Global South perspective. This contribution is motivated by the observation from Hall, Borba and Hiramoto (2021) observed how linguistic anthropological

work tends to rely on a singular axis of scholarly interpretation whereby academics from the Global North write about non-western contexts. They further call for research by scholars in the Global South to the linguistical anthropological investigation of language, gender and sexuality. This is noted in the assertions below:

“The challenge for language and gender scholars involves the envisaging of Southern epistemologies as a vantage point from which to vent fresh air into early disciplined understandings of social life” (p. 14).

“Moving Southwards is the way forward for the future of language and gender. This is a distinctly feminist turn, requiring heightened attention to geopolitical walls that stop knowledge from crossing the border” (p. 15)

The study probed and interpreted the cultural connotations attached to the young Zulu woman’s vagina and how the use of language influences the understanding and fashioning of the young Zulu women’s genitalia. This is an important contribution to linguistic anthropology since it describes how the sociolinguistics around women’s sexuality reinforce gendered behaviour and beliefs around sexuality. The study offers a nuanced and locally sensitive understanding of the intersection between language, gender and sexuality in the everyday lives of the participants. It also depicts how sexual meanings are created and communicated. Furthermore, the study presents the ways in which sexuality and sexual identity is presented through discourse.

Atanga et al. (2012, p. 4) suggests that language and gender scholars have faintly considered respect for the elderly, the importance of religion, family networks, stark gaps between rich and poor and juxtapositions between the traditional and modern. This study expands these considerations by looking at how women use language as an instrument to define their sexuality. Contrary to the observation by Atanga et al., whilst the participants in this study use respectful language, it is not essentially for the respect of elders. Instead, non-direct language such as euphemisms and metaphors are used to construct meaning and reference to sex and genitalia using polite words. This in turn allows a sexual discourse which hides the actual meaning of the words used by participants thus making it difficult for someone outside of their circle to understand. Symbolic and significant cultural meanings are encoded in their choice of language and understanding of such requires the decoding for actual meanings. This use of language was somehow liberating to the study participants. However, the use of language is also highlighted in how sexually assertive women are labelled in derogatory terms whilst men are praised for their sexual prowess.

1.5.3 Medical anthropology

Medical anthropology studies human behaviour and biology in relation to changing place and time. It investigates health and healing as a context specific, bio-psycho-social phenomena and views medical practices as part of culture (Wentzell & Labuski, 2020). It is a more recent branch of anthropology which emerged in the 1960s. It draws upon social, cultural, biological and linguistic anthropology to better understand the factors which influence health and wellbeing. Medical anthropologists seek to understand the factors which influence the different ways in which people take care of themselves. This involves treating everyday health concerns at home and in the communities (Hardon, Pell, Taqueban, Narasmhan, 2019).

Female sexual hygiene and beliefs about sexual health in general has been a field of interest for medical anthropologists. Hardon et al. (2019) note the existence of a sizeable traditional and modern sanitation industry that caters for women's hygiene needs. This includes homemade concoctions as well as herbal and synthetic vaginal washes. The popularity of these vaginal washes for health and pleasure remains an area of interest in medical anthropology. They reveal the pluralistic approaches that women apply to their sexual health. Medical anthropologists studying sexual medicine seek to demonstrate and interpret the various beliefs and behaviours regarding how people manage their bodies in relation to their sexual desires (Wentzell & Labuski, 2020).

Addressing the factors which inspire young Zulu women to use snuff as a vaginal sexual stimulant showed the dominant beliefs that participants associate with snuff. It became prevalent that snuff has been used by generations of Zulu people for different reasons and has been an important part of ethnomedicine. Apart from being used as an aphrodisiac, snuff is believed to heal several illnesses including headaches, toothaches and illnesses caused by witchcraft. Another important aspect of the use of snuff is divination/ communication with the ancestors. This positions snuff as an important part of indigenous knowledge and indigenous healing methods. Other traditional knowledge about women's sexuality was shared including beliefs about the type of diet which young women should follow in order to increase/ decrease their sexual desire. It is evident that sexuality is believed to be closely linked to the health of females and therefore pluralistic methods are applied to maintain good sexual health. The study interprets the use of snuff as a culturally and socially informed experience. This shows the impact of the existing concepts and constructions of gender and sexuality in informing health

and healthcare. This is important for medical anthropology as it explains how participants in this study acquire, maintain, practice and disseminate knowledge about health.

1.7 My position in the study

It is essential to declare my position concerning the study's research process. As Tiefer (1995) affirms, persons are constructors of knowledge in their own life experiences and through the prevalent discourses in their societies. As I explore sexual knowledge, socialisation, issues of agency and Zulu women's perceptions about sex and the use of vaginal sexual enhancement products, focusing specifically on the use of snuff, I position myself as a black, African (Zulu) (born again) Christian feminist in my early thirties writing in a post-colonial context. I am from a working-class background and in a similar age category to the participants in the study.

I use African feminism(s) as an epistemic standpoint. I identify with the Charter of Feminist Principles for African Feminists (2006), written by women in Accra, Ghana, at the African Feminist Forum.

As feminists from Africa, we claim the right and the space to be Feminist and African. We recognise that we do not have a homogenous identity as feminists – we acknowledge and celebrate our diversities and our shared commitment to a transformative agenda for African societies and African women. This is what gives us our common feminist identity. Our current struggles as African feminists are inextricably linked to our past as a continent with diverse pre-colonial contexts, slavery, colonisation, liberation struggles, neo-colonialism, globalisation, etc. Modern African states were built off the backs of African feminists who fought alongside men for the continent's liberation. Charter of Feminist Principles for African Feminists, (2006, p. 5)

Thus, inherent in the above statement is the recognition of different identities of African feminists, suggesting that African women are not of a homogenous identity. I recognise the different intersectionality contributing to women's subordination. Masuku (2005) argues that employing the phrase "black feminism" serves to challenge the underlying racism associated with the portrayal of feminism as an exclusively white ideology and political movement. She further argues that inserting the adjective "black" challenges the assumed whiteness of feminism and disrupts the false universal of this term for both black and white women. From this explanation, I argue that African feminism debunks the notion of feminism as a Western phenomenon. It encourages paying attention to the realities of African women from an African perspective.

In using African feminism, I accept certain arguments presented in Western feminism. However, I only draw from their arguments from my African perspective. I consider Akin-Aina's (2011, pp. 66-67) argument that "African feminism posits itself as counter-canonical to certain tendencies of mainstream Western feminism". I also acknowledge the context of "African women's presence in international feminisms" (Amadiume, 2001, 47). I explore the converging perspectives between African feminism and black feminism to strengthen my arguments. In doing this, I draw from the black American feminist scholarship whilst integrating it with African feminist arguments, given that both recognise the impact of systematic oppression in gender divisions. Whilst I assert that concerns specific to African women cannot be adequately theorised with Western feminism, I recognise the relevance of Kimberle Crenshaw's (1989) theory of intersectionality, which calls for a recognition of the intersecting experiences of black women to understand the extent of subordinated. These include gender, race, sexuality, disability, religion, occupation, and class.

Intersectionality is a critical tool in feminist theory as it encourages interrelational thinking and facilitates a matrix orientation "wherein identities are treated as interlaced and systems of oppression as enmeshed and mutually reinforcing" (May, 2015, p. 53). These are also highlighted by Patricia Hill-Collins (2000) in her argument on black feminism, where she portrays how the matrix of social identities of women transects with patriarchal institutions at multiple levels. These are essential in understanding the multiple factors which cause women's oppression. Black feminists also note the "politics of silence" and the "politics of respectability" that black women adopt to shield themselves from cultural scrutiny (Patricia Hill-Collins, 2000).

The work of Crenshaw (1989) and Hill Collins (2000, 2002) provides context for recognising different histories and experiences of women, which African feminists' interpretations have also asserted. The study focuses on black women from the Zulu clan, and the nuances of black feminist arguments are implicated and relevant. However, their geographical location and experience of being African caters to the need to employ an African perspective that relates to their African experience. I embrace African feminism due to dissatisfaction with some Western feminist ideologies which recreate knowledge in distance geographies in their own image (Fennell & Arnot, 2008). Although these are essential in analysing and interpreting the experiences of black women, they fail to recognise the differing historical context in African settings, an issue emphasised in African feminism. They also focus on blackness, leaving out

the ideologies/experiences of Africanness relevant to the study's participants. African feminism highlights the concrete realities of women's lives in African societies.

Although African feminism has been described as complex, given the argument that it does not encapsulate every African woman's need, it bears strategic historical, political, and theoretical relevance for analysing women's sexuality and sexual health. This is visible in how African feminists have constantly called for a reframed thinking, discussion, research, and construction of contemporary sexuality. They challenge colonial constructs by encouraging alternative ways of thinking about and researching African sexualities and the inclusion of sexual pleasure as a liberating and powerful force for women. African feminists also challenge the cultural silences which deny women the space to freely engage in conversations about sex and sexual needs and pleasure (Marais, 2019; Nyanzi, 2011; Tamale, 2011; McFaden, 2003).

Colonial representations of the native sexualities depicted the carnal desires of the colonised as devious, excessive, and underdeveloped (Meiu, 2015). Before the Eurasian contact with Africa, issues of human sexuality were well recognised as individual rights are subject to a group's norms and values (Okechi, 2018). Within the Zulu pre-colonial contexts, penetrative pre-marital sex was discouraged. However, there were prescribed non-penetrative sexual measures which allowed young people sexual gratification. The society was open about sexuality and sexual matters. There were also occasions when discourses about sex and sexuality were held, especially during ritual ceremonies relating to *ukukhula* (the beginning of puberty), where sex talks were openly addressed through educational talks, songs, dances and offering advice. These disappeared with colonisation and Christianisation (Buthelezi, 2006). This historical legacy of colonial sexual politics continues to shape the post-colonial realities and has been part of the central issues in African feminist debates.

African feminists emphasise the recognition of the continent's colonial past and the struggles under neo-colonialism, neoliberalism, and globalisation (Gatwiri & McLaren, 2016, p. 265). The effects of the introduction of Western religions, especially Christianity, introduced monogamy, thus resulting in the 'subjugation, obedience and domesticity redefined roles for African women' (Mikel, 1997) as well as the effects of the introduction of capitalism on the transformation of gender roles which strengthened pre-existing patriarchal gender relations. It further calls for recognising that women are socialised differently globally, influenced by historical variations, worldviews, and social organisation (Akin-Aina, 2011).

The focus by African feminists on the continent's colonial history contributes to the understanding of how Western religion, especially Christianity, demonised women's sexual pleasure as sin, thus promoting purity and chastity whilst enabling male control over female sexuality normalised through discourse and practice (Marais, 2019). African feminism challenges us to "reframe the way we think, research and construct contemporary African sexuality" (Marais, 2019, p. 88) and shift from only focusing on risk, disease, and pregnancy prevention to curbing sexual perversions and excesses. Instead, we should move towards embracing women's sexual desire and the erotic and consider emotions, intimacy and commitment whilst questioning the power relations and relationship negotiation. Exploring sexual fantasies, sexual exploitation, and expression should also be considered. Trust, belonging, identity, pleasure, resistance, abuse, masculine entitlement, feminine propriety, respectability, spirituality, custom, and ritual should also be considered in studies about sexuality (Nyanzi, 2011, p. 48).

African feminism challenges the representation of female bodies as docile (Naidu & Ngqila, 2013) as well as the repression of black female bodies through cultural tropes and calls for the recognition of the connection between power and pleasure whilst condemning the systematic oppression of women's sexual and erotic inclinations (McFaden, 2016, 2003). Using African feminism facilitated understanding how patriarchal paradigms position men as active and dominant whilst women are expected to be submissive and passive to sex. The denial, suppression, surveillance judgement, regulation, and control of women's bodies by patriarchal structures are presented and problematised through this lens.

Considering the similarities I had with the study participants, I ensured to remain conscious and avoid self-indulgence. This was achieved through constantly reflecting on myself as a researcher and taking a step back to critically consider my role in the research process and allow participants to be the main knowledge producers. Being the same as research participants helped me ask more meaningful and insightful knowledge. As much as I spoke the same language as the participants (isiZulu), there were significant differences in the way in which they used some words colloquially or through metaphors. I had to acquaint myself with their vocabulary as a way of ensuring that meaning is not lost in translation. I also had to ensure that

I document, analyse and discuss the participants' lived experiences exactly as they shared them.⁵

1.8 Dissertation structure

Chapter 1 provides a brief introduction to the study, the study background and its significance. It further outlines the key questions that will be addressed and the study's main objectives and presents my theoretical standpoint. The thesis structure is also explained.

Chapter 2 presents an in-depth exploration of the literature consulted for the study. It focuses on the sociocultural construction of gender and sexuality and explores how they shape women's understanding of sexuality. It looks at theories that analyse how gender is perceived and enacted in a way that influences sexuality. The influence of religion is also probed in terms of its influence on women's sexuality as well as the various vaginal practices that women undertake to enhance their sexuality.

Chapter 3 outlines the research design and methods employed in the study, ethical considerations, and the researcher's experience during fieldwork.

Chapter 4 addresses the first research question by exploring the cultural socialisation that Zulu women receive about their bodies, sex, and sexual pleasure. I argue that whilst there are visible signs of breaking away from the socialisation received from institutions, including peers, the home, the school, the media, and initiation schools, cultural norms continue to influence participants' perceptions of sexuality unconsciously.

Chapter 5 addresses the second research question exploring the cultural connotations and symbolism of a Zulu woman's vagina and the factors influencing these perspectives. The chapter explores how participants employ euphemisms and metaphors when discussing the vagina, creating a space where they can openly converse about sexual topics in a language uniquely comprehensible to them. This linguistic approach also shapes their views on what constitutes an ideal vaginal state.

⁵ This is further explained in the methodology chapter.

Chapter 6 addresses the third research question. It explores the factors which inspire young Zulu women to use *ntsu* as a vaginal sexual stimulant and the perceived implications of this. It locates *ntsu* as an indigenous practice that has always been integral to Zulu healing traditions and spirituality. It has now become a powerful tool for Zulu women's sexuality.

Chapter 7 concludes the dissertation by summarising the research findings, giving a theoretical appraisal, presenting concluding thoughts and providing recommendations for future studies.

1.8 Conclusion

This chapter introduced the study by presenting a background on the key ideas and concepts adopted from the literature to guide the study. The chapter presented African feminist arguments about gender, sexuality, and culture. The key questions and objectives that the study sought to explore were also outlined. The chapter also provided a brief note on the significance of the study and its important contribution to the body of knowledge on the continuing research on culture, sexuality, and SRH. The researcher's African feminist standpoint was discussed in the context of the study.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

This chapter presents an in-depth exploration of existing literature which was approached for the study. Maintaining the assertion by Tamale (2011) that discussions about sex and sexuality cannot happen in the absence of understanding gender, I begin by looking at how gender is socially constructed in a way that dictates acceptable roles and behaviours amongst male and females and influences socialisation around sexuality. I also navigate the intersecting concepts which shape African women's understanding of their sexuality. The various vaginal practices in diverse cultures are explored to contextualise the use of snuff as a sexual stimulant among Zulu women. From the exploration of various literature, it becomes evident that snuff is common in traditional healing and connecting with divine spirits within the Zulu culture. It is, however, indistinct how it came about to be used as a sexual stimulant.

2.2 Gender socialisation, sex, sexuality, and culture

In all societies, gender exists in a “systematically unequal way.” The distinction between males and females is a basic organising principle for every human culture (Babatunde & Durowaiye, 2015, p. 66; Curthoys, 2000, p. 24). Wood and Eagly (2009) maintain that their culture and life experiences shape people's perceptions of gender. Their behaviour is shaped by what they are taught. Sexuality, as culturally expressed in femininity and masculinity, continues to position people in a cultural process of meaning and functionality. Hence, gender is discursive as a cultural, not a biological phenomenon (Anderson, 2005; Geetha, 2002). It is a cultural product of a given society's adaptation to the material conditions in which it finds itself. The conception of sex relies on the rhetoric about gender. According to Eckert and McConnell-Ginet (2003), gender is rooted in our social understanding of ourselves and others.

The social construction of gender involves various processes by which the expectations of being male or female are passed through society (Anderson, 2005). The social constructionist understanding of gender focuses on categorising people as masculine or feminine (Brickell, 2006). According to the United Nations International Children's Fund (UNICEF), gender socialisation is one of the most significant issues in early childhood, which affects not only

both girls and boys but also trains or teaches people to act in a certain way based on their beliefs, values, attitudes, and examples (UNICEF, n.d.).

Hartley's (1959) seminal work on conceptions of sex roles among children identifies the four processes which are involved in a child's learning of gender identity. She suggests that the first process is manipulation, whereby people treat children differently from the time they are infants. The second process involves canalisation whereby people direct children's attention to appropriate objects. This includes buying toys whereby little boys are given war toys, cars, and machines that they can put together, whilst little girls are given dolls, tea sets and toy houses. These toys teach children about their expected or prescribed roles in society as future adults and serve to familiarise them with their future trade tools as little girls grow up to meet the expectations of being good women who take care of the children and the household whilst young boys must become hard workers and leaders of the households.

The third process is verbal appellation whereby children are informed what they are and are supposed to be. An example of this is the Zulu *indoda ayikhali* proverb (a man does not or is not supposed to cry), which encourages men to hide their emotions of pain and grief to avoid being labelled as weak (Pholela, 2011) whilst it is deemed as normal for a woman to cry and show emotions since women are viewed as soft, emotional and fragile beings (Zalta & Chambless, 2012). Kobo (2016) refers to the differences in socialisation between girls and boys in the Xhosa culture by explaining different socialisations from *eziko/eloquent* (a place where food is prepared). She argues that *eziko* functions as a pedagogical space for young girls to be taught how to speak, soft, walk, and behave in a certain manner which trains them to become proper women/mothers. This socialisation differs from the boychild taught to be masculine and portray a strong character. Similar to Zulu boys, young Xhosa boys are taught that *indoda ayikhali* as crying renders them weak beings.

The fourth process is exposure, which ensures that children are familiarised with gender-appropriate tasks. For example, in some cultures, girls are expected and encouraged to assist their mothers with housework, whilst boys are encouraged to work or play outside the home. This is visible in how children are socialised in the Zulu culture. Whereas young girls are expected to learn how to perform domestic chores such as cooking and cleaning to keep the home warm, boys are exposed to economic activities such as *ukwelusa* (herding the cows) from an early age. This teaches young women to remain in the private family sphere, whereas young men are exposed to different societal dynamics and often encouraged to be confident and

participate in decision-making. This contrasts with the young women who are socialised into believing that silence and being soft-spoken is a sign of politeness which appeals to men who might marry them and bring dignity to *ubufazi* (womanhood) (Mthiyane & Dolamo, 2019; Langa, 2012).

Bem (1981, pp.354-364) offered that the distinction between males and females is a basic organising principle for every culture. She coined the term gender schemas/gender schema theory to describe how gender is perceived through cognitive structures that guide an individual's perception. She explored how the stereotypical categorisation of people based on their appearance or behaviour defines what is typical of each sex. According to Bem's (1981) theory, children learn the contents of society's gender schema and internalise those which link to their own sex typing. The gender schema becomes a prescriptive standard/guide, and self-esteem becomes its hostage.

Social learning theory proposes that human beings can observe the behaviours of others and develop some expectancies about the outcomes of behaviour which guide their choices (Hill et al., 2009). Lobban (1975) offered that gender differences are shaped by positive reinforcement for gender-role consistent behaviour, whereas inconsistent behaviour is ignored or sometimes punished. This is consistent with Bussey and Bandura (1984), who mentioned that modelling serves as the underlying root of gender consistency and explained that gender identities are developed through imitation and identification. For example, girls are expected to acquire their characteristics of being female by imitating their mothers, whilst boys learn from imitating their fathers.

The children could also acquire their characteristics from individuals they perceive as role models. In addition, various forms of sexuality can also be learned through initiation. In a study done in northern Mozambique, Bagnol (2011) noted the key role of initiation rites in the socialisation process of individuals. She further described how they represent the ultimate step into adulthood. According to Baumeister (2001), parents and the community are not the only agents of socialisation, but the media and other sources act as models for imitation and observational learning.

The social role theory of gender postulates that individuals derive their beliefs about sexes from observing people's role performances and reflect the sexual division of labour and gender hierarchy of society (Eagly & Wood, 1999). Such beliefs constitute gender roles which foster real differences in behaviour. The gender roles reflect the society's distribution of power

whereby men are viewed as breadwinners and women as homemakers. This reflects status and power differences (Eckes & Trautner, 2000; Eagly & Wood, 1991). In most societies, women have less power and fewer resources, and a different balance of activities is associated with the typical gender roles. People adjust by performing and adapting to their social role requirements. A variety of skills are differentiated by sex, which is reflected in the families and the economic roles of people (Eagly et al., 2000).

Further, the social role theory of gender also advances that the different assignments given to people are the underlying cause for sex-differentiated social behaviour. The behaviours are mediated by social and psychological processes, which form gender roles to which each is expected to conform. Through gender roles, people create a list of characteristics that suit their typical sex roles. Women often occupy roles that require communal, domestic, or subordinate behaviours for successful role performance. Such behaviours become stereotypic of women and are incorporated into female gender roles. The connection between expectancies and behaviour is formed through socialisation processes. Socialisation about gender roles may affect the causes of action that each individual chooses in a specific setting. Although social role theorists suggest that gender roles can be flexible, women often find themselves in subordinate conditions. Gender roles often perpetrate inequality, resulting in discrimination of women and girls as well as gender-based violence.

In her book titled *Gender trouble: Feminism and the subversion of identity*, American feminist scholar and philosopher Judith Butler (1990) coins the term gender performativity to explain how gender roles elaborate social performances that one acts in everyday life. These form part of the hegemonic versions which underpin the conceptions of what constitutes being masculine and feminine. She elaborates that other people's reactions to gender performances shape gender identification. According to Butler (1990), gender identity is not expressive of any inner truth but rather a product of stylish repetition of actions as people display and act out their sexual identity. This performance includes various behaviours, including speech, walking and performing certain rituals. These are performed throughout a person's life and constitute the meaning of the masculine and feminine identities. Butler (1990) further offers that every sex is already gendered since all bodies are gendered from the beginning of their social existence. Individuals begin creating and recreating differences based on the culturally normative lines from birth.

According to Butler (1990), forced heterosexuality is at the core of the performative gender identity and masculinity and femininity are defined through heterosexual sexuality, which is usually viewed as natural, and other sexualities are often regarded as unnatural. Butler's argument demonstrates how people understand themselves as gendered or sexual beings concerning others, and this is achieved through the repetition and enactment of the activities that are seen as normal for people (also see Meyerhoff, 2014). She perceives the body as a social construction, given that discourses regarding the body, gender, biology, and nature determine what is considered the body and its boundaries and meaning. She further offers that the cultural inscription of the body precedes the natural body as gender is not something that one is; it is something someone does, and therefore gender is a verb rather than a noun, as noted below:

There is no recourse to a body that has not always already been interpreted by cultural meaning. Hence, sex could not qualify as a pre-discursive anatomical facility. Indeed, sex, by definition, will be shown to have been gender all along.
(Butler, 1990, p. 8)

The above argument by Butler (1990) is consistent with Lorber (1994), who justifies that gender is an institution that is embedded in all the social processes of daily life and social organisation, which is not bred into our genes but is “constantly re-created out of human interaction, out of social life and texture that is of social life” (p. 112) as a result, people unconsciously do gender. She continues that the process of gendering and its outcomes are legitimated by religion, law, science, and the complete set of values shared by societies.

It is thus notable that gender is learned as a social phenomenon, and gender roles are learned through gender socialisations, which encourage certain behaviours and outline social expectations of what is properly masculine and feminine (Babatunde and Durowaiye, 2015; Connell, 2002). Considering this, people are not born with a certain gender but rather perform and “do” gender (Eckert & McConnell-Ginet, 2003; Butler, 1990; West & Zimmerman, 1987).

Notably, Eckert and McConnell-Ginet (2003) describe sex as a biological categorisation based on reproductive potential, whereas gender is the social elaboration of biological sex and gender categories, which are grounded upon the dichotomy of male and female. People act in a gendered way and form the ground upon which they build themselves from birth. Thus, society interprets and interacts differently with male and female children (Condry & Condry, 1976).

In this manner, sex is viewed as culturally regulated through endorsements of accepted types of sexual behaviour that are learnt from socialisation (Ntseane, 2004).

Society confines males and females into positions which determine their participation in different spheres of society. Accordingly, their gender identity shapes their roles and activities to what society views as appropriate for people (Morgerou et al., 1997). For example, African-American scholar Wallace (2007) asserts that black boys and girls are socialised differently according to gender from the time they are born. To this effect, they are taught that womanhood is something that one must grow into, whilst manhood is deemed to come naturally and automatically. This creation of masculinity in opposition to femininity reinforces the division of social life into separate dominant and subordinate roles (Pylypa, 1998).

Similarly, Lorber (1994) describes how gender is a familiar part of everyday life that is pervasive in a way that society thinks it is bred to human genes. Gender also regulates some expectations of how women and men are supposed to behave. For example, according to the gender ordering of roles, which are prescribed as feminine, women are expected to play a submissive position in sexual relations and be ignorant about sexual matters.

People's control over their sexuality is shaped by gender-related values and norms that define masculinity and femininity. These gender norms emanate from each society's socio-cultural context, which builds some acceptable norms of masculinity and femininity and thereby creates unequal power relations between men and women (Butler, 1999). This power relationship between men and women is seen as producing an imbalance, which affects women's autonomy whilst expanding men's control and limits women's freedom over their sexuality.

Ugandan human rights activist Sylvia Tamale (2011, 12) maintains that sexuality and gender cannot be separated as both are creatures of and influenced by culture and society, which play a significant role in negotiating power relations. She further argues that sexuality is embedded in the meanings and interpretations of gender systems and has various dimensions, which include sexual knowledge, beliefs, values, attitudes, and behaviours, as well as procreation, sexual orientation, and personal and interpersonal relations. Many cultures place more power on masculine than feminine behaviours and endorse the conventional male roles in sexual relationships, which affords more power to men than women (Lefkowitz et al., 2014). Most cultures link sexuality to procreation and hold a belief that a lack of sexuality knowledge would prevent premarital sexual activity that could bring dishonour to the family; therefore, discussions about sexuality are kept to a minimum (Okazaki, 2002). In most African contexts,

overt public display of affection is uncommon and sexual thoughts, perceptions and acts are mostly shaped by religion (Osafo et al., 2014).

Culture often uses gender as a primary category of social relations, thus constructing the beliefs, rules, ideas, values, and acceptable norms which underline the discourse and regulation of sexuality (Babatunde & Durowaiye, 2015, 69). It shapes what ideas are acceptable and appropriate between men and women. A certain sex is associated with certain gender roles which are culturally learned (Babatunde & Durowaiye, 2015; Connell, 1987). Cultural meanings are attached to male and female categories (Epstein & Johnson, 1998). Gender socialisation is thus construed as having implications for how sexuality and socialisation are understood and practised. At the same time, the role culture influences both plays in the way women construct their femininity through engaging in specific sexual practices.

2.2.1 Sexuality and the African woman in the context of socialisation

According to Ratele (2006), Africans regard sexuality as an ethical issue. This is corroborated by Ndoma (2019) and Kayode (1986, p. 51), who suggest that in traditional Africa, conversations about sex were taboo and that most parents never discussed sex with their children. These arguments are predicated on the view that sex is what children are not supposed to be exposed to (Ayantayo, 2002, p. 56). However, sex is also deemed critical to relationships and beneficial in restoring unions and strengthening relationships. Hence, sexual starvation is perceived as risky, which is illustrated by Ratele's (2006) work, which describes an incident whereby the then South African deputy president, Jacob Zuma, averred in court during his rape trial that in his culture⁶, a man could be accused of rape for leaving a woman sexually aroused.

In some African societies, women are regarded as dependent beings to be directed and protected by men (Mugambi & Magesa, 1990, p. 61). Sex is considered something that is meant for only married couples, and virginity is constructed as the glory of a woman (Familusi, 2011; Mbiti, 1970). The woman, or rather the wife, is expected to be faithful to the man who is the husband (Akintola, 1999). Ironically, the converse effect is not expected of the man as he can have several legitimate wives, and custom allows him sex with all of them (Familusi, 2011).

⁶ Jacob Zuma is a Zulu man from Nkandla KwaZulu-Natal. His statement does not represent the entire Zulu culture. It is possible that they hold such beliefs in his village. Zuma was the state president of the Republic of South Africa from 2009-2018.

Writing from a central African perspective in Uganda, Okiria (2014, p. 127) asserts that in African culture, sexuality is not supposed to be discussed in public or with anyone except for intimate friends. He elaborates that the issue of sexuality is central to the spectrum of power relations between men and women (Okiria, 2014, p. 128). The culture of silence which is prevalent in most African contexts, indicates a “socially accepted behavioural constraint” dictating “women’s reserve, modesty, and discretion in sexual relations” (Arnfred, 2004, p. 73; Osakue & Martin-Hilber, 1998, p. 193). Jewkes and Morrell (2010, p. 1) offer that gender differences in sexual socialisation play a key role in influencing the circumstances for relationship choices in men and women.

Akenova (2004) maintains that there exist various proverbs and contemporary cultural norms which emphasise that the “real” or “proper” African woman is heterosexual, married, bears children, and pleases her husband sexually. The media also represent people in stereotyped ways (Eisend, 2010). Men are portrayed as active, adventurous, powerful, sexually aggressive, and principally involved in human relationships. This is consistent with the cultural views of gender depictions of women as sex objects. Wood (1994, p. 233) contends that “female characters devote their primary energies to improving their appearances and caring for homes and people.” This accounted for in terms of the social expectations that are attached to womanhood.

Several social and cultural systems in some African societies dictate that women have no control over their sex lives and thus corner them into subordinate positions (Buve et al. 2002 pp. 2011-2014). The patriarchal and patrilineal African culture leaves females in an aura of expectations and control which places them under men as umpires (Kambarami, 2006; Khumalo-Sakutukwa & Garbus, 2002). There are socially defined ways of being a man or a woman. Men dominate some influential positions, which are supported by culture and religion. Such separation between men and women reinforces gendered differences, gendered identity, and gendered behaviour (Jewkes & Morrell, 2010, p. 1; Lober & Martin, 1994, p. 116).

From birth, women are often regarded as softer and more fragile when compared to males. In sexual relationships, women are viewed as the “prey” and men as the “hunters.” Men are regarded as being sexual, whereas women are not supposed to be (Beyers, 2011, p. 205). Moreover, through regimes of compulsory heterosexuality, men in the institutions of marriage pawn women in subordination and dominance. In these institutions, women are accountable for the satisfaction of their male counterparts (Babatunde & Durowaiye, 2015, pp. 69-70).

Uchem and Ngwa (2014, p. 145) suggest that the subjugation and degradation of women is prevalent as the female sex is viewed as the property of men and that women have no control or right to own their sexuality in most parts of Africa. Feminist scholars offer that sexuality and gender are intricately linked to socialisation, which begins from birth, where the family encourages gender socialisation to ensure that children adapt to the societal norms and standards of behaviour expected of them. However, children are taught about sexuality as related to reproductive activity, which in heterosexuality places women and men in various positions (Babatunde & Durowaiye, 2015, p. 71).

African feminists suggest that narratives of domesticity frame womanhood in Africa (Arnfred, 2004; McFadden, 2003; Imam & Mama, 1997). Similarly, Shefer & Foster (2001, p. 10) continues that sexuality is framed as a domain in which men control and set terms into which women must be inducted and guided. Therefore, Shefer and Foster (2001, p. 14) emphasise the need for the development of discourses which challenge the negative construction of women's sexuality and sexual desires and advocate for the recognition of women as sexual agents.

Notably, adolescents within the African culture are socialised on sexuality through initiation schools. Several customs, such as female genital mutilation, forced marriages and non-consensual sex in marriage, are evident in cultural practices and religious belief systems (Rembe et al., 2011, p. 12). In Africa and globally, customs function to oppress women's sexuality. In some customs, women are condemned for lubricating during sex. Practices such as the sewing up of the vagina were performed and are still performed in some societies (Segoete, 2015). During the sewing of the vagina, a small hole is left for urination, and the vagina is only re-opened once the woman gets married so that she can have sexual intercourse with her husband. This is evidence that society perceives women as sexual objects who should prepare their vaginas for their husbands. To this effect, Baloyi (2010) reports that the number of sexual offences in South Africa is a matter of concern, which attests to the narrative that people are socialised through certain customary practices that condone the reduction of women to mere sexual objects.

2.2.2 Intersecting concepts

Religion influences the enactment of female sexuality. Sexuality is a concern for religious belief systems and religious institutions (Vincent et al., 2011). Religion and sexuality provoke strong responses from individuals and groups because they are understood as components of

identity through which individuals look at themselves. Societal control of sexuality is often pursued through the enactment of religious sanctions and tenets (Tamale, 2016), including the traditional use of taboos among traditionalists. Young et al. (2015) justify that religion and religiosity implicate bodies and regulate women's bodies and women's clothing. Therefore, women's bodies are construed as frequent regulation sites within secular and religious policies (Young et al., 2015). A certain religious presentment constructs women's bodies as a threat to men and tends to regulate and maintain them for perceived procreative purposes. Therefore, from the religious perspective, social attitudes toward women are often maintained for fear of women's sexualities and their role as mothers (Baloyi, 2010).

Most religions recognise people as heterosexuals, and rights to sexual fulfilment are inculcated exclusively for married couples. Any other sexual behaviour that is not encapsulated in marriage is prohibited (Batisai, 2015). Certain religious constructs of men perceive them (men) as rational beings capable of sexual control, whilst women are deemed to be weak and lacking self-control (Wood, 2017). Tamale (2014) explores the role of Messianic religions on African sexualities. She argues that they have worked to regulate the practices, feelings, ideas, fantasies, and aesthetics. She further argues how such religions tend to work as the law' to set the agenda about what is good, respectable, and normal sexuality. Religion often creates environments that only favour committed mating strategies. Sex is restricted to family and preserved for married people. The Christian discourse of Eve as the passive recipient of the forbidden fruit, a classical example of women's lack of control, is a representative example in this case. Women are believed to be vulnerable and oblivious, thus warranting their sexuality to be monitored (Dunne, 1998, p. 8).

Baumeister and Twenge (2002) observe that the double standard of sexual morality as a condemning factor to certain sexual practices by women is culturally induced. The double standard affords certain privileges to men, which causes women to feel that society deprives them of the right to express their sexuality or to enjoy sex. Baumeister and Twenge (2002) contend that the suppression of female sexuality as a pattern of cultural influence results in girls and women being forced to avoid feeling sexual desire and refrain from sexual behaviours.

2.3 Culture, body, and female sexuality

The body is an important "site for political, social, cultural and economic intervention, and it has been recognised as a contested terrain on which struggles over control and recognition are

fought in contemporary societies” (Hancock et al., 2000, p. 1). Horn (2006) also asserts that the body is the primary means by which people participate socially, economically, spiritually, and creatively in society. According to Khubisa (2017), societies tend to determine the ideal body for women and women’s bodies are often constructed and shaped as per male preferences. Such preferences vary for women across different societies. South African feminist scholar Gqola (2007, p. 120) asserts that “women’s bodies are seen as accessible for assumption and control”.

Patriarchy is often privileged in most cases within Zulu culture, which the study is contextualised. Thus, women are often denied the opportunity to question their own behaviour concerning the body's ideal, size, and shape (Ogana & Ojong, 2013). This demonstrates how black (Zulu) women are often denied ownership of their bodies in consideration of male cultural preferences (Ogana & Ojong, 2013). Besides the denial of women’s ownership of their bodies, society also attached certain stigmas surrounding female sexuality, which are often pervasive and affect all women from different circumstances. Most women are “sexually objectified and treated as an object to be used by others” (Szymanski et al., 2011, p. 8).

According to Zondi (2013), the Zulu cultural context often categorises women as inferior and gives them subservient roles. Women have equal private spheres, whilst men have equal adventure. The *hlonipha* (respect) culture is also biased against women. The Zulu culture has a patriarchal bias which subordinates women. Ige and De Kadt (2002) noted a gradual shift from traditional Zulu perceptions of female roles. The Zulu female sexuality is regulated through practices such as *ukuhlolwa kwezintombi* (virginity testing/inspection), which several scholars and human rights activists have contested. Chastity is highly valued. Adolescent girls are taught to abstain from penetrative sexual intercourse. The practice has been associated with the woman’s value, especially in marriage whereby the virgin woman’s family charges a high price for *ilobolo* (bride price) (Mhlongo, 2009).

According to Armstrong (2012), the notion of the body is central to feminist analysis of the oppression of women. This assertion is also made by Hicks (2015), who notes how feminist writers have frequently drawn our attention to the importance of understanding the way the body communicates symbolic meanings and plays a role in constructing power relations between individuals. Hicks (2015) further asserts that the body is marked, adorned, and formed per prevailing human ideologies and social convictions.

Through a variety of aesthetic devices, the body has become a surface upon which humans inscribe and reinforce cultural rules, hierarchies, and commitments. Feminism contributes to describing and debating body dynamics concerning culture, power, and sexuality. It also affirms that the body is a contested site whereby people, especially women, often find themselves having to conform to societal standards of what it means to be female and beautiful (Hicks, 2015).

Margaret Lock (1993, p. 133) contended that the body mediates all action and reflection upon the world. Culture could be dominant enough to redefine nature, including the body, which becomes redefined in terms of culturally defined categories. For radical feminists, culture is a prison that leads to the subordination of women (Ntseane, 2004). Foucault (1978) argues that “the body and sexuality are cultural constructs rather than natural phenomena and that the body and sexuality are at the direct locus for social control”. Foucault elaborates that the concept of natural sex only functions to disguise the productive operation of power concerning sexuality. He also affirms that sexuality should be seen through power relations. It significantly explains the dynamics between females and males and analyses how culture influences them.

2.4 Patriarchy, masculinity, and control of female sexuality

Patriarchy, which is the system of social structures and practices in which men dominate, oppress and exploit women, implies that “men hold power in all the important institutions of society” and that “women are deprived of such power” (Sultana, 2012, p. 3; Walby, 1999, p. 20). Patriarchy also defines the institutionalised system of male dominance (Sultana, 2012, p. 3) and is visible in institutions such as the academy, church, and family. It justifies and reinforces women’s subordination to men (Sultana, 2012, p. 3). Johnson (2005) avers that this system began with the appropriation of women’s sexual and reproductive capacity by men, which evolved into private property. The household is construed as the primary site for the production and perpetuation of patriarchy (Turner, 2008).

The institutionalisation of patriarchy in society subordinates women and leaves them without a voice in matters concerning their sexuality. According to Johannsdottir (2009, p. 8), patriarchy dictates that heterosexuality should be the norm. Through the patriarchal system, women are forced to stay under the control of men. Men appropriate more power within the social unit, and masculine and feminine spaces are created and characterise social relationships negotiated in power both in the private and the public spheres. Patriarchy is maintained through

a powerful gendered socialisation process of agents such as the family, religion, legal, political, economic systems, and educational institutions (Sultana, 2012).

Hegemonic masculinity, a concept first coined by an Australian sociologist, Raewyn Connell (1987), to describe or refer to those traits that various cultures ascribe to real men is construed as the turning point for patriarchy. Characteristically, hegemonic masculinity encourages men to follow a dominant masculinity that is believed to portray the characteristics of a real man, which usually subordinates women. Kahn (2009, p. 31) asserts that men comply with hegemonic masculinity by subordinating women. Similarly, Ratele (2006) states that hegemonic masculinity is a dominant form of masculinity that is constructed by various influences, including race and culture. MacKinnon (1989, p. 319), however, argues that male dominance in society is sexual, and it exists cross-culturally as many traditional cultures seem to have a way of talking and teaching sexual pleasure whilst simultaneously practising customs that regulate women's sexuality. MacKinnon's (1989) argument is corroborated by Kambarami's (2006) assertion that patriarchy as an aspect of culture leads to gender inequality and subordination of women so that they have no control over their sexuality. Some cultures socialise women to please men in sexual interactions, resulting in women engaging in high-risk behaviours, which they believe will enhance sexual pleasure for their male partners.

Within most African hegemonic masculinities, the male identity is often strongly sexualised and constructed around sexual attitudes that are shaped by perceptions of what it means to be a real man (Langa, 2014). Men tend to overvalue their sexual performance and would often present themselves as sexually skillful and successful. There is a strong fear of being seen as sexually incompetent, as such presents men as 'weak' and is often ridiculed in many societies (Langa, 2014). Having multiple sexual partners is often regarded as a sign of prestige. This contrasts with women who are usually expected to preserve their bodies for their future husbands and are often discouraged from engaging in sexual activities, especially before marriage, to avoid being labelled as promiscuous. This depicts an imbalance of power between men and women in most (African) societies and reflects how patriarchy influences the discourses around women's sexuality in contrast to men. These power dynamics between men and women and how most societies view people concerning sex and sexuality are problematic.

2.5 Construction of women's bodies

People's understanding of the living constraints and enablers of the social constructs in which they are positioned is portrayed through the body, thus allowing an interplay between structure and agency (Young et al., 2015). Bodies are a site of oppression, discursive formation, and symbolisation. Members of society construct their bodies in compliance with the accepted views of masculinity and femininity and try to shape their bodies to conform to the culturally/ethnically expected notions of how they should look. Whilst bodies are indeed distinct in terms of physical shape, size, strength, and weaknesses, members of society, not biology/genes, determine the shape and usage of men's and women's bodies and categorise what is masculine/feminine (Lober & Martin, 2007). Therefore, bodies are socially constructed.

King (2004) refers to the body as an over-determined site of power, which feminists regard as a surface that is inscribed with culturally and historically specific practices and subject to economic forces. Within the patriarchal system, women are often objectified and viewed as weak and helpless, and they have been alienated from their bodies. Women's inscribed bodies reproduce unequal power relations, resulting in subjectivity characterised by feelings of deficiency, inadequacy, and lack of agency. Therefore, women's body language speaks eloquently, though silently, the hierarchy of gender (Bartky, 1997). Society often insults women by demanding that the truly womanly woman must be soft. The female body is inscribed as socially deviant when compared with the normative male. Women who do not adhere to social expectations of differential non-threatening femininity are often shamed and labelled as nasty. Derogatory words such as bitch are used to chastise women for not behaving according to the socially acceptable standards for good women (Luu, 2016; Candib, 1970).

Women's bodies continue to serve as a locus for the social construction of femininity and subjugation (King, 2004). They are presented as a power source, viewed as unruly and requiring constant monitoring, surveillance, discipline, and remodelling to conform to a narrower judgement of female attractiveness and acceptability (Gill, 2007). They continue to be a site of struggle for power and control. (Loeto, 2014; Querna, 2008; Brownmiller, 1984).

The vagina forms part of a woman's body and is not separate. As part of the woman's body, the vagina has also been socially constructed (Querna, 2008). Scholars have suggested that traditionally, it has been perceived as a shameful organ to be hidden. When made public, it is ridiculed or protested as a disgusting display (Querna, 2008; Braun, 2005; Davis, 2002; Braun

& Wilkinson, 2001). The vagina is deemed to have been a site for the commercial economy whereby douches, scented panty liners and various feminine hygiene products are created and marketed to women to sophisticate the vagina (Crann et al., 2018; Querna, 2008; Davis, 2002). The search for better bodies fuels the popularity of various medical and non-medical regimens for women (Lober & Martin, 2007). Some women are reported to elect cosmetic surgeries to change the appearance of their genitals.

Querna (2008, p. 60) establishes that the vagina has been displayed as problematic and popular women's magazines are rampant with questions from readers on how to improve the look, smell, tone, and even taste of their vaginas. Nappi et al. (2005, p. 493) also remark that it symbolises a woman's sexuality and fertility. However, it is still viewed as an intimate private organ and a certain degree of fear and shame is attached to it, contributing to the lack of public engagement. They further confirm a general reluctance to discuss the vagina in adults and that society's attitude remains closed.

Society fails to discuss it without embarrassment or crudeness, possibly because some people regard the vagina with a sexual connotation and categorise it as a rude word (Thompson et al., 2006, p. 74). Thus, young women experience pressure in attempting to understand their bodies and express themselves (Lober & Martin, 2007). The need to understand their bodies has led some women to accept ideas and answers on how to treat their bodies from their male counterparts. Sexual objectification reduces women into objects who are incapable of independent thought/self-sufficiency whilst demonising and marginalising them to solidify cultural patriarchy. This gives men a certain level of bodily control.

People understand and ascribe biological sex and its genital manifestations based on perceptions informed by cultural concepts about gender (Johannsdottir, 2009). Hilber et al. (2010) accept that although vaginal practices have been documented worldwide, research fails to distinguish culture-specific differences in practices, products, motivations, and the temporalities of their use. According to Arnfred (2004, p. 59), issues of sexuality in Africa are conceptualised in contemporary (often donor-driven) investigations and debates which centre on violence and illnesses such as HIV/AIDS, genital mutilation which often make women blameworthy victims. Female sex seems problematised as it is invariably linked to violence and or death (McFaden, 2003). There is a lack of appetite for documenting the vaginal pleasure and enjoyment or of the desire to express female sexuality. This cannot materialise without such expressions evident in narratives of pain, victimhood, taboo, and violence. Thus, a woman

struggles amid her own inner promptings directed at sexually expressing herself and the expectations of atoning an array of forces of societal control and cultural legislations by which female sexuality is policed.

2.6 Vaginal practices

Vaginal practices such as genital cutting, douching, and drying have been documented in various African, Asian, and Latin American countries for reasons such as cleansing, treatment of vaginal infections and personal beliefs (Zbella et al., 1964; Mandal et al., 2014). Researchers in the Southern African region have documented vaginal practices since the 1900's. Some of these qualitative studies have noted a separate set of practices, including dry sex, douching, application of substances to the genital area and some procedures for surgical modification of women's genitalia (Smit et al., 2011; Scorgie et al., 2009; Beksinska, 1999; Mbikusita-Lewanika et al., 2009; Karim et al., 1995).

In the Democratic Republic of the Congo, a wet vagina is the result of a curse or bad luck, whereas in Senegal, there is a belief that it is not a natural part of the body but must bear the mark of artistic work. A study by Fiaveh et al. (2014), which compared the perceptions of masculinity and femininity in Ghana, revealed that most women indicated that the vagina is an important construct of their femininity. In the Democratic Republic of the Congo and Zimbabwe, vaginal dryness is reported to increase sexual pleasure for both partners. Women have reported that using vaginal drying agents made them feel like a virgin. Some herbs are believed to heat a woman's body, thus causing heat and friction during intercourse and heightened sexual stimulation. In some African regions, women use drying agents not only for tightening but also for the self-treatment of STI symptoms, including discharge and itching. Agents are used where there is a preference for a dry rather than a lubricated vagina.

Some studies cite gender as a significant influence which limits women's power to negotiate their own sexual lives. They may fear that changes in their vaginal environment in the form of discharge and odour may indicate poor hygiene and STI and therefore use vaginal practices for preventative and curative purposes (Hilber et al., 2010; Runganga et al., 1992; Brown et al., 1993). A study of using snuff for curative purposes was conducted by Lees et al. (2014), who discuss how Tanzanian women are advised to treat lower abdominal pain (whether menstrual or not) by inserting snuff (*mchango*) into the vagina every day until the pain subsides and to use coca cola to treat bruises resulting from sexual intercourse.

Indonesian women use *jamu* (herbal preparation) to enhance sexuality, hygiene, prevention of diseases and management of menstruation (Hilber et al., 2010). Prohmmo and Watcharasin's (2007) study on vaginal practices amongst Thai women revealed that women perform different vaginal practices, including soap, gel, toothpaste, feminine hygiene solution, vaginal tablets, and pantyhose to dry and reduce unpleasant odours and some traditional preparations to tighten the vagina. The popularity of each agent depends on each woman's socioeconomic and cultural background (WHO, 2012).

A multi-country⁷ study conducted in 2007 by the World Health Organisation (WHO) revealed that vaginal practices are mostly motivated by the desire to maintain health and wellness and giving effect to the enhancement of sexual pleasure. The common examples of vaginal enhancement practices are external washing using soap, water, and other detergents to wash the external area around the vagina and genital area. The study also notes intravaginal cleansing, including douching and wiping the genitalia with fingers and other substances such as cotton and paper.

The external application includes placing and rubbing various substances into the external genital area and intravaginal insertion, which is pushing or placing something inside of the vagina regardless of how long it is left inside. In addition, oral ingestion includes drinking or swallowing of substances to affect the vagina and uterus. Other practices include vaginal steaming or smoking by sitting above a source of heat and placing oils or creams to create smoke and atomical modification, including cutting and pulling procedures for modifying the vagina (WHO, 2007; Scorgie et al., 2009; Gafos et al., 2010).

In South Africa, the prevalence of vaginal practices is notably high in KwaZulu-Natal (KZN) (Smit et al., 2011; Baleta, 1998). This is observable, especially among women who practice transactional sex and sex workers (Morar et al., 2003). According to Baleta (1998, p. 1292), many women in South Africa willingly insert household detergents and antiseptics into their vaginas before sex to ensure that they are hot, tight, and dry. Research conducted in KZN demonstrates that some of the factors that motivate women to engage in vaginal practices go beyond women's desire to increase men's sexual pleasure to maintain fidelity within their relationships (Gafos et al., 2010; Scorgie et al., 2009). Other reasons for such practices include

⁷ The study covered one province in each of the four countries: Yogyakarta in Indonesia, Tete in Mozambique, KwaZulu-Natal in South Africa, and Chonburi in Thailand.

cleansing, enhancement of pleasure and as a love potion to attract or maintain partners. Substances such as *imithi yentando* (love portions) are used to retain sexual partners (Scorgie et al., 2009; Beksinska, 1999; Brown & Brown, 2000). However, these studies are usually framed within a biomedical approach, thus excluding the cultural aspects. Again, although Scorgie et al. (2009) mentions snuff in their study, little attention is paid to its use, and it is only described as a substitute for sexual intercourse with a man since it adds heat to the vagina. Hence, the present study explores the use of snuff as a sex stimulant.

In South Africa, sex assumes a framing in language which restrains women from engaging in sexual activity or having multiple sexual partners (Chauke, 2014; Ndinda et al., 2011). Many stereotypes exist about women and their vaginas; the “loose” woman is metaphorically presented in the image of a “loose” vagina (Leclerc-Madlala, 2002). A tight and dry vagina is commonly perceived as a virgin, whereas a non-virgin is wide and wet. Being tight and dry during sexual intercourse with a man and the ability to give an illusion of virginity is considered a woman’s secret knowledge and sexual repertoire.

A dry vagina is considered healthy and pleasurable for men as it helps them to ejaculate quickly and easily (Leclerc-Madlala, 2002, p. 15). Women use a variety of methods that are said to “dry and clean the vagina and cause sex to be more interesting and exciting for men as it assists those with a small penis to do the work” (Leclerc-Madlala, 2008, p. 92). South African men have reported that vaginal wetness during sex is an indication of a woman’s infidelity and have associated vaginal lubrication with sexually transmitted infections (Kun, 1998; Scorgie et al., 2010). Martin-Hilber et al.’s (2012) diagram below (Figure 2.1) indicates the motivations for the use of vaginal practices as illustrated below.

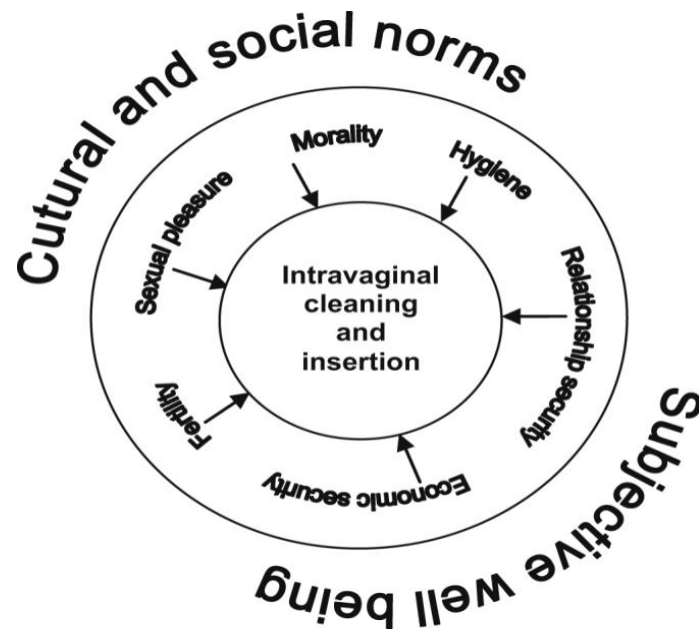


Figure 2.1: Motivations for the use of vaginal practices

Source: Martin-Hilber et al. (2012, p. 1316)

Notably, many women modify their genitals for reasons including sexual well-being, socialisation about sexuality, control of sexuality and increasing pleasure of either or both partners (Crann et al., 2018; Bagnol & Mariano, 2008; Brown & Brown, 2000). They use a variety of products to contract or close the vaginal canal (Leclerc-Madlala, 2002). A study by Hilber et al. (2010) indicates that some women use vaginal practices to control their sexual relationships because of economic security, supernatural beliefs, and social norms that influence intravaginal practices. The vaginal practices influenced by social and cultural gender norms are instilled in the process of socialisation of young girls into adulthood (Lees et al., 2014; Hilber et al., 2010; Braunstein & Van de Wijert, 2003).

In sub-Saharan Africa, vaginal practices have been associated with transactional sex, whereby there is a reciprocal process from gift-giving in long-term relationships to long-term sex work whereby women are expected by their male clients to present themselves in a preferred vaginal state (Humphries et al., 2019; Lees et al., 2014; Hull et al., 2011).

Gendered constructions of sexuality are thus, in this instance, constructed through genital care and, for many women, sexual well-being, pleasure, marital duty and health, which are closely related; hence, they engage in vaginal practices. The degree to which women want to increase their desire and pleasure cannot be easily separated from the desire to sexually satisfy the male partner (Hilber et al., 2010). Keeping the vagina clean and removing undesirable discharge is

motivated by the local views on sexuality, with require women to meet the expectations of the virgin myth by erasing evidence of previous sexual activity to satisfy the needs of a sexual partner and ensure fidelity (Scorgie et al., 2009).

2.7 HIV/AIDS in the cultural context of South Africa

South Africa has been severely affected by HIV and AIDS and has the most rapid growth in infections. According to the Statistics South Africa mid-year population estimates for 2021, the overall HIV prevalence rate is at approximately 13.7% among the country's population, with the total number of people living with HIV estimated at 8.2 million. An estimated 19.5% of people aged 15 to 49 are HIV positive. About a fourth of South African women in their reproductive ages (15-49 years) are HIV positive. HIV prevalence among youth aged 15-24 years has remained stable over time. The total number of people living with HIV in South Africa escalated from an estimated 3.8 million in 2002 to 8.2 million by 2021, with the most significant number of people enrolled in antiretroviral treatment (ART) programmes in the world.⁸

Mswela (2009) suggests that most cultural practices contribute to the spread of HIV/AIDS in South Africa. These cultural and contextual conditions should be appropriately appreciated since they play a vital role in how people make meaning of their lives and how they negotiate decisions relating to sex. Gender inequalities and differences as products of culture contribute to the spread of HIV/AIDS in that unequal power relations come to exist also during sexual intercourse, as most African cultures regard sex as only profitable for male pleasure. This unequal balance of power has witnessed black women becoming the face of AIDS (Mabaso et al., 2019; Mofolo, 2010). Many young black women are affected by HIV/AIDS in South Africa. The low status of women in society and within relationships and their subordinate roles are some of the factors perpetuating the epidemic.

Black women are subjected to subordinating cultural practices, which include levirate, primogeniture, virginity testing and dry sex practices (Mabaso et al., 2019; Mswela, 2009). These cultural beliefs about sexual health and gender motivate the use of vaginal practices by attaching a high value to the vaginal state. Several studies associate dry sex with the risk of HIV transmission and sexually transmitted infections (STI) acquisition, and those cultural

⁸ Stats SA (2021)

beliefs and some educational factors about vaginal hygiene may strongly influence vaginal practices. (Bagnol & Mariano, 2008; Myer et al., 2004).

The province of KZN, where the present study was conducted, has consecutively reported the highest HIV statistics in the country, followed by Mpumalanga (Shisana et al., 2009). The pandemic has had many negative effects on families, such as premature parental deaths in child-headed households. It remains one of the major threats to the social and economic well-being of the country. The province faces a triple bind of HIV/AIDS, Tuberculosis (TB) and poverty. The advent of the HIV epidemic reignited the interest in vaginal practices and HIV infection as scholars wanted to understand the relationship between vaginal practices and HIV prevalence (Scorgie et al., 2011; 2009; Myer et al., 2004; Bheksinska et al., 1999).

Intravaginal hygiene and menstrual practices have been recognised as risks for HIV among women. Research studies indicate that intravaginal practices are common among women of various levels of STI acquisition risk (Hilber et al., 2010; Scorgie et al., 2009). Studies demonstrate that vaginal practices may increase women's susceptibility to sexually transmitted diseases through the modification of the vaginal flora and may also put women at risk of Pelvic Inflammatory Disease (PID) and cervical cancer (Bagnol & Mariano, 2008; Braunstein & Van de Widjet, 2002; Brown & Brown, 2000). Other studies associate the use of vaginal practices with higher rates of HIV transmission (Hilber et al., 2010; Bagnol & Mariano, 2008). Others assert that although diseases such as vaginosis and yeast infection are likely to result from vaginal practices, these practices have not yet been established as co-factors in HIV and AIDS infections (Alcaide et al., 2013; Bagnol & Mariano, 2008; Myer et al., 2004).

Consistent and correct condom use remains vital for the prevention of HIV and STIs, and some studies report that in the instances where intravaginal practices are used, condom use is rare as there are beliefs that it may get torn. Some studies indicated that people may begin intercourse with a condom and then remove it and resume intercourse (Lees et al., 2013; Gafos et al., 2010).

2.8 The significance of snuff in the African (Zulu) context

Udeze et al. (2020) maintain that before the arrival of Western settlers, smoking was not a part of the African culture but a habit replicated from elsewhere. He further argues that the African equivalent to smoking was snuff made from tobacco and similar local leaves. According to Duval (2017), tobacco was introduced to Africa from the Americas in the late 1500s. It gained rapid, widespread popularity, and Africans developed distinctive tobacco production and use

modes. Although tobacco, including snuff, may be considered a Western product, Africans have borrowed it and used it in many ways, including those which are sacred and for healing and pleasure (Udeze et al. 2020). The use of smokeless tobacco (snuff) is common in the African context. Ayo-Yusuf et al. (2006, p. 12) observe that tobacco products have social preferences and are socially conditioned.

The use of tobacco by women in most African cultures is a common practice. Chan, Weaver, Eriksen and Papova (2023) documented the generational use of *taba* (snuff) by women in the Gambia for smoking, chewing, licking or placing it under the tongue. Married women in Northern Nigeria have been reported to use tobacco and cigarette smoke to tighten their vaginas. This is also common among Zambian women who use *unsuko* (snuff) for intravaginal insertion. This is motivated by the belief that snuff will promote vaginal tightness and stimulate sex drive. Furthermore, snuff is believed to maintain healthy blood pressure. Within the Zambian context, the use of snuff was mostly prevalent among women but is slowly gaining popularity among young women.

According to Peltzer (2001), snuff use is socially acceptable among the indigenous people of South Africa, especially for ceremonial rites such as marriage and for other medicinal purposes, including healing headaches and toothaches and, to a lesser extent, for pleasure. Amanze (2011, p. 28) defines snuff as “an example of traditional medicine which is used in its powdered form and is usually made with a mixture of two or more herbs”. A study by Ayo-Yusuf et al. (2008) asserts that snuff is common among women compared to men in South Africa. A documentary produced by ENCA⁹ news in 2016 includes a group of domestic workers in Kempton Park, Johannesburg, South Africa, using snuff for varied reasons, including headaches and reducing high blood pressure. South African *kwaito* music artist Biblo was also reported to use snuff for curing migraines.

Maduna (2015) and Mlisa (2009) documented the use of snuff by *izangoma* and *izinyanga* (traditional healers and herbalists) for divination/connecting with the ancestors. Traditionally, healers use snuff to invoke the ancestors through prayers (*ukuphahla*), whereby a healer would kneel and clap and chant songs and even burn *impepho* (incense) (www.khokhovula.co.za).

⁹ ENCA news is a news channel that belongs to ETV, a South African broadcaster. The video can be accessed online by visiting: <https://www.enca.com/life/video-addicted-to-snuff>.

Other items used for *ukuphahla* could also include *ukhamba lomqombothi* (a clay pot with traditional beer), snuff and candles (Mlisa, 2009).

Apart from the invoking of the ancestors, *sangomas* and traditional healers prescribe snuff for other ailments, including the healing of some forms of bewitchment and the culture-bound syndromes such as *umeqo* (a practice of placing a concoction in the enemy's path with the belief that when the enemy passes by, he or she will contract a fatal disease). In this case, snuff is used for *ukubhema* (smoking) together with other herbs to ease the condition and *ukuthoba* (use of fomenting treatment for aches) (Truter, 2007). Rituals for mental illness, schizophrenia (*amafufunyane*) and epilepsy (*isifo sokuwa*) are also treated with some snuff concoctions. Other psychotics are believed to be caused by ancestral spirits, and patients may be advised to take snuff from their traditional healers (Edgetorn, 1966; Amanze, 2011). Concoctions for asthma may include snuff boiled with dagga leaves the patient drinks (Mosime, 2004).

In some instances, snuff may be used in the *ukubuyisa ithongo* (the bringing home of the spirit of the deceased) ceremony to fulfil his or her role as an ancestral spirit (Bishop, 1985). This ritual connects the deceased with other ancestral spirits in the family to care for those still alive. The isiZulu culture maintains that the deceased joins the spirit world and becomes a guardian angel of the household (Nkabinde, 1985, p. 24). There is a belief that if the spirit of the deceased person (*umufi*) is not brought back, he may cause trouble and even become a ghost (*ithunzi elibi/isipoki*) (Msimang, 1975, p. 147). Snuff is sprinkled on the incense with the belief that it would connect the spirit of the living with the ancestral world during the proceedings.

Snuff is also used in the instances of *ukulandwa komoya womufi ngomlanhlankosi* (fetching of the spirit of the deceased using the *umlanhlankosi*¹⁰), whereby the spirit of the deceased is fetched from where the person departed (died). The person responsible for the ceremony would kneel next to where the spirit departed and sprinkle snuff on the floor, telling the deceased that they have come to fetch their spirit (Jiyane et al., 2012). Again, this prevents the spirit from becoming a ghost or bothering other people. For example, if a person dies in a motor vehicle accident, his family will fetch his spirit so that it does not become lost and bother other people by causing more accidents on that spot (cf. Msimang, 1975). At the same time, it is evident that

¹⁰ *Ziziphus mucronata* - *umphafa*

snuff is not a new phenomenon in the isiZulu culture. It is, however, indistinct in the literature if snuff has been used to treat any sexually related matters or not.

2.9 Conclusion

This chapter presented the literature review and provided an objective summary. An analysis of available research and non-research works on related topics relevant to the inquiry of the study. This helped in providing the context for the study. It has been learned through the review of literature that gender and gender identity are learnt through various stages of socialisation, which include differentiation from birth, canalisation, and verbal appellation. These produce certain expectations of one's perceptions about who they are and how they should present themselves in society.

The chapter also reviewed other theories to analyse how gender is perceived and enacted. These included gender schemas, social learning, and social role theory of gender to understand the arguments around gender. The influence of culture concerning patriarchy, religion and women's sexuality was also explored. The influence of religion concerning women's sexuality was examined, and it was argued that most religions only recognise heterosexual relationships and regard the rights to sexual pleasure and fulfilment as exclusively for married couples.

The importance of the physical body cannot be omitted when discussing gender and sexuality since it is through the physical body that one is gendered or classified in a certain way. The woman's body is often subjected to patriarchal norms and expectations, especially within the African (Zulu) context. Whilst men are usually granted the freedom to have multiple sexual partners, women are expected to be loyal and to preserve their bodies for their husbands. This binary depicts an imbalance of power that exists in societies, thus putting men on a pedestal whilst burying women.

The literature provided on vaginal practices shows that they are not only performed by African women but also by women from other parts of the globe, including Asia and the Americas. Women's concerns about the look, smell, and the taste of their vaginas as well as the size of the labia minora is a prevalent issue in other countries, including those, which are termed as developed countries. In a country like South Africa, where HIV/AIDS statistics are high, vaginal practices raise questions about condom use and other HIV prevention measures. The literature has also presented that although snuff can be said to have its roots in Western

countries, it has become a significant herb in the African context and is being used for different reasons.

Overall, the literature has shown that gender socialisation has an influence on women's sexuality and may inform the decisions that women make regarding their sexual pleasure and well-being. The chapter also provided a summary and overview of vaginal practices and some of the reasons which influence women to engage in vaginal practices. A discussion about the significance of snuff in the Zulu culture was also provided to depict the many other beliefs that exist about snuff in the Zulu culture, which will relate to the use of snuff as a vaginal sexual stimulant later in the study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

The study took a qualitative approach. The present chapter will outline the research methodology and explain the data collection methods, sampling techniques and analysis methods used. The ethical issues and limitations of the study will also be discussed. The chapter commences with a description of the research site and explains the methodological approaches used. In addition, it provides an overview of the sampling technique and justification for such. The ethical issues and the challenges faced by the researcher whilst conducting the study are also discussed in this chapter.

3.2 Research Design

The study followed a qualitative approach to understand the complex social processes and capture details from the participant's perspective whilst maintaining subjectivity. This was consistent with the research paradigms that guided the study and also useful for the study to uncover beliefs, values, and motivations that participants have for using snuff as a vaginal sexual stimulant. This is consistent with Curry et al. (2009, p. 442), who asserted that qualitative methods are essential for understanding why some people adopt certain practices and behaviours. The qualitative research design enabled me to engage with the participants significantly deeper and explain events from their perspective. It involved a naturalistic approach, which enabled me to prioritise the contributions from the data provided by the participants as they created and constructed meaning to make sense of their world and experiences (Creswell, 2009). It also assisted me in identifying the diverse ways in which participants negotiate their gender identities.

According to Sutton and Austin (2015), qualitative research involves watching people in their territories and interacting with them in their own language. In a qualitative approach, I sought a more in-depth understanding through immersion - spending time with the participants, observing and interacting with them in their own language within their usual locations. In using the term "language", I do not only refer to isiZulu, which is the participant's (and my own) native language, but also the register that they used within their circles where certain words,

though common in the isiZulu language acquired contextual usage often leading to entirely different meaning and comprehension from their conventional semantic standing. Qualitative methods such as observation also contributed to deciphering the participants' non-verbal language and communication cues, which added depth and richness to the data analysis.

The qualitative method was appropriate for capturing the young Zulu women's thoughts, perceptions, and perspectives quite well. Duffy (1987) asserted that the qualitative approach is significant in studying the empirical world from the perspective of the subject and not the researcher. It contends that reality is subjective, multiple, and socially constructed by its participants (Tuli, 2010; Krauss, 2005; Lincoln and Guba, 1989). In conducting the study, I was guided by these principles, thus ensuring that I presented the participants' opinions as they were without imposing my own voice into the presentation of the data. I was also able to present the participants' ideas as they are, with the understanding that reality is subjective. What may be real in my world may be completely different in the other, thus enabling me to remain subjective.

3.3 Research paradigms: Critical theory and constructivism

The study's philosophical assumptions were based on constructivism and critical theory. Constructivism challenges the notion of an objective, fixed reality and posits that reality is a product of social construction and individual cognition. Under this framework, numerous constructs of reality coexist, reflecting individuals' diverse perspectives and experiences. Reality is shaped and understood through the lens of one's experiences, culture, and social context. As individuals navigate their lives, they construct their own interpretations of reality, resulting in many subjective viewpoints. This perspective highlights the dynamic and context-dependent nature of how people perceive and interact with the world around them (Mills et al., 2006; Lincoln & Guba, 1989, p. 43).

The concept of multiple realities arises from acknowledging that individuals, influenced by their unique backgrounds and circumstances, may interpret the same situation or phenomenon differently. While not necessarily conflicting, these diverse constructions of reality offer valuable insights into the complexity of human cognition and the fluid nature of our shared existence (Balarabe Kura, 2012, p. 6). It emerged as a reaction to positivism to understand how individuals construct meaning (Mack, 2010, p. 7).

According to constructivism, the world does not exist independently of our knowledge (Scotland, 2012, p. 11; Grix, 2018, p. 83). Meaning is embedded in the participant's experiences and mediated by the researcher's perceptions (Tuli, 2010). Within this paradigm, qualitative methods are mostly used in sciences and are composed of efforts to understand and construct meaning and to tap into subjective experiences (Goodsell, 2013, p. 3).

Constructivism was suitable as a paradigm for the study since it emphasises that meaning is achieved through social construction. The paradigm enabled me to explore how young Zulu women create their realities concerning their bodies and sexuality through social construction. Jacob and Manzi (2000, p. 36) observed that "Constructivists assert that an individual's experience is an active process of interpretation rather than a passive material apprehension of an external physical world." Constructivism as a paradigmatic stance also offered a wider scope to the study by probing into why and how women, within this specific study, use *ntsu*.

The critical theory paradigm is rooted in the belief that research serves the liberation and empowerment of individuals and groups in society. This paradigm encompasses various ideologies, including but not limited to Marxism and feminism, sharing a common goal of challenging and transforming oppressive structures and power dynamics in terms of class and gender, respectively. Critical theory recognises that society is marked by inequality, oppression and the unequal distribution of power and resources. It seeks to investigate, critique, and ultimately dismantle these inequalities, giving a voice to the marginalised (Mack, 2010, p. 9; Cohen et al., 2007, p. 26). Researchers are advocates and activists (Aliyu et al., 2014, p. 89) and view reality as shaped by social, political, cultural, economic, ethnic and gender values (Scotland, 2012, p. 13; Guba & Lincoln, 1994, p. 110).

Within the context of the study, the critical theory paradigm helped me explore how the sexual socialisation of young men and women in the Zulu culture is rooted in patriarchal ideologies, values, and assumptions and how it contributes to inequalities. It also assisted with understanding how colonial and religious factors perpetuate gender norms and inequalities. An example of this is how Christianity forbids all forms of pre-marital sex. In contrast, before the introduction of religion, Zulu people practised non-penetrative methods of sexual contact, such as thigh sex (*ukusoma*).

The chosen paradigms afforded an understanding of the complexities and nuances inherent in the research subject. They provided a comprehensive framework for exploring the multifaceted aspects of the topic, allowing for a deeper examination of the interplay between various factors,

perspectives, and dimensions. The paradigms served as valuable lenses to analyse, interpret, and make sense of the data, ultimately contributing to rich and insightful research findings.

3.4 Research site

The study was conducted at KwaDabeka township, located in Durban, KZN, in South Africa. This is a community that was established in the 1960s by the colonial/apartheid government as a temporary settlement for migrant labourers following an industrial development in the neighbouring Pinetown and New Germany industrial complexes. The flourishing of these industrial areas attracted many migrant labourers from all parts of South Africa to the township community (CAHF, 2010).

KwaDabeka has the largest hostel residential community in the country. The residential hostel, popularly known as KK hostel, is designed as a four-room-style house built in the 1980s. The township is at the intersection of two major metropolitan routes, and its unique setting makes it one of the well-located areas after Cato Manor, amongst the previously disadvantaged communities during the apartheid regime (Kunene and Dyili, 2014). Inanda is north of KwaDabeka, Newlands to the east and Clermont to the south. Kloof is to the west (Ramashala, 1997). This peri-urban, low-income black township is currently challenged by poverty, high unemployment rates, crime, drugs, and HIV/AIDS.

The reasons for conducting the study and selecting this community in particular were inspired by my experiences as a Zulu woman who grew up in the townships and observed how matters about women's sexuality were not openly discussed, given the taboo nature of matters about sexuality. From a couple of visits to a friend at KwaDabeka township, I observed how young women conversed about sex and sexuality. I then heard about the use of snuff as a vaginal sexual stimulant during a conversation with friends. I soon learned that this was a widespread practice in most townships. Intrigued, I decided to study this phenomenon further. I did not want to conduct the study at uMlazi because that is where I grew up, and most studies targeting sexuality issues in KZN townships tend to focus on the bigger townships such as uMlazi and KwaMashu. KwaDabeka remains one of the understudied townships when it comes to sexuality. I was, therefore, interested in learning about women from another township. I already had contacts at KwaDabeka and was familiar with the place since I had friends I had visited several times. At the beginning of the study, the focus was not specifically on Zulu women but on township women in general. This was due to my presumption that I would find various

ethnic groups, given that the place is an industrial township. However, it turned out that all my participants were Zulu natives.

In conducting the study, I considered that Zulu identity is not homogenous or universal. As stated by Rudwick (2008, p. 156), individuals who belong to the same ethnic group may have different perceptions regarding elements which constitute their culture. Therefore, the findings presented may not be binding for every Zulu woman, but there may be some nuances that each Zulu woman can identify with. The study location is considered one of the home bases for *amaZulu* (the Zulu-speaking people). The qualitative approach also assisted me in identifying how participants negotiate their identities. Zulu-speaking township youths negotiate their identities in various patterns. Dlamini (2001) suggests that Zulu identity in KZN centres on these identification criteria: birthplace, descent, language, and history. The participants in the study are descendants of migrant labourers who relocated from rural areas in various parts of KZN in pursuit of better life opportunities.

3.5. Sampling and the sample

The study used the snowballing sampling technique, a non-probabilistic type of sampling, to identify participants given that I already knew what to look for. Snowballing sampling technique is also known as chain/network sampling¹¹. This sampling technique is used when the researcher wants to identify the cases of interest from people who know what cases are rich, that is, who will be good participants. According to Barton (1999), the snowball method is used in cases where the population of interest cannot be identified by someone other than someone who knows that a certain person has the necessary experience or characteristics to be included. For the study, I used a key informant, a *spaza* shop owner¹². The *spaza* shops sell *ntsu* (snuff). This informant introduced me to the woman customer, who eventually became my gateway to her other friends who are also *ntsu* users through a network of friendship groups. I also found other women on social media who were willing to introduce me to their friends who also used *ntsu*.

¹¹ See Frey et al., 2000.

¹² The *spaza* shop owner was a male and therefore did not form part of the final research sample. This was not the only shop where snuff was sold but it was easy for me to ask for information from this owner since I already knew him.

A total sample of eighteen (18) female participants were selected for this study. The participants were aged between 18-35 and from a working-class background. The highest educational attainment was matric (Grade 12). This sample size was considered adequate given the qualitative nature of the research, as emphasis is placed on extracting thick and rich data rather than on the sizable sample, which may be challenging to probe into the depth, details, and richness of the information (Onuwegbuzie and Leech, 2004). Whilst Sample size in qualitative research remains subject of enduring discussions and to date, there is no direct way of deciding the number of participants in qualitative inquiry. Sample sizes tend to be small in order to support the depth of case-oriented inquiry that is fundamental to the qualitative mode of inquiry (Vasileilou et al., 2018). ‘While the qualitative inquiry is flexible in its methodological approach, there are no strict rules about participants number that need to be selected prior. However, focus of qualitative research should be on fulfilling the research aim rather than presenting large samples’ (Subedi, 2021 p. 10)

Using a smaller number of participants allowed me to build a relationship with the research participants which would have been impossible with a larger group. This was important for the research study as explained by Subedi (2021) who emphasized the importance of the relationship between the researcher and participants in qualitative inquiry where knowledge is constructed through the researcher and participants, adopting a constructivist approach. Additionally, it allowed for thick descriptions which provide a detailed context that gives a clear picture of the conversations that took place during fieldwork. The focus was on the in-depth exploration rather than generalizing the findings to the larger sample. The intent was to give an in-depth exploration of the participants.

Whilst the adequate sample size might be debatable, the number of participants in this study was mainly dependent on the problem that was studied. A larger sample would have not allowed enough in-depth exploration. The selected sample proved robust enough to address the research aims as data saturation was achieved at early stages as new data stopped emerging. Rich qualitative findings had already emerged and therefore there was no need to expand the sample beyond 18. Hennink and Kaiser (2022) explain that data/ thematic saturation is a common guiding principle for assessing the adequacy of samples in qualitative research. This is reached when no additional issues or insights are identified and data begin to repeat.

3.5.1 Participants' profile

All participants for this study were black women from a working-class background. The table below details their age, highest level of education and occupation.

Age	Highest Level of Education	Occupation
26	Honours Degree	Social Worker/ part-time Masters student (Population Studies)
30	Matric	Housekeeper
22	Matric	EPWP ¹³ worker/ part time Bachelor of Education student
21	Matric	University Student (Bachelor of Social Science)
35	Diploma	Self-employed
25	Degree	High School Educator
22	Matric	Student (Early Childhood Development)
24	Diploma	Office Administrator
34	Matric	Traditional Healer
21	Matric	University Student (Bachelor of Social Science)
30	Matric	EPWP worker
28	Matric	General worker at local clinic/ Part-time university student (Bachelor of Commerce)

¹³ Extended Public Works Programme (EPWP) is a government initiative aimed at creating job opportunities and providing poverty relief through providing temporary work for unemployed youth (www.gov.za).

20	Matric	University Student (Bachelor of Science: Biology final year)
28	Matric	Student (Bachelor of Education)
34	Matric	Domestic worker
35	Diploma	Self-employed cook (manages a group of women who cook at a local school)
28	Diploma	Enrolled nurse
27	Degree	Unemployed

3.6 Data collection

Data for the study were collected through focus groups and individual interviews. A total of three focus group discussions and nine individual interviews were conducted. The focus group discussions consisted of four to seven participants. Focus groups helped facilitate group discussion to identify perceptions, thoughts, and impressions of the group. (See Kairuz, et al., 2007). They also helped elaborate the participant's perspective and gather participants in a supportive environment as scheduled. Through focus group discussions, I gained in-depth reflections from the participants. I initially planned to use semi-structured interviews, considering how they effectively get people to talk about their feelings, opinions, and experiences (Nyumba et al., 2018).

Vicsek (2007) also notes this and maintains that focus groups create a safer space for participants to discuss personal problems and issues as barriers can be potentially resolved. In addition, social scientists emphasise that this is a flexible method for exploring attitudes, experiences, and responses of non-random samples of people who fit a specific profile (Soafer, 2002). In conducting focus group discussions, I aimed to create a safer space for the participants. The assumption was that it would be easier for them to talk when surrounded by peers who practice the same habits. This worked to my advantage as participants would share their experiences and agree with each other. When one participant would be scared to share their experience in detail, peers supported them and assisted them in explaining further.

The focus group discussions were conducted at venues determined by the participants. These included one of the participant's homes, where we gathered in a room and the KwaDabeka Community Health Centre, where some of the participants worked. We would meet at the canteen, where I would be invited to come just after lunch, given that other employees had resumed work and the space was safe. During our discussions, I was intrigued by how the participants would lock the door and close the windows. They explained that they found the discussions sensitive information which had to be kept secret. At the Community Health centre, one participant disguised me as an expert from the health department so that fellow employees would not frown at my presence. I established a conducive environment and established a good rapport with the participants. Hence, the power dynamics were neutralised by allowing the inclusion of their agency in deciding how the discussions were to be achieved (Vicsek, 2007). This conducive atmosphere contributed to the richness and quality of group data collected.

Individual face-to-face interviews were conducted to complement information from focus group discussions without the drawbacks of group discussion dynamics. The interviews were appropriate for capturing the participants' experiences, perspectives, and attitudes. They also enabled me to read the participants' non-verbal language, which was useful for analysing their statements. Participants were free to seek clarity in cases where the questions were unclear. I could carefully capture the responses and probe further to encourage an elaboration.

As mentioned above, before data collection, I had initially prepared an interview schedule with open-ended questions for the focus group and individual interviews. I had envisaged using the same schedule for both FDGs and individual interviews. I assumed that following the semi-structured interview schedule and using open-ended research questions was vital given the qualitative nature of the study and how it allows for a multiplicity of emerging findings. (Tuli, 2010). Whilst Gill et al. (2008, p. 291) encourage the use of semi-structured interviews consisting of key questions that allow for face-to-face interaction with the participants, the method proved not to work very early into the data collection process as the questions in the interview schedule were not structured in a manner that allowed the conversation to flow freely. At the initial stages of the first focus group session, there were many pauses as I was trying to re-arrange the questions to make sense of the conversation. The interview schedule was, however, helpful in guiding the conversation to fit with the key research questions, but I had to reconsider the structure. This was because some of the questions I planned to ask later in the

interview emerged quite early from the conversation. Therefore, I had to go with the flow of the conversation.

While I initially thought that the questions in the interview schedule were simple and easy to follow, with the first focus group, I had difficulties initiating a dialogue with my participants during data collection. Therefore, I had to employ a unique interviewing style for both the focus groups and individual interviews. I had to memorise the questions in my schedule and find ways of asking them differently so that the participants would be at ease. Ennis and Chen (2012) encourage memorising interview questions and acknowledge it as crucial for creating a relaxed, conversational atmosphere that encourages the participants to speak freely. This was the case in my situation. Memorising the questions helped me to become part of the conversation with ease. In doing so, I had to remain conscious of my role as a researcher and maintain subjectivity.

Memorising the questions made the interview process less structured. Instead of having a structured interview and reading from the schedule, I allowed the participants to lead the discussion and would ask follow-up questions where necessary. This allowed the discussions to follow a conversational style. Allowing the conversation to flow instead of only relying on the schedule was advantageous for the study as it enabled me to get rich and expansive data, which was more revealing than what I had asked in the interview schedule. This helped me create a partnership between myself as an interviewer who was eager to understand and the participants (interviewees) who possessed the information that I required.

I allowed the participants enough time to explain the phenomena and give thick descriptions. In turn, the participants received me and became more comfortable holding discussions. I allowed them to lead the conversation and acted as a facilitator. Swain and King (2022) recommend this interviewing method, which explains how it creates ease of communication and produces more naturalistic data with less performativity from both the researcher and the interlocutors. They further state that the interviews become less artificial as the researcher hardly distracts the participants by ceremoniously switching a recording device on and off. The difference with my study is that I kept the recording device on and made the participants aware that they were being recorded. However, I still allowed the conversation to flow. The disadvantage is that discussions ended up taking more time than initially scheduled. However, this also worked to my advantage as it provided richer data. Participants were not concerned

about the duration of our conversations. Instead, some thanked me at the end of our discussion, expressing how I made them feel at ease.

These natural conversations, as Bernard (2013) described, are not foreign to anthropological research and research/research in the social sciences. Prominent anthropologists such as Margaret Mead (1928) and Bronislow Malinowski (1922) also used them for collecting rich ethnographic data. Sociologists from the Chicago School also used them in the early 20th century. Recent qualitative studies also recommend this style for qualitative explorations in everyday natural settings. Swain and King (2022) recommend conversational-style interviews as a complementary data source. Going off script was a complementary source to enhance the data. It helped me study the participants' different personalities and deal with the surprising conditions I had not pre-conceived before data collection. My participants had freedom of expression in telling their stories.

3.6.1 Participants

Participants were recruited through a key informant who was a close friend as well as through social media. At the initial stages of the study, recruiting participants proved challenging since they were unwilling to engage as individuals. My key informant indicated that the participants he had referred me to preferred being interviewed as a group. A salient question posed by prospective participants was how I had established that they were using *ntsu*. Afterwards, they would try to dismiss or claim time constraints while others were annoyed courteously. However, one prospective participant who was willing introduced me to her other friends after that.

I also posted details of my study on social media as means for self-identification recruitment. These included WhatsApp and a women's group on Facebook. The use of Facebook as a recruitment tool for researchers has become popular in research because of the digital age technological advancement. Whitaker et al. (2017) consider Facebook as a useful recruitment tool which should be considered in research. The Facebook page where I posted is a platform where women often discuss issues of sexuality, I posted some information about the study, provided my contact details, and asked that anyone who is a user of *ntsu* and wishes to participate in the study could privately contact me, which some members of the group did. A participant responded via Facebook inbox and later introduced me to two more participants

willing to introduce me to their friends who were from the same area where the study was conducted.

Kim and Mattila (2011, p. 2) explain the role language plays in an individual's identity, expressing emotions, sharing feelings, telling stories, and conveying messages and knowledge. The inability to identify with other cultural groups may lead to negative consequences. Although my participants spoke isiZulu, a local language, they used codes and language only known to them to refer to certain things. I quickly familiarised myself with such and learned the meaning of those words, facilitating building rapport. Interviews were recorded in isiZulu, a local language, and later transcribed and translated into English. In a few instances where permission was not provided, I took notes and posed the same question in many ways to ensure I captured the correct responses. I also observed certain behaviours and instances and made notes of my observations. These were used where necessary in the analysis.

I would begin the interview process with informal conversations and encourage participants to relax and enjoy the conversation. In instances where they asked me questions, I would respond. The participants' questions were mainly about Anthropology as a discipline and my reasons for pursuing a PhD. Most participants were also keen to know about my dating life. I did not find anything uncomfortable with the questions; therefore, I responded. I also noted how doing so made our conversation easier as the participants learnt a few facts about me. I reassured them that there were no right or wrong answers and that every opinion was valid and ensured that I did not judge them for their responses.

I informed them about the value of the information they provided. I sometimes used non-verbal methods of reassurance, such as smiling and nodding and verbal methods, such as saying *mhmm* and *yebo* (yes) and other common expressions to indicate that I was following the conversation. In some, I would repeat the participants' responses to them to validate my understanding of their responses and show them that I was still following the conversation. I used this to validate my participants, which worked in my favour as they would agree or explain further. They also quickly warmed up to my welcoming personality.

In addition, establishing good research relationships allowed me access to the participants' personal stories (DiCicco-Bloom & Cabtree, 2006). Empathy and rapport are essential if participants disclose information to interviewers, which is progressive over time (Partington, 2001). Rapport involves trust and respect for the participant and the information shared. It also means establishing a safe environment for sharing, as some participants suggested a change in

location from the township and preferred a venue in town for the individual interviews since they felt safer and spared of any questions that would arise from their families and neighbours about who I was and why they were conversing with me.

3.7 Data analysis

The study used the thematic approach in analysing the data following qualitative methods (Attride-Stirling, 2001, p. 389). The development of themes is a common feature of qualitative data analysis, which involves a systematic search for patterns to generate full descriptions of the phenomenon under investigation (Gale et al., 2013, p. 1473). Alhojailan (2012, p. 40) asserts that thematic analysis is considered the most appropriate for any study that seeks to discover using interpretations and allows understanding of the potential of any issue more widely. The thematic analysis approach moves beyond counting explicit words or phrases to describing implicit and explicit ideas by coding, categorising, and noting patterns.

This form of analysis allowed me to link the various concepts and opinions of the participants and compare them with the view of placing them into manageable, meaningful text segments using a coding framework. The key research questions guided the themes. I, therefore, had first to clean the data accordingly. Data irrelevant to the research questions was kept aside for probable future use. Coding assisted in identifying the patterns that had started to emerge.

I manually coded since interviews and focus groups were recorded verbatim in isiZulu and later transcribed and translated into English. I also made notes in isiZulu and English, which had to be translated. I familiarised myself with the data by listening to the recorded interviews several times. Before arranging the data into themes, I compared it to the transcripts and my notes. As Gale et al. (2013) emphasise, I had to listen carefully to the tape recordings to ensure that everything was captured, thus becoming familiar with the interview using the audio recording and transcript and any contextual or reflective notes recorded during the data collection process. After transcribing and familiarisation, I labelled and coded the narratives and categorised them into themes.

During the data analysis process, I maintained an emic perspective so that I placed aside prior assumptions and allowed data to speak for itself as themes and patterns emerged. This is consistent with Lett's (1990, p. 130) suggestion that the strength of the emic approach lies in its appreciation of the particularity of the context being studied, with respect to local viewpoints and the potential to uncover unexpected findings.

Denzin and Lincoln (2000) detail the importance of the researcher working within the interpretivist paradigm to negotiate objectivity and sustainability of the account of reality. Gergen (1994) offers that an account of the world or self is sustained across time not by its objective validity but by the vicissitudes of its social processes. In the study, the interaction processes between the researcher and the researched were negotiated with full cognisance that the study is an interactive process shaped by my bearing (Flick, 2019). Since I was to some extent personally familiar with the subject environment being studied, I strove to be non-reactive to achieve analytical distance and used bracketing, thus distancing my experiential judgment and beliefs to avoid bias (Roberts & Priest, 2006; Golashfani, 2003). However, I remained conscious of the limits a qualitative researcher works with and hence cannot claim absolute objectivity.

3.8 Validity and reliability

Validity and reliability are vital aspects of any research (Noble & Smith, 2015). Both validity and reliability work to demonstrate and communicate the rigour of research processes and the trustworthiness of research findings. Whereas reliability describes how far a specific test, procedure, or tool will produce replicable results in different circumstances, assuming nothing else has changed, validity is a subtler concept relating to the closeness of what we believe we are measuring to what we intend to measure (Roberts et al., 2006, p. 41). Validity in research is concerned with the accuracy and truthfulness of scientific findings (Whiffin et al., 2014). Reliability is more concerned with the consistency, stability, and repeatability or recurrence of the informant's accounts and the investigator's ability to collect and record information accurately (Brink, 1993).

Qualitative validity is based on determining whether the findings are accurate from the standpoint of the researcher, the participants, or the readers (Creswell, 2009, p. 190). For qualitative researchers, reliability can be considered the trustworthiness of the procedures and data generated. Trustworthiness or reliability is concerned with the extent to which the results of a study or measure are repeatable in different circumstances (Roberts et al., 2006). In the study, triangulation was used to cross-validate data shared by the participants. According to Shenton (2004, p. 65), triangulation may involve different methods, especially observation, focus groups and individual interviews, which form the major data collection strategies for most qualitative research. In the study, data from the interviews (both from focus groups and individuals) and observations were triangulated. Through triangulation, individual viewpoints

and experiences were verified against others, and the process continued until saturation had been reached. The same data collection instruments were used in FDGs and individual interviews in order to validate the data collected.

3.9 Ethical considerations

To ensure academic integrity for the study, the researcher followed the stipulated ethical procedures dictated by the School of Social Sciences. Approval was obtained from the College of Humanities and the Social Sciences Higher Degrees Ethics Committee of the University of KwaZulu-Natal (UKZN) with HSS/1512/015D as reference. The ethical considerations adhered to included observing the need for informed consent confidentiality, reducing the risk of unanticipated harm, reducing the risk of participant exploitation, anonymity, and voluntary participation.

Participants' consent was acquired before conducting interviews and focus groups. Information supplied was recorded upon consent and permission of the participants. Moreover, the participants were also informed of their voluntary participation and their right to withdraw at any point without consequences. All the participants were treated with respect, and their real names were not revealed in the study as a way to conceal their identities. Participants were informed that no financial compensation would be provided for participating in the study. However, as a Zulu woman guided by *ubuntu* social ethics, I ensured to provide refreshments for the participants so they would not go hungry.

3.10 My experience

In research, there is always an expectation of unanticipated challenges (Anderson, 2010). The study was no exception in this regard. I thought securing would-be participants would not be a problem since I am a woman and thus anticipated hassle-free access to interview other women. This illusion, on my part, derived partly from the fact that I am at the same age group as the young women participants targeted and from the fact that I am from one of the townships in Durban and speak isiZulu just like the participants. This was an oversight and lack of proper planning on my side. I had envisaged that gaining access would be an easy thing.

Contrary to my anticipation, gaining rapport with the targeted participants was challenging. Some women suspected that I was either a spy sent by their boyfriends or a journalist, and a few were hostile to me as I tried to initiate an engagement relating to my request for

participation in the study. Some of the women on the Facebook group questioned my credibility. This was after an incident where a particular journalist who disguised himself as a group member had published a story based on some of the conversations held with the group. However, this limitation was overcome by re-assessing my entry strategy to the site and my approach to accessing the target participants. Having been failed by my inflated confidence in breaking through my age mates and fellow young women, I decided to use an indirect entry method. This was when the idea of approaching the *spaza* shopkeeper who sells *ntsu* occurred to me, and certainly, this newly adopted approach paid off. I found myself having to guard against my assumptions of normality constantly. I reassured the participants of my identity by produced proof of university registration and a written consent form with the details of my supervisor (s) for them to sign. I also showed them a copy of the ethics letter and constantly assured them that I was not a journalist. I could not conduct any interviews during the first few days of contact with participants. Instead, I would have informal conversations with the participants so they could get to know me and be assured of my identity. This helped develop rapport.

My experience was quite similar to what is outlined by Gune and Manuel (2011, p. 42) as a young woman researching and studying the relationship between culture and women's sexuality. Like Manuel, I noticed that the topic was loaded with prejudice since openly discussing sex and sexuality is taboo. Within my (Zulu) networks of friends and acquaintances, my choice of study was linked to the idea of being hypersexual. Researching sexually related matters became a challenge as most participants felt embarrassed at the beginning. This was because sexual practices are known always to involve a degree of privacy (David, 1987, p. 4). In the context of the community and the Zulu culture, women are perceived as "subservient, docile, fragile and are required to hide their sexual desires and have to wait for men to initiate romantic or sexual relationships" (Gune and Manuel, 2011).

My choice to conduct a study on the use of snuff/*ntsu* as a vaginal sexual stimulant to question the cultural connotations attached to the woman's vagina and the sexual socialisation which exists in the Zulu culture gave some a perception that I was different from their perspective of a decent woman. This worked to my advantage as the participants were happy that I did not judge them, but I was interested in knowing more about them. This helped build rapport, and I was called *sisi we-ntsu* (a woman who researches *ntsu*/snuff). This did not bother me as the participants used it playfully to refer to my study.

Learning the participants' jargon assisted in gaining more access as this impressed them. They would use metaphors and sometimes mix them with some English words since some words are known to be derogatory in IsiZulu. The use of metaphors showed how sex remains a taboo subject within their community, whilst the use of English words demonstrated how the language of Western colonialists has dominated the discourses about sexuality. Some isiZulu words used as euphemisms have a different meaning when translated into English; therefore, I had to recognise the need to understand the intercultural meaning of the word before translating it into English.

According to Ntuli (2002, p. 54), "language represents a specific worldview and ontology, " so I had to ensure I presented the narratives through the participants voices and language. For example, the word *ushukela* would mean sugar when directly translated into English. In contrast, the participants have metaphorically used it to refer to their vaginas as something that is 'nice, attractive, and desirable. Another word is *inkomo*, which means 'cow' in English, but when translated from the participants' perspective, it implies the isiZulu euphemism for the vagina. The euphemism is derived from the eleventh lobola cow, which is known as the "mothers' cow" (*inkomo kamama*), as well as the word *ikhekhe*, which means cake in English here again, when translated from the participants' perspectives it metaphorically refers to the woman's vagina as something exciting and usually crucial for celebration.

The limitations on the use of language are also highlighted by Gune and Manuel (2011). They assert that the use of language poses concerning limitations to researchers of African sexualities who have to collect data in their local languages and present their findings in the language of the academy (English) as some of the rich cultural connotations are lost in translation. The study was sent to an isiZulu-speaking language editor who could edit with an understanding of the deep cultural meaning of the narratives. The study, therefore, contributes to the body of knowledge by presenting fieldwork data and analysis but also contributes to the understanding of the isiZulu language and by presenting how euphemisms refer to the woman's vagina. This contribution to indigenous knowledge is central to the current debates about decolonisation in higher education. Presenting some of the narratives in isiZulu preserved the meaning and demonstrated the importance of using African languages when conducting research on Africans.

Another big challenge was when a group of women asked me to try smoking snuff, and I had to explain to them the reasons why I could not do it. Some felt judged by my response, and I

was also made to feel uneasy with them initially because of that awkward moment. However, I had to overcome the difficulty by trying to convince them that I was only being myself and not judgmental. It paid off as I managed to win their trust eventually. When others incidentally found out that I am a Christian, they tended to be withdrawn from the study and a little suspicious of my moral umpiring. However, this was momentary as the discussions and conversations in which the others warmly engaged eventually warmed us up to each other.

3.12 Conclusion

This chapter has described the research design, including the methodological approaches used to gather data for the study. It provides a detailed discussion of justifications for how the study proceeded. The challenges encountered while conducting the research were also examined and discussed.

CHAPTER 4

ZULU WOMEN'S KNOWLEDGE OF THEIR BODIES, SEX, AND SEXUAL PLEASURE THROUGH SOCIALISATION

4.1 Introduction

This chapter addresses the first research question on the socialisation that Zulu women receive about their bodies, sex, and sexual pleasure. The chapter adopts from Spanier's (1977, p. 87) seminal definition of socialisation as the process by which humans acquire knowledge, skills and dispositions that make them more able members of society and considers the term "sexualisation" as referring to sexual socialisation which will be used synonymously or interchangeably in the chapter.

The understanding is that sexualisation occurs in distinct phases, including the development of gender roles, the development of gender identity, acquiring sexual skills, knowledge and values and the development of sexual attitudes. It seeks to understand the sources from which young Zulu women receive sexual socialisation and how they are taught to perceive and manage their bodies. The data from narratives demonstrate that participants are socialised by a myriad of factors including the family whereby female figures, especially the grandmother, play a dominant role. The second one is the school environment whereby socialisation is received through subjects such as life sciences (biology) and life orientation. Thirdly, initiation schools and lastly, religion. All these spaces influence what is considered acceptable behavioural norms for young women.

4.2 Intergenerational knowledge

In Africa, old age is a social category experienced by other generations, especially the youth. The elders are traditionally assigned to upbringing, educating, and disciplining the younger generation (Michel et al., 2019). In particular, Masuku (2005) refers to hidden proverbs and idioms which reflect the philosophy of life for the Zulu people. The isiZulu proverb, *indlela ibuzwa kwabaphambili* (wisdom is sought from the elders), exemplifies how culture encourages intergenerational learning and knowledge. Another idiom relevant to this is *inkunzi isematholeni* (how a calf is raised will determine the kind of bull it will become). This indicates

that socialisation by the elders is essential in shaping young people. This indicates the sense of responsibility that the older generation has for teaching, the younger generation.

The narratives from participants depicted this intergenerational passing of knowledge in sexualisation. They discussed explicitly the role of the grandmother, who passes knowledge to the younger generation. In the absence of the grandmother, knowledge is sought from other older matriarchal figures who are more experienced and, therefore, deemed suitable to mentor the young women.

4.2.1 Grandmothers as custodians of knowledge

In the Zulu culture, old age is associated with attaining new roles. The foremost is grandparenthood. Old women assume particular importance in events, including childbirth and teaching the younger generations about the beliefs and customs of the clan (Cattel, 1997). Women are perceived as natural life-givers who have a task to preserve society. They are expected to enter the marriage journey and produce children for their husband's family. Through their children, they later become grandmothers and thus achieve the status of the queen of *umuzi* (household) (Gumede, 2002). Zulu women are viewed as custodians of culture who must transmit ethnic identity to the young. This exercise of guarding culture is an essential responsibility (Magwaza, 2011).

Writing from a Xhosa¹⁴ perspective, Magoqwana's (2018) article, *Repositioning UMakhulu as an Institution of Knowledge*, argues that we need to historicise the grandmother and recognise elderly women's bodies as institutions of indigenous knowledge, dissemination, and storage in precolonial and contemporary societies. She further argues for the need to position the grandmother as an institution that shapes spiritual awareness in African households and that the grandmother forms the centre of "what we know and how we know in many African households and directly contributes to the epistemic foundations of knowledge with spirituality as part of knowing in her institution" (p. 79). She also states that biologism causes us to ignore the role and significance of the grandmother as an institution of knowledge, as she has been positioned as an unproductive body. These are further validated in the narratives of the participants.

¹⁴ Xhosa forms part of Nguni languages, which includes, Zulu, Swati, and Ndebele. Practices may differ but there are notable commonalities between individuals who speak these languages.

To understand how participants experienced socialisation, I requested that they reflect on their journey growing up as young girls. During the focus group discussions, it became apparent that their grandmothers played a significant role in grooming them through the various stages, from *ubujongosi* to *ubutshitshi*. They recalled how their grandmothers taught them how to manage themselves as *amatshithi* (young maidens). It became clear that *ugogo* (the grandmother) has a symbolic and sacred meaning in the family. She holds a certain level of importance, especially when a girl child reaches puberty. As participants discussed their grandmothers, the ambience in the room changed. They appeared more pensive, with some who were reminded of their deceased grandmothers and wished they were still alive because of their role in their lives. The participants explained this further:

- ❖ *Gogo becomes your equal as a child because you can talk to her about anything. You will not be unable to go to your mother and tell her that a guy is coming to your house to see you. You will speak to uGogo if she is alive.*
- ❖ *Ngoba usephenduke ingane (she has become like a child again.)*
- ❖ *She ends up being friends with her granddaughter.*
- ❖ *Unlike others, ugogo is calm. Akasathethi (she no longer shouts at us).*

The participants stated that with age, the grandmother becomes more friendly than her parents, making discussing matters easier. Even when one begins menstruation, they feel comfortable informing the grandmother, who then advises them on what to do. Therefore, participants viewed the grandmother as a custodian of knowledge. She was compared to *inqolobane*, a repository of indigenous knowledge. Within the Zulu culture, *inqolobane* (a barn) was vital as it helped preserve food such as mealies in preparation for famine so that families would not experience hunger. The likening of *ugogo* to such presents her as a preserver/custodian of indigenous knowledge who, even in the present day when several things have been changed by westernisation and modernisation, remains as someone who knows the customs, beliefs and keeps the secrets of a household.

The role is also extended from when a child is born as she grooms the young mother to take care of the child. When the child grows, the grandmother becomes responsible for babysitting and sometimes tells folklore. This is due to the knowledge and experience she has acquired with age. Being the older person in the family, she understands better the culture and customs of the family/clan. She also no longer possesses the energy and passion for shouting as her

strength is worn out by old age. She is more peaceful, which makes it easier for young girls to communicate with her and discuss anything which bothers them. At old age, *ugogo* also becomes forgetful as she gets attacked by different illnesses which require her to be cared for like a child (*ingane*), as one participant compared her. She carries wisdom and knowledge about the clan but is also gentle, friendly, and kind like a child. This enables young women to relate better with her than anyone else in the household. This is revealed in the following remarks:

- ❖ *Since she is the grandmother, she is older and has more knowledge, and she is closer to abantu abadala (ancestors), i is more like idlozi eliphilayo (a living ancestor).*
- ❖ *Gogo has more knowledge.*

The comparison of *ugogo* to *idlozi eliphilayo* (a living ancestor) depicts her as more spiritually inclined to *amadlozi* (ancestors). Ngubane (1984, p. 57) defines *idlozi* as “the dead, who according to Zulu cosmology, maintain a close intimate relationship and in association with the living, especially their survivors”. According to Nel (2007), *amadlozi* (plural of *idlozi*) are also called shades, those elders of the family/clan with a significant emotional attachment. These definitions explain how the participants viewed the grandmother as someone who is connected to both worlds, that one of the living and the dead, as she has survived a long time on earth but is also closer to death and transitioning to the world of *amadlozi/abaphansi* (the subterranean) who abide in proximity to the living on whom they, though invisible, exercise their influence and power (Ngubane, 1984). Due to her spiritual connection, *ugogo* is perceived as a prayer worrier:

- ❖ *Whenever something terrible happens in the household, you will either see her walking around the house, reporting the matter to the ancestors (ukuthemeleza) or praying like a mad woman.*
- ❖ *Sometimes, I would wake up at night and hear gogo praying, calling us all by names. She prays for everyone in the house with so much passion. In some other instances she prays to the ancestors (ukuphahla) or just walks around the house shouting and explaining matters to them (ukuthemeleza).*

To explain this, participants referred me to a song titled *Ugogo* by a South African hip-hop sensation, Sjava, from Bergville, KZN. Below is an excerpt from the lyrics:

Dankie Mdali for ukungigcinela ugogo (Lord, I thank you for keeping my grandmother)

Mhlampe'mhlabeni ngabe angsekho ma (Maybe I would have been dead)

Kubak'yona imthandazo yakho (If it weren't for my grandmother's prayers)

Njengoba ngphumelela izibusiso zakho (I owe my success to your blessings (referring to *ugogo*))

Gogo lang'khona kugcwele amadimoni (The place I am in is surrounded by demons)

Kugcwele izilingo (And temptations)

Ngithandazise ngingabi umoni (Pray for me that I may not sin)

Ngingalingeki (That I may not be tempted)

Ngingadideki (That I may not be confused)

According to participants, *ugogo* also provides spiritual guidance and advises young maidens to *hlambulula* (cleanse) themselves in cases where premarital sex has been committed. The participants believed that sex has a spiritual meaning. Therefore, if someone makes the mistake of engaging in sex before marriage, they will have to consult a traditional healer for cleaning to wash away the bad aura that the partner might have brought and to preserve their *izinhlanhla* (good luck).

When the girlchild enters the puberty stage, *ugogo* then teaches her about *ukuziphatha* (managing her body as a young maiden:

- ❖ *Like when you go on your periods you can tell Gogo and she will say, "khipha isdwedwe ushutheke" (use a cloth to absorb the menstrual fluid).*
- ❖ *Or you can say, "Gogo ngilimele la ngaphansi" (my vagina is bleeding).*
- ❖ *And then you tell her that you are on your periods. She then tells you what you should do, what you should not do or avoid.*
- ❖ *Ugogo will also advise on the proper diet suitable for a young woman's body, she will tell you what to eat, when, how and why.¹⁵*

Participants also highlighted how they found it easier to talk to their grandmothers about relationship matters as they were more understanding compared with their parents.

¹⁵ This will be further discussed on the chapter about vaginal practices.

Grandmothers would then advise young women on practising safe sex. Within this context, safe sex referred to that which provided a certain amount of pleasure without breaking the girl's virginity. Grandmothers did not prevent their grandchildren from satisfying their sexual urges:

- ❖ *Gogo would tell you that because you have a boyfriend, phothanisa amathanga umfana afake la [points in between the thighs], cross your thighs and let him penetrate in between.*¹⁶

The narratives from participants were consistent with some of the literature about Zulu families, which depicts grandparents, especially the grandmother, as an educator to her grandchildren. Brindley's (1982) work on the role of old women in the childbirth process within the Zulu culture shows how *ugogo*'s critical role in the acculturation of a society begins from an early stage when the child is born. Seminal work by Vilakazi (1962) also depicts grandmothers as significant socialisers of their granddaughters through the indigenous system of *imfundiso* (socialisation), whereby the younger women are socialised about *ukuziphatha* (expected behaviour). This is consistent with the work of Brindley (1982), who emphasises the significant role of the grandmother in socialising younger generations about the expected/acceptable behavioural norms. Cattell (1997) also noted this relationship between younger Zulu women and their grandmothers.

The role of the grandmother is well respected as they are seen as necessary in their families and the community. Michel et al. (2019) state grandmothers share indigenous knowledge and skills. Sometimes, they act as herbalists, home comforters, faith champions, family advisors. They are viewed as peacekeepers, problem solvers, promoters of harmony and respect and the teachers of the young, particularly granddaughters. Grandsons are often left to learn from their grandfathers. This division of the roles that people enact in the socialisation of children is an example of how gender stereotypes are still maintained in societies. Such stereotypes are internalised by men and women who often perceive themselves according to these gender-stereotyped attributes (Hentschel et al., 2019). This further reinforces the societal expectations about masculinity and femininity.

¹⁶ This will be discussed in detail in the section on initiation schools.

4.3 Lack of mother-daughter communication about sexuality

Contrary to Markham et al. (2009), who stated that apart from grandmothers, parents and caregivers play an influential and substantial role in the socialisation of children during the early years of the development of gender identity, the participants in the study revealed that direct parental involvement in the sexual socialisation was almost nonexistent. Participants reported minimal discussions with their mothers. Fathers were absent from discussions about sexually related matters with their daughters. The participants were clear on how they preferred discussing sexuality with other female family members instead of their mothers. Mothers were described as strict and unwilling to have such discussions with their daughters. In cases where they would offer some advice, it would be vague/indirect and confusing. This presents a lack of parent-child communication about SRH. The following remarks indicate a lack of open communication about sexuality:

- ❖ *Umama unomthetho (a mother is strict), she cannot sit you down and tell you that for you to fall pregnant, this is what needs to happen in your body as well as the man's body. She will just tell you that if you are seen walking with a boy, you will fall pregnant. She does not give details/explain. We grew up knowing that if you go anywhere near a boy, you will fall pregnant.*
- ❖ *It is easier to talk to someone who is not a parent/did not give birth to you. So, it is aunties and grandmothers who are easier to talk to.*
- ❖ *My mother told me that boys will impregnate me. There is nothing else substantial that she told me. I also could not ask her anything because I did not want to appear disrespectful.*

Not only were participants unable to discuss sexually related matters with their mothers, but they also feared telling them about the changes which were occurring in their bodies because of the onset of puberty.

- ❖ *I could not openly talk to my mom. Such would have appeared as disrespect. Even when puberty kicked in, I could not tell her that I had started my periods. What surprised me is that she would talk to my elder siblings who already had kids but even in such instances, she was not direct. She spoke in codes. I would listen and try to extract advice. When I started my periods, I hid my blood-stained pants in the bathroom so that nobody could see them. It was only when they were cleaning that they realised that my*

pants had blood stains. That is how everyone at home, including my mom, found out that I had started my periods.

- ❖ *My mom [sighs and takes an exceptionally long pause, appearing to be in deep thoughts], my mom, what can I say? I blame it on myself. I think again, I must blame it on society. There were so many things that my mom was not comfortable with, especially when it came to mentioning things such as pads and bodily changes. She did not create that space. It was pretty difficult for me to go to my mother; it was as if she was ashamed of such topics. I then decided to confide in one of the aunts, I was surprised at how this aunt would comfortably talk about everything and would always seek advice from her. What surprised me the most was when she told me that she found it difficult to discuss the same topics with her own daughter.*
- ❖ *Nobody ever told me anything, it just happened-nobody prepared me. For instance, my friend had her first period when we were at school, so I saw. It was weird for me to go home and tell my mother that my friend was menstruating. I would have been perceived in another manner. So, it was something I knew but could not discuss.*
- ❖ *It is easier for them [mothers] to discuss these things with other people compared to their daughters. They feel ashamed, they also assume that we will see them as these 'naughty, dirty people' and lose respect for them.*

This absence of mother-daughter communication about sexuality and reproductive health is evident. Studies encourage mother-daughter communication about sex to minimise sexual risk and make informed and responsible choices. Such discussions could also create a keen sense of connection between daughters and their mothers whilst giving a keen sense of self and sexuality to the daughters (Dennis & Wood, 2012; Afifi et al., 2008).

Unlike grandmothers and other family members, mothers barely initiate conversations about sex/boyfriends and, therefore, make it hard for their daughters to hold discussions with them. When discussions occur, the tone of the conversation is authoritative. Mothers usually shout/scream at their daughters. Communication is unidirectional and takes the form of a lecture rather than a discussion:

- ❖ *As a child, I was not allowed to ask my mother about boys and sex. It would have been perceived as disrespect. I could not question anything she said about them. When she told me that boys will give me a child, I could not ask her how. I would have been*

perceived as a disrespectful child. You do not answer back when an elderly person is talking. Ukungahloniphi lokho (that is disrespect). It is against our culture.

- ❖ *Mothers would suspect when we have boyfriends, but it is not something about which they would directly talk. Even if there was some talking, it would be more like a lecture, not conversation. By daring to ask questions or add comments, one gets viewed as disrespectful.*
- ❖ *As a child we were not allowed to ask questions, if you questioned anything you would be regarded as disrespectful (uyaphendula) and would be punished for such.*

Daughters are not allowed to ask questions. The absence of mother-daughter conversations about sex is attributed to the *hlonipha* (respect), as mentioned. It is regarded as disrespect since sex is perceived as private and should be reserved for marriage. This is consistent with Bastien et al. (2011, p. 2), who asserted that open discussions about sex are discouraged in most African contexts because sex is considered a “sacred adult affair that is enshrined in secrecy”. The lack of communication among black South African families is attributed to the fact that overt sexual talk is perceived as inappropriate and, therefore, impermissible (Kajula et al., 2016). Mabunda and Madiba (2017) report that in most South African localities, mothers perceive sex discussions as causing children to become curious about sexual desires. Instead of direct speech, sexual communication is done using local referents; extended family members would be enlisted (Kajula et al., 2016). In cases where black mothers talk with their daughters about sex, the impetus is on external issues such as the onset of puberty, suspicion of a boyfriend, suspicion of a daughter’s sexual activity or pregnancy of a relative or friend (Dennis & Wood, 2012).

The content is mainly based on the consequences of sex and encourages abstinence. Participants reported that the messages were either indirect instead of engaged conversations, one-way communication that hardly made sense but instead left more questions than answers, random, externally prompted comments, negative messages and warnings to ensure deterrence from sex. Sex is only described through negative consequences. Topics primarily focused on unplanned pregnancies, whilst contraception and sexual pleasure were hardly discussed:

- ❖ *When I started menstruating, I was told not to play with boys- I was told not to go near boys ngoba abafana bazongipha ingane (boys would impregnate me).*

- ❖ *When I began my periods, I was told not to play with boys. Nobody ever explained the reasons for this. I could not ask any questions as such would be regarded as disrespect. Communication was unidirectional, the elders would tell us what to do but we were not allowed to seek for relevant reasons.*

Studies recommend parental involvement in guiding adolescents in making responsible decisions about sex (Mpondo et al., 2018; Phetla et al., 2008). However, the narratives from participants demonstrate a lack of such understanding from mothers. There is a need to address the existing cultural stereotypes about sex, given the potential of some messages conveyed to be misleading. The narratives presented depict that message from mothers convey that immediately when a girl has sex, she will fall pregnant. This has been problematised by Wamoyi et al. (2010), who argued that such messages can be interpreted as misleading for girls who have never engaged in sexual activities and have not had their first period. If they had sex and did not get pregnant, they would be likely to get confused and think they are infertile. This could be problematic within African societies where children are valued. The girls may even engage in sex with different men to see if they are fertile, and such experiments could result in HIV/AIDS infections and other STIs. The absence of reproductive communication in the South African context is evident in the increased adolescent pregnancy rates. Some adolescent girls and young women become pregnant to prove their maturity or identity as women (Mchunu et al., 2012). Early pregnancy and motherhood continue to be a risk, and at least 688 girls aged 10 years were reported pregnant during the outbreak of the COVID-19 pandemic (Medical Brief, 2021).

4.4 School as a space for information

According to Mpondo et al. (2018), formal sexual health education has a positive impact on the reproductive health of adolescents. It may lead to delayed sexual debut and a lower number of sexual partners. Lam et al. (2011) affirm that most adolescents become sexually active by the age of 18, which infers that they become sexually active whilst at school. Teachers and peers impact young people's schooling experience and how those relate to subsequent transitions to adulthood. Most participants in the study became sexually active at the age of 16, with a few deciding to wait until they were 21¹⁷.

¹⁷ The significance of waiting until the age of 21 will be discussed in the section about initiation schools.

They intimated that they received varying forms of sexualisation from school. Although teachers discussed SRH, the testimonies from participants indicated that the core messages conveyed focused on deterrence through abstinence, which was with teachers prescribing sex for reproductive purposes only. Conversations about sexual pleasure and safe sex practices were taboo.

The following revealed what teachers talked about instead:

- ❖ *Some of the things we know about what one should do during periods and about boys were discussed during Life Orientation (LO) teachers would tell us how to look after our bodies once we reach puberty stage, they would tell us about menstruation and the importance of avoiding boys so we would not fall pregnant. Teachers would discourage us from having sex before marriage or at an early age and associated sex with pregnancy and HIV/AIDS.*
- ❖ *LO teachers would tell us how to look after our bodies. The main message was the same as what our mothers told us, we had to stay away from boys and not have sex. I do not know whether this was because the majority of my teachers were female. They were also immensely grown. They did not go in depth. Sex will make you pregnant, that was the message. They were shy to talk about condom use. They felt we were too young to engage in sexual activity. The only time they would mention condoms was in relation to HIV/AIDS.*
- ❖ *They did not even want us to have boyfriends, they would investigate and call out all those who had boyfriends and punish them in front of everyone. I think this was done as a lesson for those who considered having boyfriends. Girls were encouraged to maintain personal hygiene and stay away from boys. Sex will make you pregnant, as a girl you had to preserve your body for your future husband, which is all we were taught.*
- ❖ *My LO teacher was a born-again Christian. Imagine being taught LO by a born-again Christian, the whole lesson felt like bible studies, Jesus this, Jesus that. Everything that had to do with sexuality was linked to Jesus and described as sin.*

The narratives demonstrate that although there was sexual education through LO¹⁸ and Life Sciences, the information provided does not adequately consider the needs and interests of young women/youth. It affirmed a negative definition of sexual health by failing to consider the issue of pleasure. Sex was only associated with disease (HIV/AIDS) and reproduction. The teaching practice is seemingly influenced by the teacher's cultural and religious perceptions; hence, they maintain a moralistic tone. This could be due to the taboo nature of sex conversations within the South African context.

Teachers perceive their role as restoring moral values under pressure from media, peers, and other influences. In doing this, they fail to see the young women as knowers and legitimate sexual subjects who can provide input to what is taught. Schools often neutralise gender and sexuality, desexualising learners and, in turn, creating false notions of innocence through silencing the topic of sex and sexuality (Shefer & Ngabaza, 2015). There is a prevalent child-adult binarism that assumes adults are authorities on sexuality (Shefer & Mcleod, 2015).

According to UNESCO (2012) and Ngabaza and Shefer (2015), it is evident that although sexual education forms part of the South African basic education syllabus, some themes, especially on sex and SRH, are not taught properly. Information about sexuality and sexual behaviour is addressed in a fear-based manner, sheds a negative light on these topics, and promotes an abstinence-only approach. Such approaches deprive learners of an understanding of desire and the pleasure that could come from sex. DePalma and Francis (2014) asserted that themes such as sexual diversity get less attention compared to other themes in sexual education. Possible reasons for such omission include lack of sufficient training for teachers in sexuality education, sexual diversity, and orientation; sexuality education is frowned upon by the community and, in many cases, their colleagues; teaching sexuality education contradicts their beliefs, traditions, and values thus they refuse to teach which in turn promotes heterosexist behaviour (Francis & Msibi, 2011).

¹⁸ LO was introduced as a learning area in South African schools in the late 1990s as part of the post 1994 shift to outcomes based education (OBE). It is comprised of diverse components; guidance, life skills, health promotion, physical development and movement, environmental education citizenship, human rights, and religion education (Lan et al., 2011). It was made compulsory for Grades R-9 in 2002 and for Grades 10-12 in 2006 (Diale, 2016).

Swanepoel and Beyers (2018) argue that teachers are smaller s within a larger supersystem of place and culture that play equally mediating roles. Space and culture create boundaries for sexuality education in schools. Background knowledge and culture of teachers, the religious underpinning of learners and teachers, and the contextual geographic space where the school is located are vital.

LO and life skills sexuality programs produce normative constructions of gender and gendered power relations. This is due to teacher's preference for abstinence-only education, which is taught by a series of moral injunctions and avoidance of sexual diversity. While sexuality education is directed towards gender equality and challenging inequalities that manifest in unsafe and coercive violent practices, what is taught and heard by young people may rationalise and reinforce discourses that make such possible (Shefer & Mcleod, 2015).

There is a dominance of a framework in childhood innocence that understands children as asexual and degendered (Bhana, 2015). Teachers take an abstinence-only approach and do not feel comfortable discussing sexuality topics with learners and assume that if learners are not exposed to this content, they will abstain from sex until marriage (DePalma & Francis, 2014). The National Curriculum Statement (NCS) and the Curriculum and Assessment Policy Statement (CAPS) (2015) for LO Grades 10-12 do not adequately cover sexuality.

Some issues remain unaddressed at schools due to teacher's reluctance and fear of exposing diverse opinions and endorsing or refuting specific religious and cultural values. While parents influence their children critically, they rarely provide the information that schools do (Shtarkshall et al., 2007). The sex education teachers provide is based chiefly on blaming and shaming youth about their sexual feelings instead of considering pertinent realities about adolescents' views of sex. Youth are 'often publicly referred to and constructed as children in need of protection, rather than a youth who have a right to information about their bodies and their sexuality' (Mitchell, 2018, p. 36). Talking about sex and sexuality with learners generates a great deal of anxiety for teachers who are afraid to encourage sexual activity or of parents accusing them of this. They assume it is inappropriate for them to talk about these things to learners (Jewkes, 2009).

Many teachers feel embarrassed and wish to keep a professional distance between themselves and the learners (Mukoma et al., 2009). While it was envisaged that sexuality education provided through LO would reduce teenage pregnancy (Panday et al., 2009), statistics have rapidly increased, and teenage pregnancy rates have been catastrophic (Jonas et al., 2016).

Between August 2020 to March 2021, at least 138 120 teenage girls fell pregnant, with 4053 being between the ages of 10 to 14 (Commission on Gender Equality, 2021). Data from Statistics South Africa (Stats SA) reveals that between March 2012 and April 2022, 9037 girls aged between 10 and 19 fell pregnant. More than 660 girls below 10 fell pregnant in 2020. This shows the inadequacy of LO in addressing SRH.

4.5 Peers and information sharing

Participants observed that although home and school instruct them to avoid boys and abstain from sexual behaviour, their peers influence their sexual behaviour differently. Peers easily understand how times have evolved and how being sexually active has become a norm today. For most of the participants, messages of abstinence until marriage became pointless during the adolescent stage. Although parents had exerted an important foundational role in their sexual socialisation, peers became more significant during this stage as they encouraged exploration and experimentation. It was, therefore, conducive communication as they valued the opinions of their peers more since following such was perceived as good for one's reputation.

Peers were also more open to discussions about condoms and contraceptives. This is consistent with Lefkowitz and Epinoso-Hernandez (2007), who asserted that peers influence an individual's beliefs, perceptions, and actions and are arguably more important in an adolescent's life as the most frequent source of sexual information. In adolescence, peer relationships become more essential. The content of parents' and teachers' advice was different for participants. Parents and teachers discouraged sexual activity, whereas peers shared more than that:

- ❖ *I remember in Grade 7, I had a friend who always had answers for everything, and she would tell me about sex and boys, so I received most of the information from friends when I was growing up.*
- ❖ *There was always that one girl who knew everything at school, iqhikiza. You know, the kind that will tell you about boys, sex, different sex positions, how to manage your first time and all those things. That one girl who is hated by teachers and judged by many for her sexual prowess, but we would secretly go to her for advice.*

- ❖ *Friends will tell you what to do if a guy approaches you, how to kiss, what to do to avoid being pregnant and everything else that elders do not teach us do not teach us. It is easier to talk to friends because we are at the same age so there is no judgement.*

According to Mpondo et al. (2018), ethnographic studies conducted in South African urban and rural areas demonstrated that sexual health communication is mostly conducted in organised peer groups. Peer groups are important structures where children teach each other while relying on older relatives' guidance. Sexual socialisation with siblings may be beneficial, given that siblings are uniquely situated in both peer and family contexts (Wallace 2014). The open sex talk found that friendships may result in experimentation (Widman et al., 2014). Participants discussed how they used to seek advice from peers during adolescence and continue to do so as young women. Contrary to the socialisation of the family and school, discussions about sexual pleasure are more prevalent among peer groups. Peers were more open to discussing sex tips, vaginal hygiene, sexual debut, and contraception methods:

- ❖ *Friends can also help you plan properly for your sexual debut. They would tell you what to do and how to avoid getting pregnant. We discuss everything, even condom use, STIs and emergency contraception.*
- ❖ *When I got married for the first time at the age of 16, I had no knowledge about sex. All I knew is that there was pleasure in sex, but I did not know how. There was no TV at home, I had no friends. I would just lie on my back and look at the roof ngiluke amagoda. I would know that we were done when I heard him moan. I did not know that I should be feeling or doing something, all I was taught at home was that I had to respect him. Gosh, we come from far! [laughs hysterically and continues]. I now discuss important things with other women, and they tell me about various positions that I can try to enjoy. At first, I was surprised to learn that I can also enjoy sex. Nobody tells us about these things at home or school, so our friends play an important role. I am now on my second marriage [explains how she left the first one due to abuse]. I can say I more experienced about sex since I have learned to open up to women of my age. They tell me about what they use and the sexual positions, they would advise me, 'hhaibo, wobuye ugibele phela' (you should also go on top/practice woman on top). Sengiyagibela nje impela, nobaba useke athi 'awugibele phela' kushuthi kumnandi (I now know how to do woman on top, sometimes my husband would request it, which is a sign that he enjoys it).*

The face of the participant who made the statement above changed as she spoke. It blossomed with excitement and confidence. Other participants discussed learning about sexuality due to peers, with much laughter and excitement, and their voices were loud as they reminisced about sexual conversations with their peers. This showed that peers were their preferred source of sexual information.

Whilst this has been viewed as a risk, which could lead to an early sexual debut, narratives from participants demonstrated that it could also have a positive impact because peers encouraged young women to consider contraceptives to prevent early and unplanned pregnancies and to use condoms in preventing STIs. Seemingly, peers may be powerful sources of information compared with parents, particularly information on sexual intercourse (L'Engle and Jackson, 2008).

4.6 Media

The media has evolved as a primary source of sexual information in modern sub-Saharan Africa. Mass media has been used to influence behaviour and persuade recipients to prevent health risks (Van den Berg et al., 2007). The media is referred to as the “sexual super peer”. The technical and normative information by the media depicts sex as risk-free, non-marital, and recreational. Research on teenage sexuality and pregnancy demonstrates that adolescents between 13 and 18 are most likely to get sexual health information from their peers and the media. The lack of parental and teacher engagement on sexual issues is attributed to adolescents' interest in media sexual content. The advent of technology and media trends has enabled adolescents to observe, imitate and learn sexual behaviour in the comfort of their rooms (Abdullahi & Abdulquadri, 2018). Scholars have used cultivation and social cognitive learning theories to describe how exposure to media contributes to the sexual attitudes and behaviours of consumers.

Most participants were exposed to sexual content at their pre-adolescent stage through television. This was, however, light content, which included kissing and flirting. Therefore, parental advice was all they had until they had access to social media content on the Internet, especially on Instagram and magazines with sexual content such as *Cosmopolitan*, *True Love*, and *Glamour*. These sources of sexual information informed participants about vaginal care and SRH:

- ❖ *I must have been 7 or 8 years old as a child. I would stay up till late so I could watch Emanuella on ETV. That was innocent; it was nice to see people kiss. I could not watch such in front of elders, so I enjoyed stealing that moment. My friends referred me to different Instagram and YouTube pages which discuss vaginal health and all things sex. It is better to watch such when I am alone, nobody will judge me.*
- ❖ *Information is all over, there are doctors and influencers on Instagram who will tell you, do this, do that. Wash your vagina, pee after sex and all those things. I really prefer either talking to my friends or going to social media. Also on Face Book, there are pages like Ladies House where everything is laid bare, no stone is left unturned so I can say that I learn a lot from there.*
- ❖ *Some Instagram influencers do awareness for women on things like how to wash the vagina, how to keep it clean and smelling good so I follow them so I can learn more.*

The media exposes youth to global online communities, which makes learning about sex possible, and how about 64% of adolescents aged between 13 and 17 have been exposed to pornographic material through the Internet in South Africa (Kheswa & Notole, 2014). Therefore, I explored whether any of the participants had ever watched pornographic material on the Internet. However, my question was met with negativity; participants would frown and be uncomfortable when responding. Some would say that if they answered the question, I would perceive them as *iziwengu* (loose women). This is because sexual assertiveness is viewed negatively, and women who portray themselves as knowledgeable about sex are judged as promiscuous (Khumalo et al., 2020).

The fear of being judged as promiscuous emanates from conservative societies' expectation that women are sexually reactive, submissive, and passive, perpetuating harmful stereotypes that limit their autonomy, self-expression, and freedom to make choices regarding their own bodies and desires. Female sexuality is suppressed. Women who portray self-promoting behaviour and speak in a direct, dominant manner are penalised by conservative societies. Conservative societies view watching porn as taboo and immoral, especially for women. In turn, women conceal their porn watching for fear of being viewed as people who engage in something that is taboo. Stereotypes about acceptable behaviour for women and society's perceptions of a proper woman hinder women from expressing sexual desire and knowledge-seeking behaviours (Daudi, 2018). Women who show knowledge and sexual liberation risk being slut shamed. Digital platforms offer adolescent girls and young women spaces to ask

questions and browse information privately without fear of judgment. Therefore, they continue to seek sexual knowledge in private conversations with peers and on the Internet.

4.7 Initiation schools

Initiation schools bridge the gap between youth and adulthood and ignorance and knowledge. They demarcate a development stage whilst ensuring acceptance of the adolescent into the community (Mbiti, 1971). In addition, they work as institutionalised socialisation systems, which prepare adolescents for challenges associated with their sexual development during puberty and later (Munthali & Zulu, 2007). Traditional initiation schools play a significant role in imparting knowledge and preparing young people for courtship and marriage.

In the Zulu culture, initiation schools are the ethnic group's acknowledgement that a young woman has reached a stage of growth, responsibility, fertility, and community productivity. When a young Zulu maiden reaches puberty and has her first period, she informs an older woman. She will be isolated from society for a few days (*ukugonqa*) *umhlonyane* ceremonies are performed to inform her ancestors that she has reached another stage in life where she is becoming a woman. During the isolation period, she would be surrounded by young virgins in a hut where men could not enter. Only elderly women are allowed to offer advice on how to transition to adulthood, including behavioural education and how to relate to men. She will then be expected to attend virginity testing. This is essential to ensure that girls jealously guard their virginity (Chisale, 2016). Virginity testing is not a new cultural practice among the Zulu and other African indigenous cultures. The guarding of virginity has a long history since the value of virginity is not only in Africa as part of African culture but also has a religious background and is valued in Western traditions as well (Chisale, 2016).

During virginity testing, young women are inspected for sexual purity and encouraged to preserve their virginity for marriage. The inspection is usually conducted by elderly women (mentors) who are perceived to have wisdom and knowledge of these customs. The guarding of virginity is central to mentorship (Chisale, 2016). Although virginity testing has been a contested subject, especially by human rights activists (May 2003; Leclerc-Madlala, 2001), it is still practised in many parts of KZN by willing participants who demonstrate a sense of pride about being a virgin. An example of this was what was termed "virgin bursaries" offered by the uThukela District Municipality Mayor in 2016, a decision mostly criticised by human rights

organisations locally and internationally. In defence of this, the Mayor and the Royal house explained this action as an attempt to preserve Zulu cultural customs.

All participants who had attended virginity testing reported that they had done so willingly. However, it was prevalent that there could have been some pressure and fear of being judged for not participating for some reason. Participants explained that besides vaginal inspection, virginity testing schools are significant in initiating young girls to womanhood and sexual socialisation. They also influence the way young women perceive their bodies.

- ❖ *We were taught to respect ourselves, love our bodies, and take pride in them. After testing, ugogo/umama who is responsible for the group would then teach us proud of our virginity how to carry ourselves as young women. We would be told to respect our bodies and not to play with boys. Just like at home, we were not allowed to question these teachings, doing so would risk being reported to our parents and getting a hiding for it.*
- ❖ *Boys were a problem, so much emphasis was put on how we should not play with them. In fact, we were told not to associate with boys. No reasons would be given, and no questions were allowed. If you asked questions, you would be seen as disrespectful, or they would assume that you have a boyfriend/want to sleep with boys.*

Initiation schools are based on cultural beliefs, which promote and preserve *isintu* (African culture). Therefore, young women are encouraged to aspire to marriage, where they will become mothers and homemakers. The most important aspect is entering the marriage as a virgin. Virginity, which is perceived as the core of a child's sexuality and valued in African contexts, is a source of pride for the girl and her family during marriage negotiations (Chisale, 2014). When a girl is a virgin, mothers would say *uphelele*, meaning that she is complete, and once one's virginity has been taken away, especially before marriage, they are no longer complete. Their *lobolo* (bride price) value decreases. This view of virginity is problematic as it implies that once a girl loses her virginity before marriage, she is no longer complete/whole. It subjects young women to prejudice from the community and peers who are still virgins. Hence, virginity testing has been criticised by African feminists who maintain that virginity testing places value on virginity before marriage from a patriarchal space (Tamale, 2014). However, Chisale and Buffel (2014, p. 292) consider virginity testing as a strategy that is used by African communities to enforce good or cautious sexual behaviour among adolescents.

Young women who are below the age of 21 are discouraged from dating, although some begin dating at a later adolescent stage. Older women at initiation schools would advise those young women with boyfriends to practice *ukusoma*, a non-penetrative thigh sex method. Apart from preserving one's virginity for marriage, *ukusoma* was viewed as one of the preventive measures against HIV/AIDS and STIs. This is significant in a province like KZN with a high prevalence of HIV infections (Akullinan et al., 2021):

- ❖ *People think we went there only for virginity testing, but that thing was more like a school. We learned a lot of things about being a girl, what to do when a boy approaches you or when you feel that you like a particular guy. The mothers would tell us to avoid penetrative sex and practice ukusoma. They also told us about izifo (diseases), for example, ingculazi (HIV/AIDS) and encouraged us to preserve our virginity so we could protect ourselves from such.*

The practice of *ukusoma* is described by Chisale (2016, pp. 219-220) below:

This practice is used to encourage a sexual debut among young women and men. *Ukusoma* and virginity are connected as they are both in the category of sexuality in an African context. *Ukusoma*, *ukuhlobonga* or *ukumentsha* are Nguni words that refer to non-penetrative sexual acts that may be compared to masturbation. The difference between the two is that the former does not involve self-satisfaction but two people satisfying each other in the absence of penetration.

The teachings about *ukusoma* indicate that unmarried young Zulu women are not entirely expected to avoid sex but coitus/penetrative sex. This implies that sexual gratification is allowed to some extent. Zulu (2005) explains that in all African countries, boys and girls were not expected to abstain from all sexual contact. They were discouraged from indulging in full sexual penetration but were allowed to engage in *ukusoma* or sex between thighs, which would technically maintain a woman's virginity. However, studies/critiques of this practice are limited (Chisale, 2016). Nkosi (2015, p. 5) argued that while the practice of *ukusoma* cannot be actualised within the current context, the attitudes, values, norms, and knowledge associated with the practice is still valuable. Some of these are openness about sex, sexuality and sex education, and sexual activity that responds to the sexual needs of the body and not just an act of producing babies.

If the maiden has been able to preserve her virginity until age 21, her father is expected to conduct an *umemulo* ceremony for her. This is done to introduce her to the ancestors as someone ready for marriage. She goes on isolation for a few days to be educated by elderly women on how to be a good wife and mother. The isolation period is crucial for the young woman's socialisation. Older women teach her the importance of respecting her husband and in-laws. She also receives sexual education to a limited extent. She is taught how to satisfy her husband sexually and that "she can only be angry/sick from the head to the stomach, but the vagina should never get angry." This implies the responsibility for her to ensure the sexual satisfaction of her husband even when she is not feeling well, as sex is believed to create a strong bond between a married couple.

Marriage is valued and is seen as a sign of honouring the young woman's parents. A standard *lobolo* of 11 cows will be charged if the woman is still a virgin. The most important is *ingquthu/inkomo kamama*, a cow given when the young woman is still a virgin. It is usually the most expensive. The purpose is to thank the mother for raising her daughter well.

Traditionally, *lobola* served to bring families together and foster a feeling of trust and understanding between them. The idea of purchase and sale was not a significant element of the custom (Parker, 2015). This was, however, changed by Theophilus Shepstone, Natal Secretary for Native Affairs during the 19th century, to ten cattle for commoners (plus the *ingquthu* beast for the mother)¹, 15 for hereditary chief siblings, and 20-plus for the daughters of a chief (Welsh 1971; Posel et al., 2011). This demonstrates the impact and influence of colonialism on the way *lobola* is practised. The amount requested relative to men's opportunities in the South African labour market can contribute to delayed marriage and non-marriage in contemporary Zulu society (Posel et al., 2014).

Apart from teachings on preserving virginity and taking pride in one's body, initiation schools are also responsible for teaching young Zulu women decorum. Young women receive instructions on dress code and interacting with others:

- ❖ *In terms of clothing, they would tell us not to wear short clothes in public. We were only allowed short traditional skirts (izigege/onomndindi) when testing because a woman who takes pride in her body will not publicly show it off.*
- ❖ *We were advised to respect our bodies and not wear short clothes. We could only wear short clothes when going for virginity testing. We were told that our*

bodies were not supposed to be seen by everyone but our husbands when we got married. However, wearing short traditional skirts was viewed as a way of ukuhloba (adornment) during virginity testing.

Complete beauty is associated with virginity for Zulu maidens in initiation schools. Loss of virginity is usually perceived as the loss of pride, bringing disappointment to one's parents. These teachings present bodily ownership as a problem and objectification of young women's bodies through virginity testing. Whilst virginity testing is voluntary, narratives from participants demonstrate that bodily ownership and assertiveness are not emphasised. The female body is described as something that must make the parents proud and later satisfy the husband.

4.8 Intersection between culture and religion

The study's participants were predominantly Christian (Pentecostal and African Independent Churches). They intimated that religion played a major part in their sexualisation. Whilst initiation schools taught about non-penetrative sexual methods and allowed sexual gratification through practices such as *ukusoma*, Christianity condemned any act of intimacy, including kissing, as noted below.

- ❖ *I grew up in the Assemblies of God. The laws are strict there. We are not allowed to engage in pre-marital sex. This is a sin before God. We were told that the bible commands a woman should only show her body to her husband. A process must be followed when a man wants to take you as his wife. He is supposed to approach you through the pastor. You are then given some time to pray and seek for God's guidance. If you love him, you will have to tell the pastor, the lobola negotiations will then begin. You are not supposed to have sex or even kiss during courtship. I had hoped to follow this process kodwake ngenxa yobude bendlela! (But the journey has been too long) [laughs hysterically]. I ended up having a child out of wedlock. Since I was a youth leader, this was announced in front of the whole congregation, nganqunywa (I was excommunicated) and labelled as a bad example who had shamed the gospel.*

Excommunication is common in most Pentecostal churches, including the Back to God Assemblies of God movement, which the participant attended. It is done as a means to

discipline a person who defies the rules of the Bible. In essence, it is meant to protect the honour of Christ (Kubheka & Masango, 2010). Any person who commits an outward sin can be seen/heard and is viewed as significant enough for the church to feel unable to continue affirming someone's profession of faith (Leeman, 2016). It is a form of censure believed to have restorative effects as the excommunicated member is expected to spend time with God reflecting on their actions and repent. Delinquents are cut off for their refusal to repent after sinning (Brown, 1994).

In the case of the participant above, excommunication was meant to discipline her for sinning pre-marital sex whilst in the church leadership. The act was to teach her a lesson and ensure that other young women in the church become aware of the negative implications of such a sin. Repentance meant standing in front of the congregation and asking for forgiveness. This is done to promote communal purity. Excommunication brings shame as the person's sin is laid bare before the congregation.

This, in turn deprives them of their right to privacy and isolates them from the rest of the church until a time where they choose to repent and ask for the church's forgiveness. Whilst the act of excommunication may be deemed to have restorative effects from the perspective of the church, it may have negative effects as it isolates the victim from those who are viewed as 'pure' and sets her up for judgement and scrutiny from fellow church members. This could result in trauma for the victim, as stated by Kubheka and Masango (2010).

Another participant from the Nazareth Baptist Church,¹⁹ an African initiated church (AIC), shared a similar experience:

❖ *I used to sit with amakhosazane (virgins), and we would cover ourselves with inansuka (a white cloth) to represent sexual purity, but this changed when I lost my virginity, I had to stop sitting with amakhosazane and wearing inansuka. Everybody knows when you are no longer a virgin because your dress code must differ.*

As an AIC, the Nazareth Baptist Church brings Christianity and Zulu nationalism and culture together (Kumalo & Mujinga, 2017). *Inansuka* (a technical term for the two square yards of white bleached cotton/anainsook), with which an unmarried girl must veil her head during divine

¹⁹ Popularly referred to as kwaShembe, adapted from the name of its founder, Isaiah Shembe

service (Oothuisen & Hexham, 1996), has a strong symbolic value. In the Zulu culture, the white colour signifies purity and morality. For example, a virgin would wear white beads.

The use of specific garments to distinguish between virgin women and those who are non-virgin feeds into the existing dominant moral discourse on sex concerning women. Furthermore, it perpetuates a culture of shame, respectability politics, objectification and policing of women's bodies and their sexuality. The non-virgin women are shamed for their status and are perceived as defiant to the religious doctrines.

The separation by garments makes them physically identifiable, subjecting them to judgment. However, the same is not applied to their non-virgin male counterparts. This shows how patriarchy manifests itself within the religious space. The *inansuka* phenomenon is problematic in the South African context, where there are increasingly high rape statistics. It becomes an even greater concern in contexts where it cannot be determined whether a non-virgin status is a result of sex or rape²⁰. It is unclear whether the church is cognisant of this.

These narratives demonstrate how the female body is constantly under surveillance and subjected to regulations which monitor her and prevent her from committing or violating traditional laws of the land, especially when she enters puberty (Chisale, 2020). Christian colonial understandings of morality view sex for women through a religious lens and only legitimise it as a means for procreation; pleasure is associated with sin, and the idea of sexuality as primordial sin is a cornerstone in Christianity (Anfred, 2005). This purist thinking insists on “sex as sin, sex as a duty, sex as a marital right and sex as male domination” (Amadiume n.d., p. 3). It diminishes sexual pleasure for women and replaces it with passionless sex, female sexual purity and chastity and male dominance over female sexuality (Tamale, 2011).

Excommunication and change in church attire due to engagement in pre-marital sex demonstrates how religion and culture condemn the female body as impure. Female bodies are portrayed as docile bodies that can be restricted and subject to discipline and control to conform to religious norms (Foucault, 1995). Viewing sex as only for procreational purposes through the Christian perspective portrays the body as a medium of control for the socialisation of

²⁰ This thesis refrains from employing the common narrative of consensual and nonconsensual sex because I believe that the concept of nonconsensual sex does not accurately represent the gravity of the situation. Nonconsensual sex is, unequivocally, a form of sexual assault and should be addressed as such. In essence, sexual activity that occurs without consent should be recognised and treated as rape. I advocate for open dialogue on this matter to align societal understanding and response with the severity of the issue.

reproduction (Foucault, 1976). Thus, a disentangling of sex from reproduction is important (Anfred, 2009).

Religion, especially Christianity and Islam, stressed impurity and inherent sin associated with women's bodies (Goodson, 1991). Sexuality is linked to the meanings and interpretations of gender systems and cannot be separated from religion and culture (Tamale, 2011, p. 16). Religion is a way of living and an integral part of culture and identity which influences sexuality. Societal attitudes about sexuality are mostly dominated by a religious perspective that sexual desires are to be restrained to prevent persons from engaging in sexual activity to seek pleasure. All cultures and religions regulate sex (Amadiume, 1997).

4.9 Conclusion

This chapter sought to understand the sources from which young Zulu women receive socialisation about their bodies, sex, and sexual pleasure. It was established that communication about sex was mostly intergenerational, with the grandmother playing a significant role in the socialisation of the girl-child. The interviews revealed a lack of mother-daughter communication about sex. Communication was mostly initiated by parents and rarely by young people. Topics were mainly about abstinence and were characterised by threats, which deterred young people from engaging in sexual activity. Common topics were abstinence, unplanned pregnancy, and HIV/AIDS. SRH and rights, including contraception and sexual pleasure, were hardly discussed. The sexuality education programmes in school through LO focussed on health hazards and reproduction, highlighting abstinence without reference to desire and pleasure. Teachers also assumed a moralistic approach to sexual education, thus not facilitating further discussion. Media engagement lacked investigative depth by being reactive and was mostly dominated by the announcement of new health campaigns.

The participants maintained that sexual communication within the family and schooling environment took a top-down approach and forbade young women from freely conversing about sexuality. A similar case was found within the church where women's sexual desires were labelled as sin, preventing women from freely discussing the topic. The study found a clear intersection between Zulu culture and religion whereby young women were encouraged to preserve virginity until marriage. A common culture of silence stopped women from questioning their sexual socialisation. This limited top-down approach to sex-related

conversations has animated African feminists to call for spaces that allow women to discuss sex, sexual pleasure, and desire freely.

Although there were indications of defiance against the normative socialisation received from home, school, initiation schools and the church due to external influences from the media and peers, culture continued to influence the participants' behaviour and perceptions. For instance, the participants' reluctance to engage in discussions about pornography indicated their wish to present themselves as virtuous women who adhered to cultural norms and expectations.

CHAPTER 5

CULTURAL CONNOTATIONS AND SYMBOLISM OF THE ZULU WOMAN'S VAGINA

5.1 Introduction

This chapter addresses the second research question, which seeks to explore the cultural connotations and symbolism attached to the Zulu woman's vagina. Ongoing studies in feminist research have continuously reaffirmed the studying of cultural meanings connected to female genitals in understanding women's sexuality²¹. There are varied and paradoxical socio-cultural representations of the vagina. It is often viewed as taboo, a word that is hard to say and a topic that is difficult to talk about²². The chapter therefore explores how young Zulu women make sense of their vaginas. The participants' narratives suggest that their understanding is framed through socio-cultural contexts and language. Using *hlonipha* language, these participants reframe and locate the vagina from being a taboo topic to inclusion in their daily discourse. This framing enables them to think and break the negative representations of it.

5.2 The use of *hlonipha* language about the vagina

In Zulu culture, *hlonipha* is a concept that refers to the practice of showing respect or reverence, especially towards one's elders and ancestors. It involves specific behaviours, words, and gestures demonstrating a deep sense of honour and deference. The *hlonipha* language encompasses the specific linguistic and non-linguistic expressions used to convey respect and reverence. These expressions are an integral part of Zulu social and cultural norms.

Linguistic anthropologists maintain that language and culture are linked in the transmission of knowledge, the construction of social life and ideologies about use and its relation to human behaviour. Language shapes identity and reveals concealed meanings attached to the body. Language plays a role in establishing and maintaining culture (Keating, 2009). One aspect of the focus group discussions was how cultural representations of the vagina were strongly

²¹ Sörensdotter and Siwe (2016)

²² Braun and Wilkinson (2001, p. 18)

embedded in language use. This language is important as Roberts (2017) offers that it is a cognitive tool, distinctive human capacity, and engine of cultural transmission.

Participants used non-direct language, such as euphemisms and metaphors, to construct their sexual orientations and refer to sex and genitalia. This allowed communicating about a topic subject to social and cultural taboos using less sensitive words. This particular use of language is known as *ukuhlonipha/ukuhloniphisa*, an act of using *hlonipha* language (a language of respect) whereby *izihlonipho*²³ (euphemisms) are used instead of certain direct words. *Isihlonipho* (language of respect) is a sociolinguistic custom in the Zulu culture.

Hebert (1990) refers to *isihlonipho* as a language of avoidance which involves a prescription against using words/names common among the world's languages. Avoiding familiar words resembling a taboo name is a widespread practice in most south-eastern Bantu languages. Vilakazi (1962, p. 73) argues that as an aspect of the ritual, *hlonipha* is a portrayal of reverence for the sacred. This social, linguistic custom of respect is described by Msibi and Rudwick (2015) as a cultural pillar for South African Nguni (comprising of Swati, Xhosa, Ndebele, and Zulu) societies which can be understood as a complex behavioural code that requires differential conduct. Zulu people employ *hlonipha* to show respect towards elders, superiors, and ancestors. Women exploit it as a strategy to maintain communicative efficiency, considering the severe structures they operate (Finlayson, 2002).

In *hlonipha* language, an individual uses one language variety over another to conform to the social norms of society. Most literature portrays *isihlonipho* as primarily applied by married women to show respect to their new family (Fandrych, 2001; Luthuli, 2007; Finlayson, 1998; Hebert (1990). Most studies on anthropological understanding of respect appear to limit the topic to traditional African women respecting their in-laws and husbands. The daughters-in-law adopt the habit of inventing unfamiliar words/names or having linguistic mechanisms to avoid the tabooed syllable. In most societies, boys and girls may use and interpret language differently given the patterns of socialisation they receive while growing up. *Hlonipha* has been viewed as being most utilised by women than men. Respect and avoidance customs often preserve masculinity and deliberately place a distance between the observer and that which is

²³ Plural of *isihlonipho*

to be avoided (Mchunu, 2005). The study demonstrates that *hlonipha* is not exclusive to married women since most of the participants in the study were unmarried.

Contrary to Zungu (1985), who argued that *hlonipha* language gives women dignity and respect, Hebert (1990) asserts that *hlonipha* relegates women to an inferior societal position. This is alluded to by Rudwick and Shange (2009, p. 69), who have argued that it is impossible to refute women bear a heavy burden because of *hlonipha*, which continuously marginalises them by preventing them from discussing certain topics or using certain words which are seen as taboo. This was also observed by Msibi and Rudwick (2015), who reiterate that *isihlonipho* is a genderlect that expresses femininity and presents females' perceived socially inferior status in Zulu society.

Linguistic features of *isihlonipho* directly result from the social structure in which it is embedded. Overall, language as a social phenomenon reflects the society that uses it. As a social term, *hlonipha* refers to respect, including decency and physical signs of respect and politeness, which may involve avoiding eye contact and taboo terms such as sexual organs. This was evident in participants' accounts of their genitalia in avoidance of certain words and adopting other words which may refer to something else about their vaginas. These functioned as codes and a language that only they could understand, enabling them to control discussions about their bodies and sexuality. According to participants, such avoidance shows respect for the *inzalabantu* (females/women).

Throughout the discussions, all participants used different words to refer to the vagina, avoiding the use of the word *imomozi* (vagina in isiZulu). To my shock, a researcher, when I used this word, participants would exclaim that it was unladylike/impolite to use such a word. According to participants, the vagina is called *imomozi/igolo* in the isiZulu language, depending on the women's age. They intimated that *imomozi* is associated with innocence; hence, it is mostly used to refer to a child's vagina. It is also a polite word compared to the other isiZulu names for the vagina. *Igolo* is derogatory and therefore used for an adult vagina that has already experienced coitus, as explained by a participant, who said, "*It is called igolo*". The mention of this word led to the other participants expressing their shock by saying "*Hawu!*". However, the following terms were added to the explanation:

- ❖ *Ingquza*
- ❖ *In actual fact, it is not ingquza, igolo. Ingquza ingemuva (behind²⁴). Igolo is what is in front.*
- ❖ *Imomozi is not the same as my vagina. You will not say to a small child that she has igolo. You will be frowned upon, so a child's vagina is referred to as imomozi. That is a more polite word for the vagina, but you cannot use it in public, siyahloniphisa. We use hlonipha language/euphemisms.*

From conversations with participants, I learned that *imomozi* is associated with the sexual purity and innocence of a child. Hlonipha language was essential in public spaces to avoid being labelled as a loose woman (*isifebe*). However, they also used these words within their circles as codes to hide meaning, especially from someone who may not know what is being discussed. Listening to these young women's conversations, I was intrigued by the various words they used about the vagina and compiled a list. A few words were metaphorically used as *izihlonipho* (euphemisms) to signify the vagina. Significant cultural meanings are encoded in these words, and only through decoding can connotative meanings be understood.

- ❖ *But you cannot refer to it as igolo in public, liwuk'hlambalaza (it is considered rude/derogatory). If a guy says, "ngimqedile uSma akasenalo igolo, " it is no longer there because he has used it. If he says, "ngimqedile uSma, ngiyidlile ingquza yakhe," he means that he had anal sex with her. Ingquza is behind, not in front. That is how it is. We use polite language about a woman's body, especially her genitalia.*
- ❖ *Such as ikhekhe ikuku*
- ❖ *Ushukela*

The participant laughed when using that term.

- ❖ *Inanazi, inkomo,*
- ❖ *Umsamo*
- ❖ *Imbawula*

²⁴ Referring to the anus

❖ *Inkomo*

In literal terms, the word *inkomo* refers to a cow. In the Zulu culture, livestock is valued as a medium of trade and other social activities. Animals are ranked by value, and cattle are regarded as the most important (Ainslie, 2002). Livestock is always considered a symbol of wealth for the man who would jealously guard it as the head of the family and instruct others to upkeep and slaughter (for ceremonies). The importance of cattle is more significant in the Zulu cultural worldview as the value of livestock/wealth is not equated to money/exchange value but to their symbolic value as wealth themselves (Shava & Masuku, 2019). Zulu people hold their cattle in the highest regard, and the animals play a pivotal role within traditional Zulu communal lives. Most sacrifices and celebrations are conducted using cattle (Peté & Crocker, 2012). In the traditional marriage, *ilobolo* is a symbolic appreciation of the bride and is charged through cattle. Fines in the form of cows were paid to promote celibate relationships. If the girl is impregnated/loses her virginity, the boy responsible spends *inhlawulo* (fine) to restore the girl's dignity (Shava & Masuku, 2019).

The use of the cow metaphor about the vagina by the participants was related to its cultural value and significance as a symbol of wealth and celebration:

- ❖ *Inkomo is important. For example, when a man has many daughters kuthiwa sanda isibaya sakhe (his kraal has expanded), he hopes to get more lobola cows. Futhi awukho umcimbi ngaphandle kwenkomo (there is no celebration without a cow). Inkomo iyahlatshwa, iyadliwa futhi (a cow is slaughtered and enjoyed as food/meat).*

The word *umcimbi* refers to an event or celebration that infers enjoyable time to all parties involved. In claiming that celebration cannot happen without a cow, participants relate to the importance of the vagina as contributing to sexual pleasure. This is a powerful and significant comparison, given that the vagina is often pathologised and associated with dirt and shame (Mjente, 2022). It gives the vagina a high value associated with fun and playfulness in the relationship. Another participant further explained as follows:

- ❖ *When we talk about a cow, they say a cow is slaughtered (igwaziwe/ihlatshiwe). Others say inkomo siyayihlaba, so when referring to sex with a woman, a man will say ngimgwazile, ngimdlile loya. Because the meat of a cow is eaten. Also, important cultural*

ceremonies are not performed without the slaughtering of a cow, if umnumzane (the man of the house) calls people to his house becausea kuhlatshwe inkomo, he is respected by his neighbours because akusiwo umcimbi omncane lowo (it is a big ceremony).

- ❖ *Cows are significant in Zulu ritual ceremonies and celebrations. Even when invited to a traditional ceremony, they ask about the type of animals that will be slaughtered. Once they learn that there will also be cows, they learn that it will be a big event because not everyone can slaughter a cow. It is expensive and needs one to have financial muscle to afford it.*

The above narrative indicates how the *ngimgwazile/ngimdlile loya* expression is colloquially used by men to demonstrate that they have had sex with a particular woman. *Ukugwaza* (poking/stabbing) metaphorically represents the penis as a spear piercing through/stabbing the woman's vagina, rendering it powerless and defeated. The phrase reflects the food (*ukudla*) metaphor. Women are not socially sanctioned to discuss who they sleep with, and discussions may bring about judgement and labelling as *izifebe* (loose women). However, men freely do this in conversations where they celebrate each other for being *amasoka* (men with multiple sexual partners). Their hegemony is indicative of the use of sexual language. *Ukuhlaba/ukudla*, in this sense is used by men to degrade/devalue the woman.

Traditionally, *ukuhlaba* (slaughtering) is not done by anyone but by a man who has particular skills and knows the right position for the wound (*inxeba*), which could quickly kill the animal. These men earn respect, especially from their peers, for their spectacular skill to only stab the cow once and bring it to its knees and are often invited to ceremonies to perform this duty. The same applies to men with multiple partners (*amasoka*) who gain respect from their peers.

According to Sosibo (2016), in many townships in South Africa, cattle slaughtering is a special and sought-after skill that has become an informal business in urban settings. Young men rent out their cattle slaughtering services for between R100 and R150 at a time due to the dearth of knowledge and the concomitant dismissal of traditions in the cities. The *ukuhlaba* metaphor has connotations of power. Contrary to the understanding of *inkomo* by women, which elevates the vagina to a higher status, the use of the word *ukuhlaba* by men is rather derogatory and degrades the vagina into a subordinate entity consumed and wasted by men. The comments

about financial muscle imply that these young women prefer financially stable men. They have the agency to select them instead of taking anyone for a sexual partner.

The *ukudla* expression also depicts the vagina as something that can be finished (*iyaphela*). This is a belief that is mostly upheld in most Zulu societies about women who have multiple sexual partners. It is commonly believed that if a woman sleeps with multiple men in her lifetime, her vagina loses taste, and she becomes less affectionate towards men. Contrary to this, it is believed that manhood lasts for a lifetime regardless of the number of partners one sleeps with. This depicts the societal double standards in constructing sexuality whereby women are denied sexual freedom through stereotypes, which allows more freedom for men. This suppression of sexual freedom and pleasure for (black) females is noted by McFaden (2009), who highlights how hegemonic norms of sexual behaviour, heterosexist expectations and cultural taboos promote surveillance of women's sexuality and fail to recognise the connection between power and pleasure. She further argues that this suppression is systemic, causing women to find themselves in a vacuum. Lefkowitz et al. (2014) argued that these sexual double standards encourage more sexual freedom for men and lead to a power differential between men and women.

In referring to the vagina as *inkomo*, the participants demonstrated their perception of the vagina as a valuable object which is significant in bringing joy during sex/sexual intercourse. It also refers to pleasure. However, the *ukuhlaba* (slaughtering) metaphor represents the penetration by the penis during coital activity. *Ukudla* (to eat) also positions the vagina as important for consumption in sexual activity. Participants, however, did not see this as subordination because they could choose whoever they wanted to engage with sexually. At the same time, it may be argued that the symbolism of eating suggests a reduction or objectification of young women to food. Another meaning might be that food is pleasurable, which, like sex, is to be enjoyed. It is a routine activity for which passion and pleasure are essential (Undie et al., 2007).

Participants conceptualised sex through the food lens. This is based on the belief that, like food, sex is essential for human health²⁵. The embedded connotations from their statements position the vagina as something that needs to be prepared following a certain procedure before consumption, just like how the actual cow is prepared for ceremonies. This implies the

²⁵ See Lusekelo (2015)

importance of caring for one's genitalia. Mjente (2021) argues that equating sex to eating presents sex as essential to a man's life and survival and that the sole purpose of a woman is to satisfy the appetites of men, just as food is solely produced to eat; women are seen as passive in the process. This assertion implies an absence of women's pleasure, whereas this is not the case for participants. This issue will be later addressed in the study. Beyond Mjente's (2021) assertion, I contend that the participants view sex as nourishment, which is why there is a value attached to it. This is depicted in the narrative below:

- ❖ *During a ceremony, people eat lots of meat until they are full and no longer want more, the same applies for sex, kumele umuntu asuthe (one must be satisfied) the body must release certain juices that indicate satisfaction. The ability to do that for your partner means that you are a real woman. You can care for and nourish your man's body.*
- ❖ *There is also a relation between inkomo (the vagina) and how men would usually say 'ngimdlile' (colloquial for having sex with someone). Then when the girl's mother comes and says 'udle inkomo yami' he needs to pay it back (in the form of ukuhlawula/fine). If the girl were a virgin, the person responsible for breaking her must pay inkomo kamama/ingquthu which could have been the eleventh lobola cow paid to thank the mother for raising her daughter well²⁶.*

The mother's expression of *ukudliwa kwenkomo* within the context of the above narrative is a mother's lament for the girl's virginity, which, according to cultural standards, should have been preserved till marriage. The man responsible for breaking the young woman will then owe *inkomo kamama* to her family. This is because in the Zulu culture, mothers and wives are considered the "transmitters and emblems of African knowledge" (Maitse & Marchbank, 2000, p. 202) who are responsible for bearing and raising children and instilling beliefs and obligatory customs (such as the preservation of virginity for marriage) that are essential for the continuation of African social norms and values (Thetela, 2002, p. 180). Therefore, *inkomo kamama/umqhoyiso/inguthu* charged as the eleventh and most expensive of the *lobola* cows,

²⁶ This has also been discussed in relation to initiation schools in the previous chapter.

is given to the girl's mother as an award for raising her well and teaching her to look after her virginity.

It may also be charged as *inhlawulo* (fine) to a man who has deflowered the girl by taking her virginity. This concept represents a cultural policing of female sexuality since the girl's/bride's family may know that she is no longer a virgin during the *lobola* process. Also, her value will be considered less, given the loss of virginity. The loss of virginity before marriage is considered *ihlazo* (reproach) for the family, and during *lobola*, the in-laws also learn that the woman is no longer a virgin, which could be embarrassing. Therefore, a mother's success in raising her daughters is related to whether they have been able to maintain their virginity till marriage. If the daughter misbehaves, the mother is blamed for failing to raise her well since she is perceived as the custodian of this task. In some instances, the daughter may be well educated with good employment, but the loss of virginity will still be frowned upon as an embarrassment.

5.2.1 *Umsamo*

The literal meaning of *umsamo* in the isiZulu language refers to the “holy of holies”, sanctuary, shrine, a sacred place (*emsamo*) and space (*umsamo*) in the hut/house where guardian spirits dwell (Mosue, 2000). A round house is the coolest, darkest place, so the ancestral spirits reside there. It is at the far back of the house, farthest from the door (Meintjes, 2017). It is a space where praise and petitions are made to ancestors – a communication space between the living and the dead (Mkhize, 2009). It is a corner set aside for performing ritual ceremonies, including the burning of *impepho* (incense) (Nyawose, 2013). The burning of *impepho* is an important channel for connecting the living and the dead (Ntshangase, 2012). Snuff may be sprinkled during the process of burning *impepho* and communication with the ancestors *emsamo* (Silindza, 2020). Mkhize (2009) further describes *umsamo* as follows:

Umsamo is a special and sacred place inside a traditional Zulu hut that is at once an altar and a repository (*ithala*) of a family's precious and spiritually significant items. *Umsamo* is also a physical manifestation of the interconnectedness and special bond between the living and the dead. It is a metaphysical and physical space in which the living conduct family ceremonies, be they large or merely concerned with the simple act of burning the *impepho*/incense. This centre provides direction and a meditation platform from

which pleading, and prayers are offered. These acts and duties are held not because Africans worship the dead but simply because they want them to function as intermediaries between themselves and the Almighty. Although *Umsamo* as a term has a particular Zulu linguistic connection, the concept of a family shrine is not unique to Zulu-speaking peoples or Africans for that matter.

The above definition by Mkhize (2009) portrays *umsamo* as the most important and sacred space within a home. If the matters that are supposed to be discussed *emsamo* are ignored, the family may experience bad luck. *Umsamo* is a pillar of the home; without it, a family loses its history and connection with the world of ancestors. Although modernisation has interfered with how homes are built, thus affecting the actual location of *umsamo*, some families who believe in communicating with their ancestors still designate spaces representing their *umsamo*, where communication, prayers, meditation, and petitions are done.

Given the sacredness of *umsamo*, specific procedures are to be followed before entering the space. The spiritual and physical cleansing is deemed necessary as one cannot communicate with the ancestors without ensuring they are worthy of doing so. This takes a process of sanctification, avoidance of any impure activity, including sex for at least a week, even if married and cleansing with *isiqunga* (tambootie grass), confessing, and denouncing any action that could halt communication between them and the ancestors before entering *umsamo*. They might even be required to cut communication with certain individuals before entering. The process of *ukugeza/ukuzihlambulula* (cleansing with certain herbs to ward off any unwelcome spirits) is needed before the suitable person enters *umsamo*.

Not everyone is allowed to enter *umsamo* except for the head of the household or *isalukazi* (an old grandmother) whose husband is already late. Otherwise, women are not allowed *emsamo* because they undergo menstruation, which renders them unclean and unsuitable for communicating with their ancestors. *Isalukazi somfelokazi* (a widowed old woman) is suitable for *umsamo* because she has already reached menopause and is believed to be not engaging in any sexual activity, given that the husband is late. The practice of *ukuhlonipha* (respect) is essential when approaching *umsamo*. For example, one cannot enter the space wearing shoes. Men cannot wear hats or vests. They must cover up (*ukugubuzela*). The *isalukazi* must also cover her head. This emphasises the importance and sacredness of the space. Participants compared their vaginas to *umsamo*:

- ❖ *Umsamo leyanto (that thing is a sanctuary) [laughs whilst making a 'v' shaped sign with her hands, pointing around the genital area]. Akungeni noma ubani, akusiwona uthela wayeka (only a selected few can enter, it is not a freeway). Kunemigomo nemibandela (there are terms and conditions)*

Another participant interjected, emphasising the importance of *umsamo*:

- ❖ *Uyabona uJehova mayekhuluma noMozisi ethi, 'khumula izimbadada zakho ngoba lendawo ingcwele.' Yey ingcwele leyanto, eyabakhethiweyo! (It is like when God instructed Moses to take off his shoes, for he was standing on holy ground. That this is sacred, reserved for the chosen ones).*

All participants laughed hysterically, and another young woman added the following comment:

- ❖ *Kuyakhulekwa laphaya, awuvele ungene nje! (You do not just enter; you must pray first).*

Other participants agreed with her.

The comparison of the vagina to *umsamo* portrays an understanding of it as divine and powerful. Participants emphasised taking off shoes, a significant practice when entering a holy place. This was seen with Moses in the biblical tale of the burning tree. It is akin to the practice in some African Independent churches such as the Nazareth Baptist Church (ka*Shembe*) and *Izayoni*, whereby congregants attend the services barefooted, believing that shoes are forbidden on holy ground. Therefore, it is clear that *umsamo* is a place and space that needs to be respected and worshipped, where one needs to be fully prepared before entering. The *umsamo* metaphor also demonstrates an understanding of agency as participants explained that only a few could enter the space.

This implies how they deem it necessary to decide who qualifies to have sex with them using their own criteria and standards. In this metaphor, the vagina is represented as a central, clean space where the woman can determine who enters. This elevates the vagina to a position of power and implies that it is the people who enter it who contaminate it, contrary to the perceptions of the vagina as unclean/dirty as noted by Braun and Wilkinson (2001). Accordingly, young women assess and qualify whom they can have sex with. As a sacred

space, *umsamo* is to be kept neat/clean as it is believed that *ithonga alihlali endaweni engcolile/izinyanya azihlali endaweni engahlanzekile* (ancestral spirits do not/cannot inhabit a dirty place). This speaks to the perceptions about keeping the vagina clean, which will be further discussed later in the study.

Ukukhuleka (praying) has been symbolically used to discuss consent. When somebody prays, they submit a petition, making their requests known. The same applies when asking for sexual consent. A partner may ask or introduce the sexual act through foreplay. *Ukukhuleka* may also refer to the Zulu context of shouting praise names when entering a homestead in recognition of the man of the house (Zungu, 1985). This is a form of respect. The participants perception of *ukukhuleka* portrays the demand for recognition and respect during sex and positions the woman as a goddess who holds the authority to either answer the prayer or not. Rather than being passive, the participants negotiate their sexuality, thus “declaring autonomy and making personal choices regarding their bodies” (Mkhize & Vilakazi, 2021, p. 1).

5.2.2 *Imbawula*

Imbawula (brazier/fireplace) is a traditional heater made from recycled metal containers/tin with holes pierced on the sides. It is designed to burn for long, keeping the household warm during the chilly winter. The family members would sit around *imbawula*, enjoying its heat, passing knowledge, and sharing stories which could strengthen their bond. Information about *imbawula* is extremely limited in the literature. Participants laughed hysterically when one mentioned the word during a focus group session.

- ❖ *Phela imbawula leya, ivutha umlilo namalangabi, indoda ingena igodola iphume isijuluka* (that is a blazing brazier, a man will enter it feeling cold and come out sweating).

Another participant sang “*Wavutha umlilo namalangabi*”, from a song by DJ Zinhle, while others danced. Then, a loud laugh broke out.

- ❖ *Enye into ukuthi umaimbawula ishisa kahle, umndeni uyabumbana ebese ke kujabula wonke umuntu* (Another thing is that if *imbawula* is warm enough, the family bonds better/is united, everyone is happy).

In the statement above, the hot *imbawula* metaphor demonstrated the understanding of the vagina as supposed to be hot/warm. The reference to family bonding referred to the couple

bonding because of the exciting sex sponsored by the “warm” vagina. The word is mostly adapted from initiation school vocabulary, where young women who are ready to marry would be encouraged to keep the fire burning at home metaphorically. It demonstrates the pressure exerted on the woman to ensure her *imbawula* remains warm and never runs cold. On the one hand, the term depicts sexual pleasure as a woman’s responsibility and the man as a receiver of such and implies that if the man enjoys sex with the woman, they will both be happy ²⁷.

It portrays the woman’s understanding of the vagina as powerful in bringing excitement to the relationship; hence, it needs to be maintained at a certain state. Participants also shared that during the *umemulo* ritual, they are expected to jump over a fire as part of virginity testing. It is believed that if one is a virgin, there would be no sparks and therefore, the fire will not burn them. This also shows how the vagina is related to fire.

5.2.3 *Iziko/istofu*

According to the *iziko* museum website²⁸, *iziko* refers to a hearth/fireplace/centre or hub. In certain contexts, it may sometimes refer to an institution, particularly one that is a centre for important knowledge. In Zulu culture, *iziko* occupies the central space of the traditional homestead. It is found *exhibeni* (in the kitchen). This is the same room where *umsamo* is found. It is considered the most important and sacred part of the home. *Iziko* is usually found at the centre of *ixhiba* (the kitchen), next to the pillar. It acts as a centre that divides where people should sit. Men sit on the left and women on the right.

In addition to the role of cooking, *iziko* provides warmth and security, deterring animals from wandering into the homestead. The space the fireplace creates serves as a hub for the social activities of the household. Here, stories are told, knowledge shared, and important cultural traditions — dances, rituals, and ceremonies — take place. While most traditional homestead spaces in Southern Africa are divided along gender lines, the fireplace is where all are equally welcome (SAFIRE, n.d.).

Participants metaphorically used *iziko* to refer to the vagina, as it is also found at the centre of the female body and provides warmth and pleasure during sex. The use of the word also emphasises the importance and sacredness of the vagina, as the participants would often

²⁷ This will be discussed further in relation to vaginal practices.

²⁸ Iziko (n.d)

describe it as a holy place, implying the need for it to be respected and treated with care by both men and women. For women, taking care of the vagina meant cleaning and maintaining its decorum, whilst men were expected to pleasure it and incentivise the woman for good sex. For this reason, women who are unable to maintain relationships are perceived to be cold (*bayabanda*) and unable to keep their vaginas warm.

- ❖ *The vagina is like iziko, hidden at the centre of the woman's body and providing warmth. It creates a strong bond between lovers. As you know, iziko ngomlilo (there is no hearth without fire), therefore it is important to keep the vagina in a good state. Ishise, ingabandi (it must be always hot and never get cold).*
- ❖ *Ikati ke akufanele neze lilale eziko, (a cat must never sleep at the fireplace) if that happens, it means the space is cold, and cooking has not taken place in a while. You must cook more often. Do you get it? If you do not get it forget about it. [other participants burst in laughter].*

In the above narrative, the participant quoted the proverb *ikati lilele eziko* (the cat is sleeping at the fireplace), which is used to describe extreme poverty whereby the cat sleeps at the fireplace because no cooking has taken place in a while. Within the participant's context, the proverb indicates the absence of sex for a long time/sexual poverty, implying that one should never go a long time without sex. It also refers to the temperature of the vagina, implying that it must be kept warm for the sexual experience to be pleasurable.

The word *iziko* was interchangeably used with *isitofu*, a Zulu variation of the word 'stove.' Like *iziko*, the stove is found in the kitchen. A room is still considered the heart of the home' in every household. With the move to urban areas, the traditional set-up of the homestead changed. Most homes now use kitchens with electric stoves instead of *iziko*, so participants would also use the word *istofu*. Participants stressed the importance of a properly working stove during meal preparations as this would ensure that the food produced is good. Without a good stove, meals cannot be prepared, hence the use of the stove metaphor by participants:

- ❖ *Istofu leyanto (referring to the vagina), nawe uyazi ke isitofu kufanele sihlezi siku 6. That thing (referring to the vagina) is like a stove, and as you know, the stove should always be on Level 6.*

Level 6 is the highest for most electric stoves, indicating good/high heat. If the stove is hot, it is believed that the food will cook faster. Participants use this metaphor to imply that the vagina should be at the right temperature so that the partner can enjoy and ejaculate faster. Heat is mapped to a variety of desirable sexual attributes. A female partner can roast, burn, or be warm. Such expressions allude to the literal warmth of the vagina.²⁹

The good stove metaphor refers to a vagina that is deemed desirable due to how it has been maintained. Like an electric stove, the vagina is perceived as in need of proper maintenance and regular cleaning. A malfunctioning stove may have a negative impact on the food that is being cooked, and so does a vagina that is not well maintained affect the sexual experience. Therefore, women use different objects to enhance vaginal heat.

5.2.4 Additional pertinent names for the vagina³⁰

Another common word included *ushukela* (sugar), which refers to something sweet, exciting, and enjoyable. Yet another was *ikhekhe/kuku* (cake). Again, cake is usually part of celebrations and is considered characteristically delectable, sweet, and delightful. This indicates that the participants perceive the vagina as enticing and pleasurable to their male partners. Food metaphors are also used about the vagina, and *ukudla* (eating) may be used when referring to coitus.

Makoni (2015) maintains that the naming of female genitalia serves as an ideological space on which gendered socio-cultural practices are produced, legitimated, perpetuated and contested. For the study participants, using euphemisms and metaphors is facilitative in their conversational style. The words used to refer to the vagina are a result of culture, social learning, and communal processes. However, the use of euphemisms (*izihlonipho*) about the vagina is applied as a special language to identify and understand each other within their circle. Their communal understanding and acceptability within their group are evident. These terms may not be necessarily universal within the isiZulu language but function as group identifiers and may differ from other communities.

Contrary to other studies which consider the use of euphemisms as marginalising towards women (Msibi & Rudwick, 2015; Rudwick & Shange, 2009; Finlayson, 2002), the vocabulary

²⁹ See Emanatian (1996).

³⁰ There might be other names for the vagina, but I have focused on those used by participants in this study.

and naming of the female genitalia through the use of euphemisms represents shared terminology that, is comfortably used and understood within their communication patterns. Whilst there is a significant difference in the linguistic behaviour of the naming of genitalia and sex between men and women, the use of euphemistic language/metaphors is liberating as it was facilitative in their conversations about their bodies, sexuality, and sexual pleasure. It seemed both preferable and acceptable to them.

The euphemisms enabled them to converse confidently about their vaginas positively and break cultural silences whilst creating their own identity and carving a dynamic social space for themselves. These metaphors challenge the socially accepted etiquette in the public domain and construct beliefs and attitudes about sex and sexuality whilst developing the character of cultural communication. They are also crucial to the communication process as they express the linguistic richness of isiZulu language although used indirectly to express ideas (Lusekelo, 2015). The meanings that they attach to their genitalia demonstrate a reconstruction of the cultural meanings attached to the gendered female body, which determines people's attitudes towards sex and influences their beliefs about what normal and deviant sexuality (Manohar et al., 2020). The alternative meanings produced by participants indicate what Makoni (2015, p. 71) describes as "Alternative African women" who view themselves as active agents in their own identification. They recast the vagina as an "active engulfing orifice rather than a passive one" (Braun & Wilkenson., 2001, p. 157). This represents a contestation of connotations inherent in the terminology that is used about female genitalia and sexuality. This digression from normative labelling depicts sexual empowerment, agency, self-determination, and a quest for control over their bodies.

In addition, the dual meaning understanding of sexual agency can be deduced from the participants' use of euphemisms. This might have resulted from socialisation depicting traditional femininity, as Connell (1987) indicated, which tends to comply with women's subordination and accommodation of the pleasures and desires of men. However, the women in the study did not completely comply with the dominant cultural understanding of sexuality, whereby women are seen as passive sexual subjects for men. Their endorsement of euphemisms depicted an understanding of sex as a reciprocal activity where both men and women obtained benefits and rewards.

Whilst the women had to prepare the space and provide good sex, they were also able to choose whom they could have sex with, when, where, and how. It was, therefore, evident that they

could “undertake actions to influence their own situation and their own benefit”.³¹ Although euphemisms can be seen as a product of social power relations which exist within society, forbidding women from freely talking about their bodies and sexual pleasure, the women in the study used them to navigate unequal sexual relationships.

Language is not used equitably and often restricts women from ways of talking that will empower and liberate them (Hudson, 1996). However, the participants’ communication strategies showed how they communicated about sex at an intimate level and, after that, used *hlonipha* language in the public domain. They used social labelling practices to construct and define their gender identity. However, this produced culturally specific meanings related to their bodies and may have affected their lived experiences (Mokoni, 2015; Tetela, 2002). Selikow (2004) comments that language (which is a product of culture) has an impact on sexuality and sexual practices among youth in urban South African townships and can be used to develop certain sexual practices.

Within the context of the study, women’s understanding of their genitalia influenced a range of vaginal enhancement practices. Braun and Wilkinson (2003) argue that most academic research on the vagina does not consider/silences women's voices and experiences. Examining the use of *hlonipha* language was therefore essential in understanding how the women perceived the socialisations about their vaginas and created meaning. The *hlonipha* discourse presented both notions of radicalism/liberation and conformity to the socially constructed meanings of the vagina. Whilst it enabled the women to have conversations about taboo subjects, it influenced how they constructed and understood their vaginas. It influenced perceptions about how the vagina should look and feel, thus the use of vaginal enhancements and engaging in vaginal practices.

5.3 Vaginal practices

The use of *hlonipha* language depicted the participants’ understanding of the social and cultural meanings attached to the vagina, which was connected to how they interpreted the world. Language was used as a vehicle for the transmission of cultural knowledge and effective means of activating patterned cognitions³² about the vagina. This, in turn, influenced how the women

³¹ See Ssali et al. (2007, p. 7).

³² See Krauss and Chiu

created and maintained their sexual identity, using aphrodisiacs to keep the vagina at a perceived desired state to enhance sexual experience. These included food, big pharmaceutical industry products and other complementary alternative medicines, as discussed below.

Participants used words such as *izibambelelo*, a word derived from *ukubambelela* (holding on), which implies that a man will hold on to the partner who is using these enhancements and never let go, *izimbumbuthi* (boosters for sexual performance), and *imixovo* (*mixtures/combination of substances*) *izibunge*. Another word used was *izinamathelo* derived from *ukunamathela* (*sticking on to something*) implying that if someone uses these, the man will remain *with them*.

5.3.1 Food beliefs

The participants' narratives illustrated how gender roles and expectations regulated food consumption. (Brumberg, 1988). In the study, the participants' use of food in vaginal practices illustrated how they were influenced to maintain sexual health. Participants intimated the importance of diet in keeping the vagina healthy and desirable. Food was associated with and contributed to the taste of the vagina. It was either used for eating, steaming or intra-vaginal insertion. Whilst participants affirmed that food is the most important aspect of vaginal health, common taboos and beliefs about food were presented, which were located in the process of socialisation. Certain foods were discouraged, especially during puberty, whilst some were encouraged. They therefore had a considerable influence on how the young women understood their present relationship with food and their sexuality.

- ❖ *I was taught that there is nothing more important than what you eat. You are basically what you eat, whatever odour that comes out of your body is created by what you eat. I was advised that if I develop certain things, I should change the way I eat.*

Some warnings were against particular foods classified as harmful to female hormones. The remark indicated these: *My grandmother advised me against eating eggs, cheese, and peanuts. She believed that these would cause my body to develop faster and increase my hormone levels.*

Another participant demonstrated the direct link between food and the female sexual drive. Furthermore, she discussed how gender disparities play a role in food consumption.

- ❖ *Kwakuthiwa uma sidla o-cheese, ubisi, amaqanda, ama-dairy products nokudla okunosawoti sizosheshe sithombe, sibe nempene sifune abafana. Okuxakayo ukuthi obhuti bami abancane kunami babehlala nobaba badle amakinati. Ubaba wayeze abagququzele ethi amakinati ukudla kwamadoda. We were told that if we ate cheese, milk, eggs, other dairy products, and salty food, we would enter puberty before time and have a high sex drive. The confusing part is that my dad would encourage my little brothers to eat peanuts, claiming that peanuts were good for men.*

Another participant alluded to the direct implications of food for her vaginal health:

- ❖ *We were told to avoid Coke (Coca-Cola), greasy eggs, cheese, and coffee. Allegedly these cause vaginal wetness and bad odour.*

5.3.1.1 *Ginger*

While participants had evolved in their relationship with *various* foods they were socialised into during childhood, some had continued to embrace these foods. In contrast, others actively avoided specific foods and beverages. These included Coca-Cola, which was believed to increase vaginal wetness. Instead, Stoney Ginger Beer was the preferred thirst-quenching drink believed to have some health benefits, including vaginal enhancement. The women had been encouraged to drink it instead of Coke.

- ❖ *I do not recommend Coca-Cola, it causes unnecessary discharge in the vagina, as you know, a vagina should not be too wet as it may risk being accused of infidelity.*

Another participant interjected with the following remark:

- ❖ *If you are craving fizzy drinks, you would rather have Stoney Ginger Beer.³³ At least this one is good for women's health, and it creates heat down there, which is good for sexual pleasure.³⁴ But then again, Coca-Cola kills sperm when consumed with brown bread, which could be*

³³ Stoney is a fizzy drink inspired by the traditional recipe for gemere (a seTswana traditional ginger beer drink) mostly celebrated for its ability to quench thirst (Coca Cola Company, n.d.)

³⁴ The issue of 'heat' will be further discussed in the following chapters.

effective against unwanted pregnancies. So, you can drink it only the morning after unprotected sex to prevent pregnancies. Otherwise, it is bad for your health, not only the vagina but also kidneys, it can give you kidney stones.

Another participant added the following:

- ❖ *Ehhena, si right i-Stoney angani sino ginger (indeed, Stoney is good because it has ginger). Ginger, garlic, and turmeric are good for your reproductive system. They clean you inside out. Also, ginger is good for prevention of unwanted pregnancies. So, instead of drinking Coke after unprotected sex, you can drink Stoney to prevent any unwanted pregnancies.*

Food constitutes part of cultural history and social structure. Anthropology of food documents how food has long been used as part of traditional and complementary medicine (Xavier, 2019). Such food use is evident in the narratives presented by participants, showing how food is perceived to have healing effects. Ginger is a native Asian plant used as a spice and traditional medicine since ancestral times. Its medicinal use treats nausea, vomiting, dysmenorrhea, heavy menstrual bleeding, gastrointestinal infections, colds, flu, arthritis, and other inflammatory conditions (Stanisiere et al., 2018).

A Zambian study on cervical cancer by Hoomonga et al. (2019) reveals that most women douched with ginger, which helped heal vaginal lesions. Another study by Shabanian et al. (2017) found that vaginal creams which had a ginger component were more effective in curing vaginal candidiasis as the rhizome of the plant contains appropriate anti-fungal and anti-bacterial properties. They found that most vaginal creams with ginger components proved to be effective. Chesstifar et al. (2022) argue that ginger is good for mefenamic mothers suffering from labour pains and contains powerful wound-healing properties. Their study on Indian women revealed that ginger ointments were more effective in healing birth scars.

The participant's narratives demonstrate distinctively how food and beliefs about food and sexuality are "constitutive and reflective of gender construction"³⁵ in the Zulu culture. It demonstrates how some food taboos may be gender/age-specific (Asi et al., 2018). Whilst

³⁵ See Counihan, (1998).

adolescent girls and young women are prohibited from consuming certain foods which are assumed to increase sex drive, adolescent boys and young men are permitted but also encouraged to increase consumption and use other traditional methods of increasing sexual pleasure, which include using the enema and taking herbs (Ndida et al., 2011).

This emanates from how young women are expected to preserve their virginity till marriage. Interestingly, whilst conversations about virginity for young Zulu women are well established, there is a noted absence of men and their sexual health needs. Neely (2021) argues that food taboos related to Zulu women are part of the *hlonipha* custom, where women are expected to avoid certain foods as a sign of respect for the existing customs. Cultural factors strongly influence the foundational methods and perceptions about sexual pleasure. Avoiding certain foods is encouraged as a sign of respect for young women's bodies and cultural beliefs.

Although food is primarily essential for nourishing the body, every society has prescribed dietary customs which serve sociocultural and symbolic roles that go far beyond the mere nourishment of the body. Nutritional items and products do not qualify as food until they are culturally accepted as fit for human consumption. Therefore, the avoidance/consumption of specific types of food is a widespread phenomenon (Abdussallam and Kaferstein, 1996).

5.3.1.2 *Cow's meat*

In Zulu communities, food holds an important cultural significance. All major ceremonies/rituals involve food that is shared according to complex rules and structures which reflect social values and structures. For example, the distribution of (cow) meat during rituals and ceremonies is decided according to age and gender. Certain meats are viewed as delicacies and, therefore, only served to men. These include *inhloko* (cow head) and *isibindi* (liver), and *inhliziyo* (heart); *ibele* (breast) is given to daughters who have been married off to other families because it represents *ukuncela* (the process of breastfeeding) which is nourishment. It is believed that whenever they return home for rituals, *bazoncela* (they return for breastfeeding). *Ukuncela* represents transferring knowledge and advice from the older women to the younger ones.

Ibele, therefore, does not only symbolise food but is also a source of nourishment for the body and mind. Home is believed to be a place of endless nourishment and knowledge sharing. This is expressed in the idiom *ukukleza kogwansile* (directly drinking from a cow's breast full of milk), which refers to drawing knowledge from experts/learning from the best. When a married

woman visits her mother's house, it is said that *uyoncela* (she will receive comfort/pampering and draw wisdom from her mother). Young men eat *Iphaphu (lung)*, and the stomach is given to *omama* (the elderly woman).

5.3.1.3 *Fruit and vegetables*

Whilst the young Zulu women in the study were discouraged from consuming dairy products and peanuts, they were encouraged to eat certain fruits and vegetables:

- ❖ *We were encouraged to eat fruits and vegetables (mostly green vegetables, including imifino). My grandmother would give me spinach every time I went on my periods. She said it was high in iron and would help me since I was anaemic.*
- ❖ *One of the famous fruits we ate when growing up was the pineapple. We were told that the pineapple wears a crown because it is a fruit exclusively for women. That is why it is beautiful. That is why it glows. Bananas are shaped like the penis and were therefore reserved for males at home.*
- ❖ *We were also encouraged to eat pawpaw, avocados, lots of ginger, turmeric, and garlic (especially during puberty). It helped with things such as period pains and keeping the vagina healthy and fresh.*

These narratives reaffirmed how certain foods were promoted for consumption, hygiene, and social health reasons. This is common for women in other parts of the world where events such as the menstrual period, pregnancy, childbirth, lactation, and other events that govern the human life cycle are linked to dietary rules and regulations (Meyer-Rochow, 2009). There are health implications when Women are deprived of nutrients from certain tabooed foods. Azumah (2011) points out that this could lead to iron and protein deficiencies. Most societies within sub-Saharan prohibit women and young children from eating certain foods due to ethnic/cultural beliefs and taboos.

There are culturally influenced, systematised sets of rules that determine the combination of foods they may not consume. Purnamassari (2010) asserts that Several food taboos exist to encourage people to avoid certain foods based on causal explanations that may be supernatural, logical, or sometimes difficult to explain rationally. These taboos are respected and observed

in most parts of Africa (Annan, 2011). They are neither refuted nor accepted scientifically. These taboos influence people's behaviour and lifestyle, which prohibit certain foods whilst allowing others (Gadegbeku et al., 2013).

5.3.1.4 *Milk and eggs*

Whilst these taboos and social constructs were acceptable to a certain extent, participants intimated how they had questioned some while preserving others. They questioned and reflected on what they were told, providing the space for new knowledge relevant to them. One major example of this was the rejection of the belief about consuming dairy products, which participants had rejected, as some of the *imixovo* used included dairy products as part of the ingredients.

- ❖ *They forbade us from enjoying dairy products because they believed it would cause our bodies to develop faster and trigger sexual desires. Babethi sizosheshe sithombe ebese sifuna abafana (they believed that we would reach puberty at an early stage, which would increase our sexual curiosity and desire). I now mix cinnamon with warm milk and drink it when I have period pains or for sex purposes. The mixture cleanses the female reproductive system and keeps it fresh.*
- ❖ *Cinnamon and milk is also good for women who want to fall pregnant. Ubamba eskuseni kusa, awudabuli! (You fall pregnant easily without hassles).*

The virtues of cinnamon were discussed, and a participant referred to its application directly to the body instead of consumption.

- ❖ *You can also mix cinnamon with plain yogurt to cleanse your reproductive area. This will balance your PH levels. This one will require you to take a shower before getting intimate with your man since the yoghurt may release some discharge with a bad odour. All the dirt will come out through the vagina, leaving it fresh.*

Cinnamon is an indigenous spice which has also been used as a traditional medicine to cure gastrointestinal complaints and other ailments in addition to its culinary uses. According to Singletary (2019), spice has been significant in the amelioration of female endocrine and

reproductive disorders. It also improves insulin, blood glucose and lipid levels and contains anti-inflammatory/antioxidant properties. It also enhances menstrual irregularities and regulates menstrual bleeding. An Iranian study by Jaarfarpour et al. (2015) demonstrated how women have used cinnamon for the reduction of lower abdominal pains, menstrual bleeding, nausea, and vomiting. The spice is also viewed as safe and effective in the treatment of dysmenorrhea in young women. Other participants used eggs and milk:

- ❖ *You can also mix two raw eggs with a glass of milk. This will boost your sexual performance, uzoloku umfunile nje umfana (your man will not get enough of you).*

These narratives reaffirmed the cultural significance of food in the Zulu culture. In this culture, like in most African contexts, all major transitional crises of life, including the rites of passage, are marked by the ceremonial consumption or distribution of food. Food usage commonly symbolises social relationship changes as it is distributed and shared according to complex rules and customs that reflect social values and structures (Fieldhouse, 1995). In most African contexts, women are the main cultivators of food and understand it as nourishment to the body.

The women in the study understood nourishment from food as more than the mere nourishment of the body for growth and protection/prevention of illness. They viewed it as a vital component of their sexual lives, as certain foods were believed to boost or negatively affect female sexual health. Female sexual health was linked to sexual performance and sexual pleasure. In educating themselves about food through reflections on how they had been informed by reading magazines and listening to conversations about sexual health, the young women in the study had rejected food restrictions, such as dairy products and nuts, which they found essential for their sexual health.

Avoidance of certain foods for the participants was due to beliefs that they would delay the onset of puberty stage and the desire for sexual relationships that began at this stage of development. Therefore, the delay in the onset of puberty would delay sexual activity. This is central to Zulu culture, which promotes abstinence/avoidance of penetrative sex until marriage. A delay in sexual activity is crucial in avoiding teenage pregnancies and providing protection against STIs. Abstinence is mostly emphasised for girls more than boys, which is why boys are permitted to consume most of the foods that girls are prohibited from.

Food taboos encourage young girls to remain sexually abstinent until marriage or at least until they can make informed decisions about sexual relationships.³⁶ Abstinence from sex was also believed to help one to mature emotionally (Dlamini et al., 2009).

Ukufuna abafana represents the female sexual desire, which is problematic for adolescent girls. Females who engage in early sexual debut are perceived as lacking morals. Any expression of sexual desire, especially outside the confines of marriage, is taboo. Otu (2016) argues that this suppression of sexual freedom and self-determination for women is a product of gender myths, which condition women's perceptions of themselves in the world and limit their opportunities. Otu (2016) views this as the strongest patriarchal weapon against women.

Whilst young Zulu women are taught to respect and care for their bodies, they are not given the freedom to have sovereignty over them. They remain the properties of others. Before marriage, they belong to their fathers; after marriage, they become their husband's property. Young Zulu women are conditioned to be ashamed of openly expressing their sexuality. They are often made to feel guilty about having sexual feelings and thus submit to the psychology of sexual negation (Buthelezi, 2006).

Studies by Garcia-Palez et al. (2004) confirm that frequent dairy consumption, especially milk, can be associated with higher endogenous growth hormones, indicators of growth and development. These products may also contain measurable amounts of steroid hormones, influencing breast density or pubertal timing. They may also be linked to total fat intake, which may be associated with breast cancer.

When appropriately consumed, dairy products could be a major source of energy and nutrients, which are essential for women's reproductive health. Some studies associate increased intake of dairy products and decreased risk of endometriosis (Qi et al., 2021). The prebiotic compounds found in dairy products may help stabilise vaginal health, thus promoting the growth of healthy bacterial populations. Whole milk improves fertility. Raw eggs and milk may quickly ensure protein consumption and increase brain function while strengthening the immune system. They are also a reliable source of energy which provides the necessary stamina to the body (Da Silva et al., 2018).

³⁶ This is usually after the age of 21 when the *umemulo* ritual has been performed.

The scientific evidence produced in academic journals about the relationship between dairy products and hormonal changes which may result in the early onset of puberty in young girls validates the beliefs about the consumption of dairy products and the early onset of puberty held by the participants' communities. This resulted in forbidding participants from consuming these. Although the beliefs were based on observation and cultural knowledge, they resonated with scientific knowledge. This shows the value of African traditional knowledge passed down through oral traditions, including folktales, myths, riddles, and socialisation. Although African cultures have never been short of observational knowledge and had their own resources in pre-colonial times, they did not habitually rely on writing³⁷ hence, writing about food beliefs and sexuality within the context of Zulu culture remains limited.

5.3.1.5 *Food as a contraceptive*

Apart from dairy products and eggs, other food uses were identified for steaming and contraception were also elaborated upon.

- ❖ *Papaya is another important fruit; the seeds can be used for contraception. Pineapple is also important but can be quite acidic, its water is essential for PH balance which is good for reduction of odour. Then there's guava and seedless grapes. Every girl must eat that. The leaves from the guava tree can be used for vaginal steaming.*
- ❖ *The purple onion is extraordinarily rich in antioxidants. You can either eat it raw in your salads or put it in a bucket filled with boiling water, add some garlic and steam. You can also push a clove of garlic into the vagina for a few minutes and then take it out. It will clean all the dirt.*

Most academic studies about pawpaw seeds and contraceptive properties were conducted on rats, where the contraceptive effect was confirmed. However, studies relating to female fertility and paw paw seeds are limited. Whilst there is not much that has been produced through scientific research, some health websites mention the use of pawpaw seeds and ginger as contraceptive methods and provide methods for usage. For the participants, this was common knowledge resulting from socialisation. In other words, contraception is not a new phenomenon in the Zulu culture. For example, virginity testing has long been used to delay early pregnancy.

³⁷ See Wiredu (n.d.)

Apart from virginity testing, the practice of *ukusoma* has existed for centuries to prevent unwanted pregnancies and loss of virginity, as explained earlier in this thesis.

Moorole (2020) argues that despite the introduction of modern contraception, African indigenous methods of contraception are still common among communities. For example, a woman would consume ash and water as emergency contraception. This shows how traditional and indigenous knowledge still informs young women's behaviour and understanding of SRH.

5.3.2 Indigenous knowledge and sexual health

The influence of health messages on human behaviour has been a subject of interest for medical anthropologists over time.³⁸ Whilst the prohibition of young women from consuming certain foods is based on indigenous knowledge and cultural beliefs, scientific studies prove that dairy products such as milk and yoghurt contain calcium and protein, which could positively affect women's fertility (Da Silva et al., 2018). This indicates the value of indigenous African knowledge and the role of language in the social construction of symbolic meanings around women's sexuality.

Wane (2011) states that indigenous knowledge is valuable within the African context and is often experiential, spiritual, and cumulative, which is undocumented but constantly renewed. African women have always played a key role in food production, understanding its consumption and food security through knowledge embedded in oral narrative philosophy and transmitted from generation to generation (Ojwang et al., 2021). The previous chapter emphasised the role of older women as knowledge producers in the Zulu cultural context, guiding younger women on sexual reproductive health and well-being. This generational transfer of knowledge is important for African feminists who emphasise the "African ways of knowing" (Wane, 2002).

5.4 Conclusion

This chapter explored the cultural connotations and symbolism attached to the Zulu woman's vagina. The participants' narratives affirmed that socio-cultural and language factors facilitated their understanding. Participants included metaphorical interpretations to inform how they constructed their own understanding of the vagina.

³⁸ See Hadon et al. (2019).

The use of metaphors such as *imbawula*, *iziko* and *isitofu* suggests specific properties of the vagina, i.e., providing warmth and therefore, the necessity to be always kept hot. The *umsamo* metaphor speaks to the importance and sacredness of the vagina, whilst *inkomo* suggests value and celebration. Whilst these metaphors demonstrate sexual agency and enable women to converse about their bodies and sexuality freely, they incorporate a dual meaning, which also shapes their understanding of the desired vaginal decorum. Whilst the words used are a product of culture, they use them to portray the vagina as powerful and sex as a reciprocal activity whereby both partners experience pleasure. The cultural connotations of the vagina also extend to deliberating on the suitable diet for women. They reiterated that certain foods may interfere with vaginal health or encourage early sexual activity, which is considered taboo in the Zulu culture.

CHAPTER 6

FACTORS INSPIRING THE USE OF *NTSU* AS A VAGINAL SEXUAL STIMULANT

6.1 Introduction

This chapter addresses Research Question 3, which aimed at exploring the specific factors which inspire young Zulu women to use smokeless tobacco/snuff as a vaginal sexual stimulant. In addition, the chapter will explore the perceived implications of such. I first explored the participant's history of usage as it related to their sustained use and their existing beliefs about snuff, particularly as a vaginal stimulant. The perceived health benefits and inherent dangers will also be explored. The data shows that snuff usage as an indigenous practice in most Zulus/Africans is prevalent for various reasons, including traditional beliefs about health and healing, spirituality, social norms, and stimulation. Whilst studies use smokeless tobacco (SLT) and snuff separately, the latter is inserted into nostrils. I use the word snuff adapted from *isinemfu* (the Zulu word for SLT).

6.2 Historical indigenous practice

According to participants, the use of snuff has been a widespread practice over the years for a variety of reasons. They referred to it as *ugwayi wamakhala/ugwayi wesiZulu* (a type of tobacco that is usually inserted into the nostrils/a type of tobacco that is authentically Zulu). They further shared that they witnessed senior members of their extended family enjoying it. This would be a homemade mixture of certain indigenous plants, including *inhlaba* (aloe). It is, however, unclear what other herbs are used for the homemade mixture. Other studies investigating the use of SLT indicated that the homemade mixtures may include menthol, tobacco leaves, aloe, shea butter and other essential oils (Ayo-Yusuf, 2006a; Adedigba et al., 2018). A participant validated this practice by saying, “*Snuff use is not a new phenomenon in the Zulu culture, our predecessors have long used it for various reasons*”.

Another participant interjected:

Yes, the use of snuff is not a new trend. Snuff is indigenous to the Zulu culture; our ancestors used it for several reasons. We also have our reasons for using it, but then again, it has been associated with stigma, and the use of snuff is

viewed as ubuqaba (barbarism) by some people. That is the problem with Westernisation; everything else that is African is viewed as backwards.

Most of the participants perceived Westernisation as a rejection of African indigenous knowledge systems (AIKS) by Western scientists who presented information from a Eurocentric, colonial perspective, thereby delegitimising local knowledge. This has been a concern for African feminists over time. Jagire (2013) recognises that AIKS is based on teachings collectively owned and understood experientially by communities, which have been ignored for a long time. Furthermore, they have undergone mutations, underdevelopment, subjugation, and exploitation (Odora Hoppers, 2001). The seminal work of Lewis (1973) demonstrates how colonialism structured the relationship between anthropologists and their subjects, thus resulting in exploitation. Furthermore, the anthropological core of knowledge and insights was built on exploiting the natives. European colonisers declared their knowledge as the only legitimate knowledge and their ways of knowing universal, thus providing a monolithic worldview that gives power and control to the West.

Apter (1999, p. 578) refers to this imperial culture as anthropology's heart of darkness and explains how the representation of the "African other" was a sign of imperial domination. In certain instances where indigenous knowledge and indigenous practices are acknowledged, they are compared to Western methods and are often labelled as 'barbaric/backwards and superstitious, savage, and primitive (Akena, 2012). Colonial scholars failed to understand the ancient and proven indigenous knowledge based on cognitive understandings and interpretations of the social, physical, and spiritual worlds. Dei (2000) argues that such knowledge encompasses concepts, beliefs and perceptions of local peoples and their natural built environments. Writing from an African feminist perspective, Wane (2002) encourages a focus on the holistic nature of indigenous knowledge and argues that IKS is more fused than separated. It is knowledge informed by past, present, and future ancestral voices.

Whilst South Africa is a complex country with a wide range of cultural beliefs, colonial authorities and, subsequently, the apartheid government's imposition of a Western worldview undermined the existence of the African worldview, particularly on issues including healing and spirituality (Mokgobi, 2014). The missionary invasion and introduction of Christianity created a binary opposition between the believers/converts and unbelievers. Whilst the Western worldview praised believers, it described those who continued practising African methods as greedy and selfish and labelled them as *amaqaba* (uncivilised and superstitious people), thus

totally ignoring African philosophy and promoting Western traditions (Mda, 2000). This in itself was problematic as it brought an invalidation and delegitimisation of African culture and traditions.

Like other indigenous knowledge, philosophy and practice, knowledge about snuff has been passed on through oral traditions. Scientific writings about the possible health benefits of using snuff are limited, and the practice remains, to a greater effect, part of local knowledge. Even when written by Africans, scientific studies on snuff often adopt a Eurocentric perspective. The tone is condemning and focuses mostly on the potential harm of using snuff.³⁹ The focus is mostly on intervention and encouraging people to stop using snuff. These studies also do not pay much attention to the perceptions of snuff and sexuality. This is not to say that such studies do not exist, but they are limited, making this work significant in contributing to the knowledge gap.

Although they may include the perceived health benefits, the focus is always on discouraging its use by alluding to the possible health risks and doing little to verify whether the beliefs could be justified.⁴⁰ The studies tend to be instructional that people must cease using snuff as it may harm their health. Studies investigating homemade snuff mixtures and their health properties are also limited. This may be due to the commercialisation of the product, which has undermined the indigenous homemade snuff. Women who use snuff are labelled barbaric in society and therefore must keep it a secret. This will be discussed further in the following sections of this chapter. Participants were adamant that this results from Westernisation and academics' misunderstanding of African practices. This is reflected in the narratives below:

❖ *That is why it is commonly referred to as 'ugwayi wesintu/wezalukwazi. It is part of us, something that we, as a Zulu nation, have been using for different purposes over the years. It is not new. The ways in which it is used may have evolved, and the reasons for its use may have increased, but nothing is new about snuff. The problem is people like you, the academics, who want to problematise everything.*

³⁹ See Peltzer (2001) and Ayo-Yusuf (2006a)

⁴⁰ See Ayo-Yusuf et al. (2004) and Adedigba et al. (2018)

The participant pointed at me when making the above remark, whilst the other participants laughed. She then told me to relax, as she was not fighting and said how much she could not wait to read what I would have to say about *ntsu* (snuff)]

Another participant began singing, with the rest of the group joining her. They clapped hands, and some performed a Zulu dance (*indlamu*)

The lead singer sang, “*Alikho icala le ntsu!*” and the rest of the group joined in singing, “*Awulethe idosha silibheme, alikho icala le ntsu!* (*There is no harm in using ntsu snuff. Pass it unto us so we can smoke it*).

The participants' perspective on how academia tended to scrutinise and question everything was firmly rooted in their observations of the impact of Western education on African indigenous knowledge systems and traditions. This form of education, introduced by colonial missionaries to spread Christianity⁴¹, often subverted crucial elements of African cultural beliefs, ultimately failing to address the needs of African communities. While Africans preserved certain cultural practices, the process of cultural adaptation, coupled with Western laws and customs integration, introduced an educational system that starkly contrasted with the pedagogical tools employed in indigenous African societies. This contrast undermined many African beliefs and ways of being, knowing, and doing.

Kaya (2013) explains that the Western worldview does not understand non-Western knowledge's holistic nature and approach. The educational structures inherited from colonialism rely on cultural values that differ from African contexts, thus rendering the African educational system Eurocentric due to the adaptation of Western models and theories adopted and applied in African contexts. Therefore, the problematisation of certain practices without acknowledging indigenous knowledge and beliefs that form their basis can have negative effects.

As an academic conducting research, participants perceived me as representing such a culture. Even though this was casually pointed out, I had to explain my positionality and emphasise my objective was to understand and explore the effect of colonialism on AIKS. Moreover, the participants' critique revolved around how Westernisation devalues traditional practices. Their

⁴¹ See Felix (2012).

spontaneous singing added to their criticism by being a form of resistance against prevalent Western perceptions of snuff.

Music and dance have always been central to African culture (Bush 2006). Writing within a Zulu context, Masuku (2012) asserts that music and dance are inextricably linked to the Zulu culture. People sing and dance for assorted reasons. Masuku (2012) contends that Zulus may also use songs and folktales to express their philosophy/worldview of life. According to the participants' world view, snuff is an innocent and widespread practice, mainly because snuff is believed to be indigenous to the Zulu culture participants.

The claim of indigeneity of snuff by participants depicts a sense of pride. The use of snuff, particularly by older women, remains common in the Zulu culture. Studies conducted among other cultural groups in South Africa also report women's use of snuff as an indigenous practice. According to studies by Peltzer et al. (2001) and Ayo-Yusuf et al. (2006b), South African women are likelier to use snuff than men. This is alluded to by Mashite (2011), who stated a high snuff prevalence amongst elderly women in South Africa compared to men. Interestingly, participants from the study indicated that at least one female family member used snuff from which they observed its use. This was mostly the grandmother, and in most Zulu contexts, the use of snuff is associated with older women; hence, it is commonly known as *ugwayi wezalukwazi*.

6.2.1 *Ugwayi wezalukwazi*

Participants intimated that snuff is also known as *ugwayi wezalukwazi* (the kind of tobacco that elderly grandmothers use) as it has been commonly used by elderly women in Zulu communities. This may sound gendered. However, it is not to claim that elderly men do not use snuff, but participants paid attention to its use by women. In doing this, the participants wanted me to understand that the use of snuff by women is not unique to them but has been an old practice which should not be frowned upon:

- ❖ *Snuff has long been used in our culture. Growing up, I would observe my grandmother and her friends sitting under a tree, talking and enjoying snuff. She would even send me to get it for her under her pillowcase, where she used to hide it.*
- ❖ *The use of snuff is not a new phenomenon for us. Our grandmothers and other elderly women in the community have been using it. We even call*

it ugwayi wesintu/wesiZulu to indicate a form of tobacco that is traditionally ours.

The role of elderly women as repositories of knowledge in the Zulu culture was discussed earlier in the study. In the participant's discussion of snuff, it prevailed that a grandmother had a significant role in (indirectly) exposing young girls to snuff. Participants shared how they would be sent to the shops to purchase snuff for their grandmothers when they ran out. Another participant would escort their grandmothers for grant collection (*impesheni*) and observe the grandmother sharing snuff with her friends. Some participants would steal the snuff whenever their grandmothers were unaware and sniff it into their nostrils or tuck it into the lower or upper lip, depending on preference. This, however, cannot be argued as their initiation to snuff as it was an occasional act of childhood. The participants explain their behaviour:

- ❖ *As a child, I would steal a bit of snuff whenever my grandmother asked me to get her idosha ⁴²for her, but I was just being naughty as any child should be. I was not serious. This would be occasional, unlike how I use it now as a grown woman.*
- ❖ *As much as we stole snuff from our grandmothers, back then, we thought of it as ugwayi wezalukazi. In fact, which is how it is still known in the present day. When you go to the shops and ask for ugwayi wezalukazi, they know you are talking about snuff. As children, we believed that it gave wisdom to our grandmothers since they oversaw everything. Also, you would think that it was only used by illiterate old women, which is not true, for instance, my grandmother was a teacher, but she liked her snuff.*

The assertion by participants depicts a strong bond with their grandmothers, who were their source of inspiration, setting standards and goals for them. The narratives above also demonstrate that the relationship between the granddaughter and the grandmother was mutually beneficial. While *ugogo* could ask her grandchildren to run errands for them, the grandchild could explore the grandmother's snuff and get a sense of the effects brought by smoking. However, this was not a habit and was abandoned by the granddaughter at some

⁴² *Idosha* is a small container used for packaging snuff.

stage, as it was viewed exclusively as the wisdom of the old. In some contexts, these grandmothers were traditional healers or responsible for conducting *umsebenzi* (rituals) in the household and would describe snuff as *ugwayi wedlozi/wabaphansi*.

6.2.2 *Ugwayi wedlozi/wabaphansi*

Participants also associated snuff use with spiritual and religious purposes. Furthermore, they explained how snuff is most common among traditional healers, such as *izangoma* and *izinyanga*, who use it to connect with the spiritual/divine world. It is also associated with *abahlushwa yidlozi*. The people who are initiated by or undergo training or rituals associated with ancestral spirits, often as part of traditional healing practices. Participants explained a ritual involving snuff, demonstrating the significance of snuff in Zulu spirituality:

- ❖ *As you know, African spirituality has four elements: water, air/wind, fire, and earth. That is why we burn impepho, representing the fire during ancestral rituals, ebese sikhwifa amanzi (we then spit water), representing both the air and water and then sprinkle snuff (representing the earth). This depicts the significance of snuff to our spirituality. Also, when we consult with a sangoma, before they throw the bones, they burn incense (fire). Then, we must blow into a bag (air). We find water in the indumba, and then snuff will be sprinkled so that ukuhlola (divination) may be a smooth process. Please show me if you know one sangoma who does not use snuff.*

Traditional healers complained about the banning of snuff and all forms of tobacco during the COVID-19 outbreak in South Africa, as it interfered with their traditional practices. Trapido (2020) described the healers' dissatisfaction with being unable to perform *ukuphahla* (intercession/asking for guidance and blessings or giving thanks to the ancestors). Snuff is essential for creating communication channels between the living and the dead. It is also essential for purifying the body, mind, and soul. One participant aged 34, who is also a traditional healer (*isangoma*), elaborated on the importance of snuff in the spiritual world:

- ❖ *Mina ngiwuMakhosi (I am a sangoma. Therefore, I use snuff for several reasons. When you put snuff on your nostrils, your air passages are open. This makes you conscious. Ingqondo iyahlakazeka (your mind becomes clear), making it possible to connect with the spiritual world.*

Umoya (the spirit of our ancestors) connects easily with you as your third eye is open. Some things are spiritual. You will not understand them if you want to use science and evidence. Into yabadala lle, ngeke nje uyizwe uma uzothatha ngokuthi wena ufundile kwanjani njani (this is an ancestral issue; you will never understand it if you approach it from an angle of education and all that). I also use snuff during the process of ukuphahla. This is where I communicate with amadlozi. I often use a glass of water, two white money coins, 2 candles, impepho (incense) and snuff. Angikwazi ke ukuphahla ngaphandle kwesinemfu, kungazifanela nje nomdlalo ngoba phela ogogo nomkhulu kufanele babheme (I cannot practice ukuphahla without snuff, it would be in vain because the ancestors need to smoke). Ukuphahla helps me in my practice as a sangoma as it clears my visions and enables me to assist my clients. Even when I do inhlolo/ukuhlola (divination), whereby I use bones and other elements to connect with a patient's ancestors, I need snuff; otherwise, whatever I am doing will be in vain.

The participant above presented *ukuphahla* as a personal experience where one communicates with one's ancestors and seeks answers on different pertinent issues. Her experience with snuff was within a spiritual space and promoted her well-being, positive thoughts, tranquillity, serenity, and increased inner awareness. In addition, it provided a harmonic balance between the body and the soul, even for her care as a healer. Moreover, she expressed her frustration with the disjuncture between Western science and African spirituality and reaffirmed the connection to ancestors. Her statement depicted snuff as an essential element of spirituality and connection to the unseen world.

Guzman (2011) states that whenever a need arises to connect to the spiritual world, sometimes there is an inexplicable relationship through plants. Plants are significant and understood comprehensively, considering physical and spiritual aspects.⁴³ They are used as vehicles to access the other regions of the cosmos, and their inhabitants remain significant in connecting humans and non-humans. They may be a special mediator of intersubjective interactions (Bourscheid et al., 2022).

⁴³ Also see Pagnocca et al. (2020).

This assertion is essential to understanding the participant's statement on how scholars approach issues about (African) spirituality without addressing its holistic nature. Whilst it may be scientifically impossible to prove the connection between snuff, spirituality, and its connection to the unseen world, the participants' narratives present snuff as a herb rather than tobacco. Within the African space, herbs have traditionally been identified as promoting healing.

Within the African context, spirituality is a way of knowing that embodies a connection to the Creator or God. This may also be described as Spirit or Cosmos. It is a way of life and a constant reminder to stay connected with the inner self (Wane et al., 2019). Therefore, some aspects cannot be explained using Western science. This is consistent with other studies that have associated snuff with spirituality. Bourscheid et al. (2022) assert that snuff is common in Shamanic practices as it is believed to be the transport that takes healers to the world of spirits. They maintain that pre-colonial archaeological material noted the use of snuff for religious purposes. Several ethnic groups also use snuff to present medicinal and ceremonial properties, which lead to physical vigour, clearing of the airways, connecting to the metaphysical body and purification of the body and spirit.

Texts referring to African spirituality and religion are limited, and knowledge is often passed down through oral repositories of African stories and songs from which people have distilled their spirituality, healing methodologies, and well-being (Thabede, 2008). Limitations on scholarly work related to African spirituality were also noted by Ross (2010). Singh and Bhagwan (2020) recommends more attention to African spirituality's therapeutic richness, particularly the methodologies used by its adherents.

A study conducted in Limpopo province⁴⁴ by Ayo-Yusuf et al. (2006b) also notes the use of snuff and sprinkling of water during *ukuhlola* (divination), whereby a consultative process with the ancestors to determine what is going on in someone's life and the workable solutions for such are inquired from the ancestors. This may be done by a *sangoma* or *umthandazi* who interprets the message from ancestors to the patient. These may include the interpretation of dreams and any other communication the ancestors send. Snuff is significant during this process as the diviner would sprinkle some snuff into the bones before shaking the bag and spreading the bones on the floor to find message signals. The snuff may also be sprinkled onto

⁴⁴ Limpopo is one of the provinces in South Africa, the population is Pedi, Tsonga, and Venda speaking.

impepho that is burnt during *ukuhlola*. In this process, snuff is significant for purification and healing practices.

6.2.3 *Snuff in healing*

The use of snuff in healing is believed to be an indigenous practice, as asserted by Santos and Soares (2015), who argue that the use of snuff for medicinal and ceremonial practices is prevalent among many ethnic groups. Participants highlighted the significance of snuff in healing illnesses, including toothache and headaches. They presented a holistic understanding of health and well-being linked to culture, the physical body, and the spiritual world. Participants specified how snuff was used to heal ailments:

- ❖ *I used to suffer headaches. It felt so strong, like meningitis. I was in and out of the hospital without getting help. A friend advised me to take snuff, that is when I become better. I no longer struggle with headaches because every time I am in pain, I take ntsu and feel better after a few minutes.*
- ❖ *It also helps with toothaches. If you have pain, just take a little bit and rub it on your tooth, and before you know it, you will be back to your normal self.*
- ❖ *Our grandmothers and traditional healers also used snuff mixed with other herbs to heal ringworms and other skin conditions and to remove poison from snake bites.*

Participants believed that whilst some illnesses may be considered normal, they may still be linked to the spiritual world. For example, inexplicable headaches and other forms of physical pain may represent a sign of ancestral calling and may be healed through snuff:

- ❖ *I suffered from migraines for an exceptionally long time, going from one doctor to another. Scans came back clear, but I was still suffering up until I consulted a traditional healer who advised me to use snuff. I was healed and could not understand it until later when I found out that I*

have a gift⁴⁵. We must not forget that ancestors are intricately linked to snuff. Now, you cannot explain such things through knowledge gained from books; it has deep, spiritual meaning that can only be understood within African contexts.

The participant above alluded to the intersection of social, cultural, and spiritual elements. Headaches indicative of ancestral calling have been noted in studies seeking to understand the relationship between illness and this phenomenon. Ancestral calling, often called *ukuthwasa* in Zulu culture, is a significant concept in African and indigenous belief systems. It is the process through which an individual is believed to be called by their ancestors or spirits to become a traditional healer and undergo training and rituals to address spiritual or healing needs within their community (Van der Watt et al., 2021; Van der Zeijst 2020; Kubheka, 2016). In addition, the participant affirmed how her personal experience did not align with the Western world.

As presented by participants, the therapeutic use of snuff is by Charlton (2004), who argues that tobacco products were already prevalent in the 19th century for healing ringworms, athlete's foot, ulcers, and wounds. Nann (2021) also highlights the use of snuff in healing snake bites as a common trend in Swaziland. Writing in defence of tobacco from a South African perspective, Mosime (2004) maintains that traditional healers still prescribe tobacco cocktails for healing several ailments. They resort to snuff and other herbs for curing ailments.

Mosime (2004) highlights that patients have reported positive outcomes from these rituals, especially in cases involving mental illnesses, schizophrenia, epilepsy, and other health issues. Mosime (2004) argues that many African women use snuff daily for various purposes, such as African midwifery and obstetrics. Moreover, a practice known only within their communities, *Bagwera /Abakhwetha*⁴⁶ rituals, involves the use of tobacco products.

The African traditional understanding of illness differs from the West as it is based on a different belief system. From the African perspective, illness may be either caused by attacks from evil spirits or result from unhappy ancestors who may punish people who do not obey them through witchcraft and spell casting. Therefore, diagnosis involves discovering a disease's

⁴⁵ The participant referred to ancestral calling. She is currently navigating that aspect of her life but has not gone for initiation yet. To this day, she uses snuff only for headaches.

⁴⁶*Bagwera/Abakhwetha* refers to young males undergoing a group circumcision rite to mark the arrival of adulthood.

physical (organic) and spiritual causes, which can be identified through divination (White, 2015). This explains how treatment may diverge from Western practices and incorporate elements that have faced criticism, such as snuff. A participant explained a snuff cocktail treatment for an ailment caused by witchcraft:

- ❖ *Snuff is effective as temporal treatment for umeqo when mixed with Vaseline and applied to the affected areas. This will reduce the pain and chase away evil spirits. Further consultation with a traditional healer is needed because this mixture only treats the symptoms. Root causes are embedded in witchcraft, which is why they require a skilled healer.*

Umeqo is a form of witchcraft in which sickness is believed to be caused when crossing or stepping over *muthi*. The sorcerer smears harmful substances on the objects that the victim is likely to step over (Mchunu et al., 2019). It is associated with bad luck or sickness. If the individual steps over the *muthi*, they may be bewitched and suffer accordingly. It may cause swelling of the legs and other bodily parts, lower back pains, bad luck, disability, and death (Nene, 2014). The snuff and Vaseline mixture is used temporarily whilst assistance is sought from a traditional healer. The long effects of untreated *umeqo* may result in permanent paralysis on the lower body. Apart from *umeqo*, snuff is also used to treat *isichitho*:

- ❖ *Snuff is also used with other medicine/herbs when washing off isichitho (a witchcraft spell used by wicked people to make the victim less attractive to their partner or to other people in general. It destroys everything that one tries to build or accomplish) and isinyama (a misfortune or bad luck in form of an evil dark spirit or cloud that follows a person causing them suffering and halting their success). Snuff would be mixed with other herbs or given together with other herbs depending on how the traditional healer prepares their medicine. However, snuff alone does not treat isichitho. It must be in combination with other herbs.*

Isichitho is a curse through witchcraft. It causes suffering, *creating havoc and disarray in the person's life, including rejection and self-hatred*. It is usually inflicted by jealous individuals to cause the victim to become less attractive or scorned by their partners (Zukulu et al., 2012). The *isichitho* preparation may include a mixture of bad luck, charms, certain parts of insects, birds, or animals. It may include *isichitho sezintwala* (lice), which causes an itching sensation

and feeling that something is moving in the body, especially around genital areas. It could also be through a mole sent to destabilise the family/harmonious life in a home. This could result in a disruption of a love affair or the end of a marriage. Other types could use *umzondo* whereby a spell of unpleasant smell is used to separate lovers (Mcetywa, 2001).

In South Africa, *isichitho* is treated by traditional health practitioners (THPs), including *izangoma* (diviners), *izinyanga* (those who use herbs) and *abathandazi* (faith healers who mostly use prayer (*umthandazo/umkhuleko*)) who play a significant role in the healthcare of the majority of South Africans using methods based on social, cultural, and religious practices (Zuma et al., 2016). THPs are mostly known for assisting with healing concerning aspects, including spiritual issues not covered by Western medicine. This is done through diverse types of *izintelezi* (concoctions used to cleanse aura and chase away evil spirits and bad luck)⁴⁷ Traditional healers may also use emetics, herbal mixtures, steaming, and licking medicine (*izincindo*). Enemas would also be used to remove the supposed illness-causing poison believed to be inside the stomach or the pelvic area. The treatment of *isichitho* is aimed at healing the body internally (though some rituals may be performed externally). The treatment is aimed at removing *ilumbo* (the confusing magical effect and symptoms of illness caused by witchcraft). *Iqhomolo* (Natal gasteria) and *Umaphipha* (*rapanea melanophloeos*) are types of *izintelezi* used in the treatment of *isichitho*, the plant leaves are crushed and mixed with other herbs, which may include snuff and aloe (Khumalo, 2018; Zukula et al., 2012). The above participant also affirmed this mixing.

The narrative depicts snuff as sacred and significant in spiritual cleansing rituals performed by traditional healers. These rituals restore harmony and balance whilst assisting an individual to maintain a spiritual connection with their ancestors, transcend difficulties and move forward. It is evident that snuff use has been prevalent for centuries for various reasons in the Zulu culture, and its understanding evolves with each generation. *Isichitho* may also affect one's sexual performance, causing STI-like sicknesses and female sexual dysfunction (FSD).

⁴⁷ Translation from Melusi's everyday Zulu's Facebook page.

6.2.4 Snuff as a (vaginal) sexual stimulant

6.2.4.1 Libido and ntsu

There was consensus among participants that snuff/*ntsu* increases libido and motivation for intercourse, making this one of the major reasons for preference. However, different perceptions of the methods and frequency that should be used were prevalent. Some participants frequently used it for smoking and as a vaginal sexual stimulant. The smoking happens through an action of either chewing or tucking a portion of snuff on the upper/lower lip (oral use) for a couple of seconds and then spitting it out or snorting. According to participants, this provides a tingling sensation to the body:

- ❖ *I smoke it as ugwayi wamakhala (I snort), then feel a nice, dizzy tingling sensation.*
- ❖ *I usually tuck it under my lower lip, wait for that nice dizzy feeling and then spit it out.*

Even when used orally or snorted, participants believed that *ntsu* could result in sexual arousal and enhancement as a result of the dizzy and tingling state it provided for the body. The participants explained as follows:

- ❖ *Kuvele kuthi damu kamnandi, kuthi zwi, ngivele ngilangazelele kakhulu, nocansi ke lapho luba mnandi ngoba umzimba u-relaxile. (I would feel a nice, relaxing feeling and get aroused; the sex would be enjoyable given the relaxed state of the body).*

Another participant interjected, doing a little dance and looking proud:

- ❖ *Ngibiziwe namhlanje and sengiyidlile. Iyangisebenzela! (I got an invite today; I have already eaten it =ntsu. It works for me)*

This participant referred to inserting *ntsu* into the lower lip as eating it.

Ukubizwa (getting a call/invite from an intimate partner) indicates sexual desire. When called, a woman will prepare herself for sex. These calls are colloquially referred to as “dick appointments”. Participants shared how these caused them to feel wanted, desired, and self-assured. According to participants, attention from a male partner is fulfilling. The initial hit from getting attention from the male partner feels good, hence the little dance from the

participant. Other participants also bragged about *ukubizwa*, indicating how it boosted their self-esteem, as discussed later in this chapter.

The relaxed feeling described by the participant, as indicated above, could have been the result of the temporary intoxication that *ntsu* is claimed to cause. The intoxication might relax the body, thereby enhancing sexual feelings. The nicotine in snuff causes the brain to release adrenaline and creates a buzz of pleasure and energy, which accompanies the sexual feelings and activity. However, the buzz may quickly disappear, causing the person to want more snuff, thus leading to addiction. Studies focusing on the relationship between snuff and libido are limited. However, studies are focusing on the use of nicotine and sexual arousal. These tend to focus on men and the use of cigarettes as opposed to women and snuff.

The available literature suggests that nicotine, which is found in snuff and cigarettes, can have deleterious effects on women's SRH. It can also affect sexual activity in women by narrowing the blood vessels, thus reducing blood flow, which is necessary for arousal and orgasms. The use of nicotine is also reported to result in female sexual dysfunction (FSD) and minimise lubrication during intercourse. Nicotine may also have a negative effect on sex hormone levels required for sexual desire and reduce clitoral blood flow during intercourse, which would affect orgasm (Yilmaz et al., 2018; Harte & Meterson, 2008). However, the information provided by the participants indicated a positive relation between the use of nicotine and sexual function, which contradicted these studies.

Participants' narratives mentioned the addiction resulting from *ntsu* used orally or by snorting:

- ❖ *Ngiyayiqalekela (I crave it).*
- ❖ *You get used to it and crave it. You feel like something is missing when you have not inhaled it.*

The craving expressed by participants could have been due to the nicotine. The European Scientific Committee on Emerging and Newly Identified Health Risks (SCENIHR) (2008) report found that most smokeless tobacco products, including snuff, contain nicotine, which makes them highly addictive and hazardous to health. Ayo-Yusuf et al. (2005) describe *ntsu* as a type of moist snuff (smokeless tobacco) drug which contains nicotine, butanol, and tobacco-specific nitrosamines. Other studies show that snuff produces dependency as nicotine is absorbed into the bloodstream in the same stream as when smoking (Kristina et al., 2008). The nicotine in snuff is easily absorbed through the lining of the mouth in quantities sufficient to

cause addiction. In turn, nicotine addiction causes the person to need more of it to get the same feeling as the first time (Talcott et al., 2015).

6.2.4.2 *Vaginal use of ntsu*

For vaginal use, *ntsu* is either inserted into the vagina or added to water used to wash the vagina. Participants mentioned insertion at least twice a month. Participants expressed several beliefs about the effects of *ntsu* and explained how it was vaginally inserted:

- ❖ *You take a normal pantihose, tear a piece, and then add a bit of ntsu to it, fold, and then tie a not. It is better if you get the ntsu that is not too dry and then insert the pantihose stashed with ntsu inside your vagina. You must ensure that the pantihose has a string hanging like a tampon. You must then push it deep inside your vagina and wait about thirty minutes to an hour. You will feel a hot tingling sensation, then remove it after two hours. Ensure you wash thoroughly with water afterward because ntsu has quite a strong smell.*
- ❖ *Leaving a string makes it easy to pull it out. You have to insert it a couple of hours before visiting your boyfriend. It prepares the vagina by raining out access water (discharge) and makes the vagina tight like a virgin. When your partner penetrates you, he will feel the heat caused by ntsu. Ushisa bhe! (You become hot like flames).*

The participants believed that snuff increased vaginal temperature creating the heat desirable to men. The heat was believed to increase pleasure during intercourse. A hot, tight and not-too-wet vagina was considered perfect. The participants believed that it eventually became loose due to sexual intercourse. These beliefs were linked and constructed concerning cultural perceptions of virginity and chastity. Greer (1999, p. 2) observes that in many cultures, a tight vagina as narrow as a rectum is seen as desirable.

Braun and Kitzinger (2010, p. 265) assert that this ideal of vaginal tightness is transmitted through a wide range of cultural contexts, including the media, comedy, conversational interaction, slang and so on. Participants believed that frequent sex and childbirth could alter the state of the vagina, which indicated a need to tighten it to ensure pleasure for both partners. Participants revealed the following about vaginal tightness:

- ❖ *There are many things that can change your vagina. For example, I gave birth naturally. My grandmother advised me to steam. I would sprinkle sna (a synonym for ntsu/snuff) into the water that I steamed with. Kwasheshe kwaphola, kwabuqana izinyama zabuyela (It healed very quickly and became tight).*
- ❖ *Iyabuqanisa, ivale kuthi thaqa ukuze ube mnandi. When he begins penetrating, you may feel a little pain, but once he's inside, he moves like an anaconda, ulizwe eqolo (you will feel it the penis on your lower back)⁴⁸. You have to use it a couple of hours before visiting your boyfriend because you do not want him to taste it when he goes down on you (oral sex).*

While participants believed that *ntsu* was essential for vaginal hygiene, they explained that it should not be inserted frequently as it could cause harm to the vagina. The appropriate insertion should be on a fortnightly basis (twice a month). However, external washing of the vagina with snuff-infused water could be done frequently. Participants believed that frequent insertion of snuff could cause illness. One participant shared how her frequent use of *ntsu* caused *isilonda* (a sore) in her vagina:

Inside the vagina hole where the urine passes, there is a part that burns like ingubo esuke ihlibikile (a burnt cloth), and that is how the chemical/ugwayi/ntsu would enter. And that is why I had to go to the clinic and get 5 pills. Before I went to the clinic, I would use MCO. I learned that I must not insert it every day, just twice a month. Frequent insertion may cause isilonda because this thing is really hot. It may burn the vagina when inserted every day. But washing is fine. You can just put ntsu in chilly water and rinse your vagina. Just not insert it every day.

The participants' narrative showed that *ntsu* could have a harmful effect on the vagina due to its burning sensation. However, they believed that illness was not caused by snuff but improper usage/overdosing. The five pills referred to by the participant were antibiotics known as flagyl, commonly used to treat bacterial infections of the vagina and trichomoniasis, a sexually

⁴⁸ The expression 'ukulizwa eqolo' was used by the participant to explain the feeling of sexual pleasure from deep strokes.

transmitted disease caused by a parasite) (Drugs.com, n.d.). Participants believed that *ntsu* cleansed the vagina and rid it of unnecessary discharge. However, improper usage and poor hygiene were believed to cause genital cancer.

Participants added the following about the use of *ntsu*:

- ❖ *When you use snuff, the dirty substances are excreted. Hose when you pull out the pantihose, Kunezinyama ezixebukayo (there is some skin that peels off). Wonke udoti uyaphuma (all the dirt comes out).*
- ❖ *It cleanses the inside (vagina). Then you use it to bathe and insert/pour it into your vagina again. It pulls out ubisi olungasile olungene kuwe ngenkathi umuntu wesilisa, umfana efaka into yakhe lugijime kuqala lizokwena ingxavangxava (it pulls out discharge which enters you during sexual intercourse with a man, such dirt could make your vagina wet and tasteless).*

Another participant, a traditional healer, shared how she had assisted clients who overdosed on *ntsu* in their vaginas:

- ❖ *Daily usage (insertion) of ntsu in your vagina can cause cancer – it appears like a cancer, although it is not quite cancer. That is because all the dirt inside goes to the bladder. I give the client imbiza (herbal tonic) for them to drink so that they can urinate on all the dirt. I also advise them to visit the clinic for screening. You cannot insert ntsu every day. It will be difficult to clean it out, and then you will get sick.*

According to participants, *ntsu* is harmless when effectively used. The following remarks reflect how the participants perceived the appropriate use of the substance:

- ❖ *There is the threat of cancer because us women are not the same. You insert the pantihose into the vagina, and then when you bathe, you do not cleanse the vagina thoroughly. You should insert your finger when cleaning the vagina to remove the dirt.*
- ❖ *You should use a finger because if you had sex with your partner if you sit with us, we will smell that you smell like sperms, and all the dirt stays*

inside you. Even if you use a condom, the dirt remains inside you. Remember, condoms have chemicals.

- ❖ *When cleansing the vagina, you should use your finger and remove a whitish substance. A natural white substance inside the vagina. We do not know what it is called. Its texture is like porridge. We know that the vagina cleanses itself naturally, so the white substance is part of its natural cleansing. Sometimes if you are wearing black underwear, when you take it off, you can see the white substance as a stain. It is so strong it bleaches the underwear.*

All the participants broke into laughter at the last remark. One participant commented, “*That's a result of its self-cleansing*”, which led to more laughter from the participants.

- ❖ *When you cleanse, you insert a finger uzikope ugijime icorner nje uzikope (you must insert a finger deep into the vagina) and remove the dirt. It is better if you have a manicure. It is easier to clean the vagina. Kanjalo nje. Ibuya igcwele ithe mpu (Just like that. It comes back full of dirt/white substance). Look at this one with long nails [points at another participant] uthi nje kwa (it is easy for her), but also be careful and gentle so you do not scratch the vagina. Once you are done washing with snuff, you have to rinse with clean chilly water. ntsu will not cause cancer if you take care of yourself.*

The narratives showed the correlation between beliefs about vaginal hygiene and illness among participants. Whilst participants perceived *ntsu* as essential for keeping the vagina hot and enhancing sexual experience, improper usage of the substance coupled with poor vaginal hygiene was believed to have harmful consequences. However, this is not revealed by scientific studies of cancer. The knowledge of the use *ntsu* as an indigenous practice convinced participants that the substance was harmless. This suggested that the participants’[beliefs about the effects of *ntsu* were socially learned. This knowledge motivated the use of *ntsu* as an intravaginal insertion and the beliefs about using *ntsu* and disease, which were enhanced by experience.

Whilst studies have focused on the oral use of snuff and oral cancer, there is still limited research on vaginal usage of snuff and genital cancer. The main focus has been on vaginal

practices in general (Hilber et al., 2010; Scorgie et al., 2009; Fonck et al., 2001). These studies examined vaginal practices and concluded that the health and social consequences for such could include cervical cancer and HIV, as some of the inserted substances may cause inflammatory lesions to the vagina and cervix. The seminal work of Tokuhata (1967) argued that women who used tobacco were at risk of genital cancer. However, recent studies do not adequately address this issue. The relation between the use of snuff as an intravaginal insertion and genital cancer remains unclear.

It is also stated that vaginal practices could alter the vaginal milieu, thus causing irritation which may increase the risk of cervical cancer. Women who use vaginal practices are reported to be at 86% risk of cervical cancer compared to the women who do not use them. There are other risks, including the human papillomavirus (HPV), which may lead to cervical cancer (Alcaide et al., 2014; Lees et al., 2014; Turner, 2008; Mutyaba et al., 2006; Brown et al., 1993; Runganga et al., 1992).

6.2.4.3 *Peer pressure*

The use of snuff is not a new phenomenon among Zulu women. However, the understanding and uses of such have evolved from being something that was reserved for elders, healing rituals, and connecting with the ancestral world to common use in vaginal enhancement practices by participants in the study. The previous chapters shared how knowledge about sex is generated from the home (especially elderly women such as the grandmother), school, media, and peers. Participants acknowledged that sharing of knowledge about the use of snuff as a vaginal sexual stimulant is mostly common among peers. There is a shared belief that once a woman experiences sex with more than one man, the vagina becomes loose and therefore needs some tightening. The participant below affirmed that much of this is derived from conversations with both female and male peers:

- ❖ *The thing is that we are told we become loose, and the vagina does not grip onto the penis. We hear this when males discuss us because we have male friends as well, and they will discuss their sexual experience with another girl and say that she was loose, and he will say that the vagina doesn't grip at all, that he was in and out but didn't feel anything.*

Other participants stated the following:

- ❖ *From my experience I have a lot of male besties and they will tell you that sometimes they will be having sex with a woman only to discover that it is not tight (it = vagina). They will refer to it as that - she is no longer tight, or she is loose. Referring to somebody's private parts (somebody = women), a different sex. These are said by men, and we end up hearing it as well. So, when you use ntsu, it makes you tighter.*
- ❖ *It also happens that when you sit with guys, they talk and share their sexual experiences their friends, and as a woman, you will pick up some points. For example, this other male friend was so disgusted after inviting a particular girl. He said that wafica ingquza inxapha, wafica isqeda, emgodini lapha edamini (he found the vagina too wet, it was ice cold and too wet). So, you listen to such and think to yourself, "I have to do something in order to keep my vagina in a good state". Then you find yourself using things like ntsu.*

The narratives depicted how discussions about sex between male and female peers perpetuate gender-stereotyped sexual behaviours and beliefs. These were shaped by the socially constructed facets of gender that dictate how people should behave⁴⁹. The Zulu family structure is patriarchal, with authority invested in the male household head. Therefore, sexual socialisation in Zulu culture allows men more sexual freedom than women (Gumede & Mathonsi, 2019). In such a patriarchal society, an imbalance of power between men and women means that women are encouraged to preserve their virginity until marriage or at least have one sexual partner at a time.

They are also not expected to date many men in their lifetime and are encouraged to pursue marriage. Whilst literature and narratives from previous chapters of the study suggest the taboo nature of open communication⁵⁰ about sex within the Zulu culture, the participants in the study used communication with male peers as a source of information on how men perceive the vagina and sexual experience with women. This showed a defiance of the existing societal norms by participants, who were eager to pleasure the male counterparts. The information

⁴⁹ See Leftkowitz et al. (2014).

⁵⁰ See Ndida et al. (2011).

sourced from male peers inspired them to produce a vagina that may be acceptable to male counterparts through the use of *ntsu*.

Language stigmatises and normalises words, including *isifebe*, *unondindwa*, *unoyile*, *isikebeleshe*, and *iseqamgwaqo* (promiscuous woman), which women are accustomed to. This use of punitive language is noted in Atanga et al. (2011), who argued that whilst sexually active boys are referred to as *amasoka* (men highly favoured by girls), sexually active girls are referred to in an extremely derogative manner. This gendered privileged use of these labels is pervasive in several African languages. This reaffirms how men continue to be praised for their sexual prowess and how prevailing beliefs that men's sexual desires are uncontrollable are sustained thus perpetuating norms such as multiple sexual partnerships among men whilst punishing women who follow suit (Khumalo et al., 2020). The endorsement of men with multiple sexual partners is the same as *amasoka*⁵¹. This demonstrates yet again the (hetero)sexual double standards which encourage sexual freedom for men whilst women who express sexual freedom are judged harshly. There is a common belief that a woman who has sex with multiple men may end up losing vaginal elasticity, which in turn makes her less desirable to men. This is indicated by the following remark from a participant: “*Also, during our conversations with male peers, they will tell us that with some women they found umgodi (a hole) meaning that the vagina is loose and less enjoyable*”.

These social norms about gender have a strong influence on Zulu female sexual behaviour and cause women to internalise their male peer's beliefs about the vagina. This, in turn, has implications for women's beliefs about the vagina, thus resulting in the use of substances such as snuff to conceal previous sexual experiences by creating tightness so that the vagina may not lose its grip. Women's internalisation of norms about male roles and how such ideas relate to sexual behaviours is also noted by Leftkowitz et al. (2014), who argued that women tend to change their behaviour on their endorsement of sexual double standards. Whilst the women in the study have internalised beliefs emerging from conversations with peers about the vagina becoming loose and undesirable, they also use *ntsu* as a weapon to hide infidelity from their male counterparts:

- ❖ *Sometimes, we use ntsu for ukubuyisa izinyama (tightening) when we have had sex with ikhwapha (an additional secret sexual partner) in*

⁵¹ See Gumede and Mathonsi (2006), Buthelezi (2006) and Hunter (2002)

order to hide evidence from the main partner. There is a belief that men can feel if you had sex with someone else. You have to hide your body count. Your partner must always think that you are only having sex with him.

Apart from conversations with male peers, women also hold conversations among themselves, sharing assorted products that they (can) use to enhance the sexual experience, hence their reference to *ntsu* as *imfihlo yabafazi* (a women's secret). This is because of the stigma it carries. Firstly, it is believed to be exclusively for *izalukwazi* (grandmothers). The word *izalukwazi*, in this context, is also used to refer to people who are incredibly old. Young people who use *ntsu* are often perceived as lacking manners and uneducated. *ntsu* is compared to lower standards in most communities and is believed to be used by women who are uneducated and lack a sense of style.

One participant showed me a screenshot from a Facebook post which read, "*Kodwa angeke ufake intsu emlonyeni owazi isiNgisi (You would not use (orally) insert ntsu into a mouth that understands English)*". In this context, understanding English was associated with being educated. Therefore, the post implies that educated women do not use snuff. However, although the women in the study saw the substance as fashionable, the Facebook post's understanding of *ntsu* was problematic and presented a colonial understanding of indigenous herbs. It is surprising that whilst cigarettes are widely acceptable, *ntsu* is associated with backwardness and stigmatisation.

Whilst the use of snuff as a vaginal sexual stimulant by young Zulu women⁵² is commonly discussed on most social media spaces, it is difficult to determine when a partner is using it, given how women would hide the practice from their partners. Whilst it is socially unacceptable for Zulu women to have multiple sexual partners, participants revealed that in conversations with peers as well as their personal experience, *ntsu* was essential in concealing one's body count. Participants colloquially used the term to refer to having several sexual, which had to be kept a secret to prevent judgment from society and maintain the image of a chaste individual.

⁵² The use of *ntsu* as a vaginal sexual stimulant may not be exclusive to Zulu women as some of the social media pages that I have seen casually discussing the phenomenon include comments from women of other ethnicities. However, Zulu women were selected for the current study.

6.2.4.4 Sexual self-esteem

Participants affirmed the necessity of receiving compliments from their male sexual partners, which validated the use of *ntsu* to boost their sexual self-esteem. In the word of a participant, “*Ntsu adds to vaginal heat and puts the stove at 6. In that way, your partner will enjoy you.*”

Another participant added with a naughty grin, “*Then he will say, ‘umnandi baby (you are nice/I have enjoyed sex with you baby). That is an affirmation, it is like being told that you are beautiful. It instantly boosts your self-confidence’.*”

The narratives above established that self-confidence was linked to self-sexual esteem. Peixoto et al. (2018) describe sexual self-esteem as the value that each person attributes to oneself as being related to sexual competence, sexual orientation, and sexual self-acceptance. He further maintains that people with high sexual self-esteem may experience sexuality in a satisfying way, which is related to greater sexual satisfaction in intimate relationships. This was relevant in the study as participants described sex as a reciprocal activity and emphasised the importance of giving pleasure to their partner and receiving pleasure when reaching orgasms. This is indicated in the narratives below:

- ❖ *If he is enjoying you, he will make sure that he performs so that you can return for more rounds. In that way, you both win. Angithi nobabili niyachama so it is DStv, kumnandi ekhaya! [laughs] (you both climax) So it is DStv⁵³. Everyone is happy at home.*
- ❖ *You will feel it from the way he holds you and how he thrusts you that he is really enjoying you. You will know that uyipheke kahle (you have cooked it—the vagina well), so you are both happy. Sex is not just about lying there like a full chicken, there must be pleasure, and it must be felt on both sides, but that requires you as a woman to prepare your nanazi (vagina) very well.*

The participants’ narratives confirmed that they perceived sex beyond the means of procreation but as also essential for mutual pleasure (Ford et al., 2019; Tamale, 2005). It is highly desirable

⁵³ DSTV is a sub-Saharan digital satellite television direct broadcast service owned by Multichoice with head offices in Randburg, Gauteng Province, South Africa. “*Kumnandi ekhaya*” is a slogan that DSTV uses on their promotional adverts implying that every home that has subscribed to their services is a fun home where everyone is happy due to their interesting programs.

and arousing for them to feel desired by their partners. This is consistent with claims by Peixoto et al. (2018), who asserted that individuals with a higher level of sexual self-esteem have acknowledged being more sexually satisfied. The participants infer the presence of the power dynamic, which in turn grants their own sexual gratification. This gratification of sexual urges is an existential human need. Therefore, various practices and norms remain sacrosanct to meet these sexual needs (Alabi, 2020).

6.2.4.5 *The power dynamic*

Sexual desirability is synonymous with the power to attract a partner's attention and negotiate in a relationship. Participants intimated the use of *ntsu* as a means to improve their erotic capital. Hakim (2010) coined erotic capital as a combination of sex appeal, liveliness, talent for dressing well, charm, social skills and, most importantly, sexual competence. Participants explained the importance of maintaining power through *ntsu* to control their partners and achieve material gains.

- ❖ *It–ntsu helps with... – okay since I already have a child, I'm not a virgin but uma ngimfuna lobhuti ukuthi ngimthole kahle akhiphe yonke into nanayo, kufuneka mina ngigcwale ngaphakathi (If I want this man to give me everything I want, my vagina has to feel like a virgin's one). As much as I have my own money, I want his so I can buy things such as alcohol ngoba vele imali yamanyala (because anyways it is money obtained from sin).*
- ❖ *You can be attractive (physically) as much as you want, but if your vagina is cold, you are useless. That is why I use ntsu, to ensure that my vagina remains hot all the time so that my partners can enjoy me. You see, men ... When he enjoys you, he gives you everything that you want. You do not have to beg for his money; he will just give it to you, and you can also control him. You sleep with him whenever you want. Sometimes, he would call, and you can tell him that you are busy or just ignore him.*

The narratives depicted the women's agency and sexual prowess, proving how sexual access remains a woman's principal bargaining chip. Participants use their sexuality to control their male partners, as claimed by Hakim (2010). This debunks the construction of African women

as sexually passive objects controlled by men. Anfred (2007, pp. 101-102) asserts the following:

Women in Africa live in many worlds. One of these worlds is ruled by Christian prescriptions regarding female sexual subordination, modesty, and morality. Yet, it coexists with a world where sex and cooking are spheres of autonomy and power.

The participants presented an understanding of the vagina as powerful and sex as a means of autonomy and power in relationships. This was strongly expressed in the discussions about *umgezagolo* and *ukufebenza*.

Umgezagolo was coined by the participants, combining two words, *ukugeza* (to wash/bathe) and *igloo* (vagina) participants, which refers to what they did in preparation for sex. *Ukufebenza* was the term used by participants to define the practice of seeking material benefits in exchange for sexual acts. These could include money and expensive gifts. The term is coined from two words: *ukufeba* (to have multiple sexual partners) and *ukusebenza* (to work). In other words, some of the young female participants in the study saw sex as labour. They, therefore, felt justified to seek monetary reward as compensation for all the energy they put into looking good and pleasing their partners⁵⁴. They opined that the vagina is not a charity and, therefore, men cannot have it for free. Nevertheless, whilst *ukufeba*, the act of being *isifebe*, a woman with multiple sexual partners and therefore regarded as loose and of low value by society, is a derogatory term participant proudly used to express sexual prowess. The following remarks indicate that the participants saw themselves as powerful agents in sexual relationships:

❖ *I cannot spend my time looking good for a man who will not give me anything. Men always think that sex is all about them, about their own power. They overlook the power it bears for women. Ngiyathula ngibabuke benkewula ngithi weh, ngikudlile loku (I watch them scream =during sex and feel that I have 'eaten' them thoroughly),*

⁵⁴ Maintaining their bodily and physical appearance to look as good as the men desire them to look.

- ❖ *Sex is power to us just as much as it is power for men. Being able to sexually satisfy the man gains you respect. He will always want some because he knows that umnandi (you have a nice vagina).*
- ❖ *At the end of the day, sex for us is about ukufebenza, even if I love you, I expect you to provide umgezagolo. A man cannot just fuck me for free. I am not running a charity here; this is my body, that I take care of.*

The assertions by participants depicted how they used their sexual attractiveness as capital through which they could break male control over their sexuality by allowing themselves a sense of agency. This was shown in how they chose to have sex only with men who were willing to compensate them for it. In the study, women disavowed conventional, ethical perspectives on women's sexuality. Instead, they exploited their erotic capital. Hakim (2010) asserts that the central feature of patriarchy has been the construction of moral ideologies that inhibit women from exploiting and exploring their erotic capital. This was the case for the participants in the study who navigated the cultural standards of being a respectable young Zulu woman.

6.3 Conclusion

This study sought to investigate the motivations behind the use of "ntsu" as a vaginal sexual stimulant among Zulu women and to examine the perceived implications of this practice. Evidence from the data analysis suggested the use of snuff as a common indigenous practice in the Zulu culture. Previously, snuff was homemade with a cocktail of herbs, including aloe and ingredients unknown to participants in the study. However, people now tend to prefer the commercialised *ntsu* brand.

The study revealed that the uses of snuff included spirituality, communication with divine spirits/ancestors, healing diverse ailments and warding off the effects of witchcraft. Knowledge about snuff as a vaginal sexual stimulant and the inspiration for using it for this seemed to have emanated from conversations and information sharing with peers. The commonly shared beliefs were that snuff increased the libido and doubled as a vaginal cleaning agent, sexual stimulant and tightening element. Therefore, the participants used it to gain erotic capital. Nevertheless, they considered it a health risk when used excessively and when the vagina was not meticulously cleansed following snuff application.

CHAPTER 7

CONCLUSION

7.1 Introduction

This chapter presents an overview of the key findings of the study. The chapter begins with a succinct description of the essential findings. Then it examines the relationship between the key findings and the tenets of the theories adopted in this research, allowing for a comprehensive understanding of the influence of cultural socialisations on Zulu women's understanding of sexuality and sexual pleasure. The chapter ends with recommendations for future research.

The study explored young Zulu women's understanding and construction of sexuality at KwaDabeka township, KZN province, South Africa. By extending the conversation to the use of snuff (*ntsu*) as a vaginal sexual stimulant, the study aimed to achieve the research objectives. The first research objective was to identify and discuss the various ways Zulu women receive socialisation about sex and sexual pleasure. The second research objective was to identify how the use of language shapes the understanding and fashioning of young Zulu women's genitalia. The third research objective was to probe the perceived implications of using snuff as a vaginal stimulant.

The study achieved these research objectives by gathering participants' narratives. These narratives led me to conclude that while cultural constructions of a Zulu woman's body and sexuality encourage chastity and view sex as something that should be preserved for marriage, the young Zulu women in the study defied this by having sex outside of wedlock and having multiple partners. At the same time, the cultural understanding and connotations attached to the vagina led to the participants using *ntsu* as a vaginal cleansing agent and sexual stimulant.

In keeping with other research, the study showed that the interviewees navigating heterosexual relationships were continuously concerned about the appearance and state of their vaginas and the ability to pleasure their male partners. These young Zulu women were, therefore, not sexually passive but improved their sexual pleasure and attractiveness by using *ntsu*.

7.2 Summary of key findings

7.2.1 Socialisation of young Zulu women

In the study, four social systems were identified as key in the sexual socialisation of young Zulu women. These included the (i) family, (ii) schools (including initiation schools), (iii) the media and (iv) peers. Sexual socialisation rotated between these institutions, as shown in Figure 7.1 below:

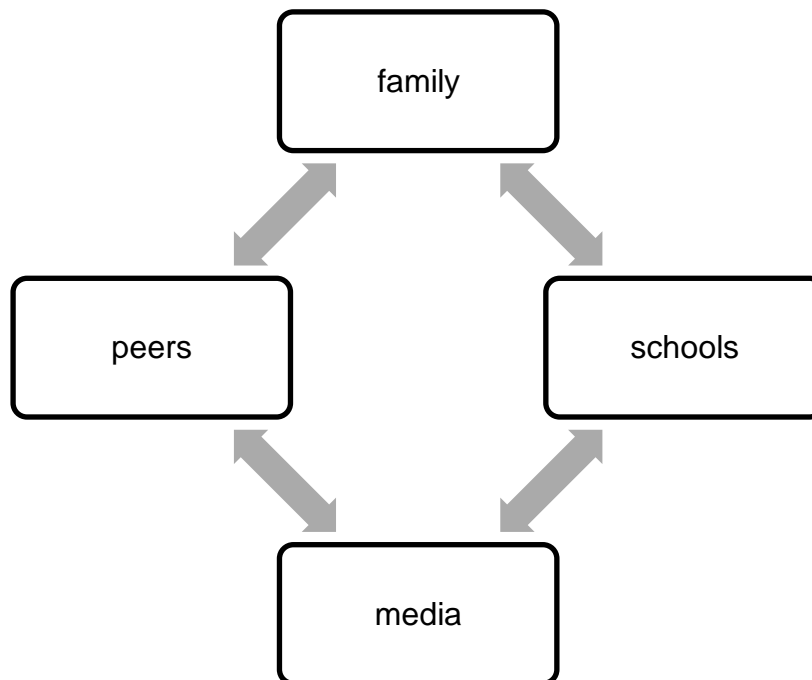


Figure 7.1: Sexual socialisation of young Zulu women

Figure 7.1 above shows young Zulu women's sexual socialisation rotated between four social systems, all of which were vital. However, although how they impacted the participants was similar, they also varied. Within the family and school, communication was often unidirectional and top-down approach. Family elders who were responsible for the sexual socialisation of young women and teachers at school often adopted an instructional, moralistic approach in line with the cultural norm of chastity. Teachers often assume the role of parents within the school environment. The media, although adopting a unilineal approach by showing images but not allowing conversation and dialogue, did provide information not given in the family and school context.

Conversations with the peer group provided the most information and allowed dialogue. The young women could ask each other questions about sex and sexuality. The peer space was described by participants as safe and preferable to the others where information was not forthcoming.

An intersection between culture and religion in the sexual socialisation of young women was identified in the study. In the context of the family, the sexual socialisation of young women was intergenerational and gendered. Fathers were often not involved in the subject of sex, with the expectation that mothers would play a key role in instructing their daughters on the subject. However, the participants found it difficult to hold such conversations with their mothers, who lacked openness. In instances where mothers did communicate, the conversation often followed a top-down approach. It became instructional, lacking reciprocity and involved warning young daughters to refrain from any form of sexual activity and stay away from boys. This presented a visible and problematic lack of parent-child communication about SRH.

The grandmother became the only hope as she was often more considerate, given her traditional role of being the custodian of knowledge in the family and holding a symbolic and sacred meaning. She played a key role in the socialisation of young maidens, teaching them about the importance of preserving one's virginity for marriage. Grandmothers were often open-minded, and granddaughters would often confide in them. They also provided spiritual guidance and encouraged granddaughters to go for cleansing in cases where they engaged in pre-marital sex. This was based on the belief in sex as a spiritual activity. Although grandmothers encouraged the preservation of virginity for marriage, they did advise alternative sexual gratification that did not include penetration, such as *ukusoma* (thigh sex).

Initiation schools led by elderly women played a role in imparting knowledge and training the young women participants in marriage and courtship practices. They encouraged young women to preserve their virginity for marriage but advised *ukusoma* in instances where sexual gratification was needed. *Ukusoma*, however, appeared to be a dying practice since the participants engaged in coitus before marriage. However, the participants revealed that virginity seemed to carry a price still, which was visible in practices, such as the paying of the bride price (*lobola*) whereby more cows were paid if the bride was a virgin and celebratory ceremonies such as *umemulo*.

7.2.2 *Intersection between AIKS and Christianity*

The study found an intersection between indigenous culture and the Christian religion as they both place emphasis on virginity chastity and view sex as something that should only be preserved for marriage. However, whilst indigenous culture allows practices such as *ukusoma* to prevent pre-marital loss of virginity and preserve chastity, Christianity prohibits any form of intimacy before marriage. It regards it as a sin and shameful.

The research findings indicated, nevertheless, that the participants were engaging in sexual activity regardless of the socialisations of AIKS or Christianity. However, conversations with the participants about sexuality revealed an unconscious internalisation of these socialisations.

7.2.3 *Hlonipha language*

The findings revealed that the cultural connotations and symbolism attached to young Zulu women's vaginas were framed, understood, and conveyed through *hlonipha* language (the Zulu language demonstrating respect and reverence). Non-direct language, including euphemisms and metaphors, was used by the participants when referring to sex and genitalia. *Hlonipha* language was used to include the taboo subject of the vagina in the women's daily discourse. This enabled them to communicate about the topic of the vagina and sex, although most studies portray *hlonipha* as a language exclusive to married women. However, in the study, unmarried women also used it in their discourse.

Ethnographic studies have contended that *hlonipha* is a genderlect that places a significant burden on women, emphasising traits associated with femininity and consequently marginalising them by assigning them a socially inferior status within the Zulu community. This genderlect also constrains women from engaging in discussions on specific topics. However, the findings revealed that women participant's use of *hlonipha* when referring to the vagina and sex was liberating.

It became a code enabling them to control conversations about their bodies, sex, and sexuality. The women could carefully select the words they used in a way that influenced their understanding of the vagina and its sex role. The words used about the vagina portrayed it as significant, sacred, powerful, and valuable (*imbawula, iziko, istofu, umsamo, inkomo*). In addition, it was depicted as enticing, delectable, sweet, and delightful (*ushukela, ikhekhe*). The words in *hlonipha* used by the participants portrayed sex as mutual and pleasure as reciprocal. *Hlonipha* not only liberated the participants but also influenced their perception and definition

of the vagina, causing them to use a variety of products to maintain its perceived desirable state.

7.2.4 Beliefs about food

The findings revealed that a culturally embedded understanding of the vagina was prevalent among the participants in their beliefs about food and a suitable diet for maintaining vaginal decorum. Young Zulu women were encouraged to consume certain foods whilst discouraged from eating others. The recommended foods were perceived as beneficial for women's SRH, whilst those prohibited were perceived as detrimental. Food beliefs were also based on delaying the onset of puberty, thus suppressing early sexual desire. These preferences were based on indigenous knowledge. Surprisingly, most of the participants' beliefs about food were compatible with the findings of natural science studies, suggesting that indigenous knowledge could be scientific and needed for further research.

7.2.5 Socio-cultural foundation of the use of *ntsu*

The factors which encouraged the participating young Zulu women's use of *ntsu* were based on their socially constructed understanding of *ntsu* as an indigenous herb used in their culture from time immemorial. This implied that snuff is not a new phenomenon in Zulu society and cultural practices. Its use is part of indigenous knowledge and is formed by ancestral voices. This indigeneity should be a source of pride and power. The strong belief in the harmlessness of *ntsu* was demonstrated through traditional song and dance, which is a generic form of protest in the Zulu culture. This shows the faith and passion that the participants had for *ntsu*.

The research participants questioned the hypocrisy of academic attitudes, for example, towards the use of snuff considered barbaric because of Westernisation and colonialism, perpetuating the misunderstanding of African practices. Participants also questioned academic and Christian impositions on African culture. Hence, the research findings have contributed to the ongoing discourse on decolonisation, underscoring the imperative for a distinctly African perspective on the social construction of young women's sexuality. This emphasis is particularly relevant when directed towards Zulu populations.

The significance of the grandmother as a custodian of knowledge and the grandmother-to-granddaughter knowledge transfer relationship (socialisation) was highlighted in the participant's understanding of snuff as *ugwayi wezalukwazi*. This Zulu phrase roughly

translates to "a medicine for intelligence" or "a remedy for knowledge", referring to traditional or herbal remedies or practices believed to enhance mental acuity, intelligence, or knowledge. These remedies may be used in cultural or traditional contexts, including cognitive enhancement or spiritual development.

The participants intimated how they observed their grandmother's use of snuff when growing up, often associated with spiritual and religious uses. It is believed to possess healing abilities and connect the living with the ancestral world. It is deemed significant in the practice of *ukuphahla* and *ukuhlola/umhlahlo*, warding off evil spirits and healing diseases due to witchcraft.

7.2.6 *Ntsu as a vaginal stimulant*

The use of snuff as a vaginal sexual stimulant was learnt from the participants' peers, who gave specific instructions for avoiding harm and misuse. The participants revealed that the use of *ntsu* in sexual enhancement included chewing, snorting and intravaginal insertion. When snorted or chewed, *ntsu* was believed to boost libido and incite sexual intercourse owing to a tingling, relaxing sensation, and sexual arousal. Intravaginal insertion was believed to drain excess water (discharge), promote vaginal tightness, and create heat.

For the participants, the use of snuff as a vaginal sexual stimulant worked as erotic capital and boosted their sexual self-esteem since it enhanced sexual pleasure for both partners. The ability to provide sexual pleasure gave the participants power, as they could control their partners and revel in their sexual prowess.

7.3 Theoretical considerations

The study delved into the perceptions and social constructions of sexuality of young Zulu women, employing two distinct theoretical frameworks: constructivism and critical theory. By embracing these frameworks, the research sought a comprehensive and multi-faceted understanding of how these women comprehended and shaped their views on sexuality in their specific cultural and social context. This included the cultural socialisations that Zulu women received about their vagina, sex, sexual pleasure, the use of *ntsu* as a vaginal sexual stimulant, and the use of language in shaping their understanding of women's genitalia.

Critical theory was employed to analyse the broader socio-cultural and structural factors that impacted these young Zulu women's perceptions of sexuality. This theoretical lens enabled the

study to uncover and critique power dynamics, social inequalities, and the larger systems that shape their experiences. By doing so, it sought to provide insights into how societal norms, power structures, and oppressive forces might have influenced the way these women constructed their sexual identities and navigated the complexities of their sexuality within their cultural context.

Feminist scholars emphasise that sexuality is not fixed but rather in a constant state of flux, shaped by both repression and liberation throughout history (Butler, 1990). In the context of constructionism and critical theory, the study explored the dynamic nature of sexuality. This exploration was framed through the perspective of African feminists, providing a lens through which I examined the extent to which socio-cultural forces influenced the construction of these women's sexuality, categorising it as repressed or liberated.

African feminism provided a lens to navigate how knowledge about sexuality is constructed and understood within the participant's cultural background context as well as the factors which influence such knowledge. It also helped in understanding the power dynamics in how knowledge about sexuality is shared and how this is being interpreted and, in some instances, challenged by the study participants. It also helped analyse how participants use existing systems such as language to navigate and interpret their sexuality and create a sexual identity. Moreover, African feminism was essential in understanding how interpreting the lived experiences of participants from a non-Western perspective thus deviating from the dualities and dichotomies of the colonial gaze that has been inflectional in shaping and understanding African sexuality. This was essential given that most studies on sexuality in Africa have been shaped by the West (Ezebuilo, 2023). Through using an African feminist lens, I sought to move away from the essentialist attitudes towards African sexuality.

In feminist discourse, there is an ongoing debate about the influence of socio-cultural forces on women's sexualities and the extent to which women themselves redefine existing constructs of female sexuality (Butler, 1990). Sexual agency plays a pivotal role in reshaping sexual beliefs and behaviours. However, sexual agency is not a static concept; it evolves and is continuously shaped by individual experiences, thus having the capacity to modify existing sexual norms, practices, and behaviours.

The research findings revealed how young African Zulu women internalised negative perceptions of female sexuality and how they responded to the inconsistencies between their life experiences and socio-cultural constructs of female sexuality because of their sexual

agency. The sources of their sexual inhibitions, including familial and religious influences, were met with resistance from the women. Furthermore, peer influences played a pivotal role in empowering these women to defy societal and cultural pressures that enforced conventional sexual norms, disrupting the patriarchal grip on female sexuality.

The young Zulu women demonstrated activism in constructing their own sexuality, challenging the exploitation and conflicts that many young African women encounter while exploring their heterosexual femininity. In patriarchal societies, female sexuality is marginalised and devalued, with male power prevailing. However, the participants did not compromise their sexuality to appease male interests and introduced a new power dynamic into their sexual relationships (Connell, 1987; Epstein & Johnson, 1998).

I observed while the amalgamation of sociocultural forces undoubtedly shaped power relations impacting the participants' sexuality in the KwaDabeka township, the young Zulu women asserted their agency to transform their sexuality. This finding underscores the complex interplay between external influences and individual agency in shaping the sexual experiences and identities of these young Zulu women.

7.4 Concluding remarks

The study explored how elements of Zulu culture, facilitated by socialising agents and individual sexual interpretations and practices, can shape the definitions and experiences of sexuality among Zulu women. The findings revealed the impact of cultural influences on the personal sexual experiences of young Zulu women from the perspectives of constructivism and critical theory.

Cultural beliefs, firmly rooted in patriarchal traditions, can wield control over women's sexuality. Social influences, including the family, educational institutions, initiation schools, media, and religious bodies, perpetuate gender and sexuality messages that often depict women as dependent, obedient, submissive, and passive. This societal conditioning might place expectations on young Zulu women to embody traditional, naive, and virginal sexual characteristics. This contrasts with their male counterparts, who are raised with a focus on strength, independence, assertiveness, emotional restraint, and the pursuit of sexual conquest.

The study found, however, that these women could assert their agency and challenge prescribed roles, actively reshaping their own sexual beliefs and behaviours. They could exercise their autonomy in navigating the complexities of their sexual identities, pushing back against

societal norms and cultural expectations that may seek to limit their choices and experiences. This empowerment underscores the potential for resilience and determination in young Zulu women, allowing them to redefine their paths within the framework of their culture and society.

7.5 Future research

The findings have implications for further research into the intricate and multifaceted aspects of heterosexual femininity in South Africa.

7.5.1 Expanding the current study

Future studies could delve deeper into the role of cultural socialisation in shaping the understanding of sex, sexuality and sexual pleasure among adolescent girls and young women, along with resulting beliefs and behaviours. Participants from other social groups could be selected, and studies could explore the topic in the context of older women. A further extension of this study could focus on males.

7.5.2 Research on *ntsu*

Recent health research notes a lack of sufficient data on the consequences of genital tobacco use. Jaiteh et al. (2023) little is known about the consequences of using vaginally inserted tobacco, especially the systemic and dermal effects. Additionally, they highlight the need for more laboratory examinations on the intra-vaginal use of snuff. This is reiterated by Cham et al. (2023, p. 1) who call for ‘rigorous scientific research including qualitative and mixed methods on the demographic profile of snuff users, health outcomes, perceived benefits, the chemical composition of the products as well as the health and social consequences’. This is evident of data limitations on the genital tobacco use which leaves a huge research gap.

This study explored factors the beliefs and perceived implications of snuff use for vaginal sexual enhancement among young Zulu women. Future studies could explore the perception of snuff as an indigenous practice within Zulu cultural settings and examine potential similarities between homemade snuff mixtures and commercialised snuff products like *ntsu*. Furthermore, studies could be extended to other cultural groups that use snuff and not be only limited to Zulu women. Collaborative efforts with natural scientists to conduct laboratory tests on the ingredients in commercialised and indigenous snuff products and their potential healing properties are warranted. Additionally, studies exploring the relationship between snuff use and genital cancer should be conducted.

7.5.3 Mother-daughter communication

Future research should address the lack of mother-daughter communication about sex and reproductive health revealed in the study. Scholars should suggest methods for opening communication and informative conversations.

7.5.4 LO programme

Research into the LO programme in the South African educational context is needed to assess the content and make suggestions to fill the gaps. Curriculum developers should work towards incorporating comprehensive sexual education and providing training for LO teachers to ensure that they approach the subject without a moralistic bias, allowing for open and truthful discussions.

REFERENCES

PRIMARY REFERENCES

The primary references of this research are the study participants through whom data was generated in the form of interviews.

REFERENCE LIST

- Aapola, S., Gonick, M., & Harris, A. (2005). *Young femininity: Girlhood, power, and social change*: Palgrave Macmillan.
- Abdullahi, A. A., & Abdulquadri, N. T. (2018). New media and adolescents' sexual behaviour in Sub-Sahara Africa: Linking theories to Realities. *Sage Open*, 8(4), 2158244018804606.
- Abdussalam, M., & Käferstein, F. (1996). Food beliefs and taboos. *World health*, 49(2), 10-12.
- Aboh, R. (2015). Slang and Multiple Methods of Interpreting Sex and Sexual Identity in the Nigerian Novel. *The African Symposium: An online journal of the African Educational Research Network*, 15(1), 91-97.
- Achen, S., Atekyereza, P. & Rwabukwali, C.B. (2021) The role of culture in influencing sexual and reproductive health of pastoral adolescent girls in Karamoja sub-region in Uganda. *Pastoralism* 11, 25. <https://doi.org/10.1186/s13570-020-00188-9>
- Ackermann, L., & Klerk, G. W. d. (2002). Social factors that make South African women vulnerable to HIV infection. *Health care for women international*, 23(2), 163-172.
- ACTIVATE!Network. (2015). The influence of culture on gender identities. Retrieved from <https://www.activateleadership.co.za/uncategorised/the-influence-of-culture-on-gender-identities/>
- Adedigba, M.A., Aransiola, J., Arobieke, R.I., Adewole, O., & Oyelami, T. (2018). Between traditions and health: Beliefs and perceptions of health effects of smokeless tobacco among selected users in Nigeria. *Substance Use & Misuse*, 53(4), 565-573.

- Afifi, T.D., Joseph, A., & Aldeis, D. (2008). Why can't we just talk about it? An observational study of parents' and adolescents' conversations about sex. *Journal of Adolescent Research, 23*(6), 689-721.
- African Feminist Forum. (2006). *Charter of feminist principles for African feminists*. https://akinamamawaafrika.org/wpcontent/uploads/2018/12/Charter_of_Feminist_Principles_for_African_Feminists.pdf *African Studies, 61*(1), 27-54.
- African-Women.ORG. (2009, 1 January 2017). WHAT IS FGM? Retrieved from <http://www.african-women.org/FGM/>
- Agbaje, F.I., Yacob-Haliso, O., & Falola, T. (2019). Colonialism and Gender in Africa: A Critical History. In: O. Yacob-Haliso & T. Falola (eds). *The Palgrave Handbook of African Women's Studies* (pp. 33-45). Palgrave Macmillan, Cham.
- Ahlberg, B. M. (1994) 'Is There a Distinct African Sexuality? A Critical Response to Caldwell', *Africa 64*(20): 220-42.
- Ainslie, A. (2002). *The historical context of cattle ownership. Cattle ownership and production in the communal areas of the Eastern Cape, South Africa*. https://repository.uwc.ac.za/xmlui/bitstream/handle/10566/4360/rr_10_cattle_ownership_production_communal_areas_eastern_cape_south_africa_2002.pdf?sequence=1&isAllowed=y
- Aken'ova, D. (2004). Sexual Rights in Africa: The Journey So Far. *AMANITARE Voices 4*.
- Akena, F.A. (2012). Critical analysis of the production of Western knowledge and its implications for indigenous knowledge and decolonisation. *Journal of Black Studies, 43*(6), 599-619.
- Akin-Aina, Sinmi. 2011. Beyond an Epistemology of Bread, Butter, Culture and Power: Mapping the African Feminist Movement. *Nokoko Institute of African Studies 2*: 65 - 89.
- Akintola, A. (1999). Yoruba ethics and metaphysics. *Ogbomoso: Valour Publishing Ventures Limited*.
- Akullian, A., Vandormael, A., Miller, J.C., Bershteyn, A., Wenger, E., Cuadros, D., Gareta, D., Bärnighausen, T., Herbst, K., & Tanser, F. (2021). Large age shifts in HIV-1

- incidence patterns in KZN, South Africa. *Proceedings of the National Academy of Sciences*, 118(28). <https://europepmc.org/article/med/34244424>
- Alabi, O.J. (2020). *Women's sexual agency and use of traditional aphrodisiacs in Ilorin, North Central Nigeria* [doctoral thesis, University of Johannesburg, South Africa]. https://ujcontent.uj.ac.za/esploro/outputs/doctoral/Womens-sexual-agency-and-use-of/9911335907691?institution=27UOJ_INST
- Alcaide, M. L., Mumbi, M., Chitalu, N., & Jones, D. L. (2013). An intervention to decrease intravaginal practices in hiv-infected women in Zambia: a pilot study. *Journal of the Association of Nurses in AIDS Care*, 24(3), 219-226.
- Alhojailan, M. I. (2012). Thematic analysis: A critical review of its process and evaluation. *West East Journal of Social Sciences*, 1(1), 39-47.
- Ali, T. S., Krantz, G., Gul, R., Asad, N., Johansson, E., & Mogren, I. (2011). Gender roles and their influence on life prospects for women in urban Karachi, Pakistan: a qualitative study. *Global health action*, 4(1), 7448.
- Aliyu, A. A., Bello, M. U., Kasim, R., & Martin, D. (2014). Positivist and Non-Positivist Paradigm in Social Science Research: Conflicting Paradigms or Perfect Partners? *Journal of Management and Sustainability*, 4(3), 79.
- Allen, C. F., Desmond, N., Chiduo, B., Medard, L., Lees, S. S., Vallely, A., . . . Hayes, R. J. (2010). Intravaginal and menstrual practices among women working in food and recreational facilities in Mwanza, Tanzania: implications for microbicide trials. *AIDS and Behavior*, 14(5), 1169-1181.
- Allen, L. (2003). Girls want sex, boys want love: Resisting dominant discourses of (hetero) sexuality. *Sexualities*, 6(2), 215-236.
- Amadiume, I. (1997) *Re-inventing Africa: matriarchy, religion, and culture*. London: Zed Books.
- Amadiume, I. (2001). African Women: Voicing Feminisms and Democratic Futures. *Macalester International*, 10(1), 9-23.
- Amanze, P. O. (2011). *African traditional medicine*: Author House.
- Anderson, C. (2010). Presenting and evaluating qualitative research. *American journal of*

pharmaceutical education, 74(8), 141.

- Anderson, E. (2005). Orthodox and inclusive masculinity: Competing masculinities among heterosexual men in a feminized terrain. *Sociological Perspectives*, 48(3), 337-355.
- Andrews, T. (2012). What is social constructionism? *Grounded Theory Review: An International Journal*, 11 (1). In.
- Annan, R. (2011). The plight of pregnant women. *World Nutrition*, 3(1).
<https://worldnutritionjournal.org/index.php/wn/article/view/600/531>
- Annang, L., Grimley, D. M., & Hook III, E. W. (2006). Vaginal douche practices among black women at risk: exploring douching prevalence, reasons for douching, and sexually transmitted disease infection. *Sexually transmitted diseases*, 33(4), 215-219.
- Apter, A. (1999). Africa, empire, and anthropology: |A philological exploration of anthropology's heart of darkness. *Annual Review of Anthropology*, 28(1), 577-598.
- Armstrong, A. (2003). Foucault and Feminism. Retrieved 12 June 2016, from Internet Encyclopedia of Philosophy
- Armstrong, E. A., Hamilton, L., & England, P. (2010). Is hooking up bad for young women? *Contexts*, 9(3), 22-27.
- Armstrong, I. (Ed.). (2012). *New feminist discourses: Critical essays on theories and texts* (Vol. 2). Routledge.
- Arnfred, S. (2004). 'African Sexuality'/Sexuality in Africa: Tales and Silences. *Re-thinking sexualities in Africa*, 59-76.
- Asi, L.N., Teri, D.T., & Meyer-Rochow, V.B. (2018). Influence of food taboos on nutritional patterns in rural communities in Cameroon. *International Review of Social Research*, 8(1), 2-6.
- Atallah, S., Redón, A.M. (2023). Relevant (Sexual) Aspects of Cultural Differences. In: Geuens, S., Polona Mivšek, A., Gianotten, W. (eds) *Midwifery and Sexuality*. Springer, Cham. https://doi.org/10.1007/978-3-031-18432-1_23
- Atanga, L. L., Ellece, S. E., Litosseliti, L., & Sunderland, J. (2012). Gender and language in sub-Saharan Africa. *Gender and Language in Sub-Saharan Africa*, 1.

- Atashili, J., Poole, C., Ndumbe, P. M., Adimora, A. A., & Smith, J. S. (2008). Bacterial vaginosis and HIV acquisition: a meta-analysis of published studies. *AIDS (London, England)*, 22(12), 1493.
- Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative research*, 1(3), 385-405.
- Aubrey, J. S. (2010). Looking good versus feeling good: An investigation of media frames of health advice and their effects on women's body-related self-perceptions. *Sex Roles*, 63(1-2), 50-63.
- Aufseeser, D., Jekielek, S., & Brown, B. (2006). The Family Environment and Adolescent Well-Being: Exposure to Positive and Negative Family Influences. *Child Trends*.
- Ayantayo, J. (2002). Matters Arising from Unhealthy Religious Relations in Nigeria: A Moral Appraisal. *Christian-Muslim Encounter in modern Nigeria. Lagos: Eternal commutation LTD*, 70-84.
- Ayo-Yusuf, O., Peltzer, K., & Mufamadi, J. (2006). Traditional healers' perceptions of smokeless tobacco use and health in the Limpopo Province of South Africa. *Substance use & misuse*, 41(2), 211-222.
- Ayo-Yusuf, O., Van Wyk, C., Van Wyk, C., & De Wet, I. (2005). Smokeless tobacco products on the South African market do not inhibit oral bacterial flora: a pilot study. *Southern African Journal of Epidemiology and Infection*, 20(4), 136-139.
- Azmoude, E., Firoozi, M., Sahebzad, E. S., & Asgharipour, N. (2016). Relationship between Gender Roles and Sexual Assertiveness in Married Women. *International journal of community based nursing and midwifery*, 4(4), 363.
- Azumah, F. D. (2010). The Effects of Pre-Pregnancy and Postpartum Food/Nutritional Taboos and Traditions on Women's Reproductive Health in Ghana; A Case Study of Kumasi Metropolitan Area.
- Babatunde, E. B., & Durowaiye, B. E. (2015). The conception of 'sex' and 'gender' as background to inequities faced by women. *Journal of Pan African Studies*, 7(8), 64-78.
- Babbie, E. (2001). The practice of social research.
- Bagnol, B. (2011). Female Initiation Rituals and Sexuality in Northern Mozambique. *Journal*

of Sexual Medicine, 8(1), 192-192).

- Bagnol, B., & Mariano, E. (2008). Vaginal practices: eroticism and implications for women's health and condom use in Mozambique. *Culture, health & sexuality*, 10(6), 573-585.
- Bakare-Yusuf, B. (2013). *Thinking with pleasure. Women, Sexuality and the Political Power of Pleasure*. Zed Books.
- Balarabe Kura, S.Y. (2012). *Qualitative and Quantitative Approaches to the Study of Poverty: Taming the Tensions and Appreciating the Complementarities*. <https://nsuworks.nova.edu/tqr/vol17/iss20/4/>
- Baleta, A. (1998). Concern voiced over “dry sex” practices in South Africa. *The lancet*, 352(9136), 1292.
- Baloyi, E. M. (2010). An African view of women as sexual objects as a concern for gender equality: A critical study. *Verbum et ecclesia*, 31(1), 1-6.
- Baloyi, M. (2016). The prevalence of women sexual locking in a gender violence context-a pastoral perspective. *Acta Theologica*, 36, 1-16.
- Bandura, A. (1969). Social-learning theory of identificatory processes. *Handbook of socialization theory and research*, 213, 262.
- Bandura, A. (1978). Social learning theory of aggression. *Journal of communication*, 28(3), 12-29.
- Bankole, A., Singh, S., Woog, V., & Wulf, D. (2004). Risk and protection: youth and HIV/AIDS in sub-Saharan Africa.
- Barker, G., & Ricardo, C. (2005). *Young men and the construction of masculinity in sub-Saharan Africa: implications for HIV/AIDS, conflict, and violence*: World Bank Washington, DC.
- Bartky, S.L. 1997. *Foucault, Femininity, and the Modernisation of Patriarchal Power* (5th ed.). Routledge.
- Bartky, S.L. 1997. *Foucault, Femininity, and the Modernisation of Patriarchal Power* (5th ed.). Routledge.
- Barton, E. (1999). Strategies for Empirical Research in Writing. *Journal of Business and*

Technical Communication, 13(2), 232-245.

- Bastien, S., Kajula, L. J., & Muhwezi, W. W. (2011). A review of studies of parent-child communication about sexuality and HIV/AIDS in sub-Saharan Africa. *Reproductive health*, 8(1), 25.
- Batisai, K. (2015). The Politics of Control and Ownership over Women's Bodies: Discourses That Shape Reproductive and Sexual Rights in Zimbabwe. *Perspectives: Bodies, Morals and Politics. Reflections on Sexual and Reproductive Rights in Africa*, 2, 6-11.
- Baumeister, R. F., & Twenge, J. M. (2002). Cultural suppression of female sexuality. *Review of General Psychology*, 6(2), 166.
- Baumeister, R. F., & Vohs, K. D. (2004). Sexual economics: Sex as female resource for social exchange in heterosexual interactions. *Personality and social psychology review*, 8(4), 339-363.
- Baumeister, R. F., Catanese, K. R., & Vohs, K. D. (2001). Is there a gender difference in strength of sex drive? Theoretical views, conceptual distinctions, and a review of relevant evidence. *Personality and social psychology review*, 5(3), 242-273.
- Baumeister, R.F. (Ed.). (2001). *Social psychology and human sexuality: Essential readings*. Psychology Press.
- Beksinska, M. E., Rees, H. V., Kleinschmidt, I., & McIntyre, J. (1999). The practice and prevalence of dry sex among men and women in South Africa: a risk factor for sexually transmitted infections? *Sexually Transmitted Infections*, 75(3), 178-180.
- Beksinska, M. E., Smit, J. A., & Mantell, J. E. (2012). Progress and challenges to male and female condom use in South Africa. *Sexual health*, 9(1), 51-58.
- Bem, S. L. (1981). Gender schema theory: A cognitive account of sex typing. *Psychological review*, 88(4), 354.
- Berger, P. L., & Luckmann, T. (1991). *The social construction of reality: A treatise in the sociology of knowledge*: Penguin UK.
- Berkowitz, J. D. (2007). Beneath the Veil of Mormonism: Uncovering the Truth About Polygamy in the United States and Canada. *The University of Miami Inter-American Law Review*, 38(3), 615-640.

- Berman, L. A., Berman, J., MILES, M., Pollets, D., & Powell, J. A. (2003). Genital self-image as a component of sexual health: Relationship between genital self-image, female sexual function, and quality of life measures. *Journal of Sex & Marital Therapy*, 29(sup1), 11-21.
- Bernard, H.R. (2013). *Social research methods: Qualitative and quantitative approaches*. SAGE Publications.
- Besnier, N., & Brownell, S. (2019). Sport in anthropology. *Sport* | *Cambridge Encyclopedia of Anthropology*.
- Bettio, F., & Sansonetti, S. (2015). *Visions for Gender Equality*. Retrieved from Luxembourg: http://ec.europa.eu/justice/gender-equality/files/documents/vision_report_en.pdf
- Beyers, C. (2011). Sexuality education in South Africa: A sociocultural perspective. *Acta Academica*, 43(3), 192-209.
- Bhana, D. (2008). 'Girls hit!' Constructing and negotiating violent African femininities in a working-class primary school. *Discourse: Studies in the Cultural Politics of Education*, 29(3), 401-415.
- Bhana, D. (2015). When caring is not enough: The limits of teachers' support for South African primary schoolgirls in the context of sexual violence. *International Journal of Educational Development*, 41(1), 262-270.
- Bhasin, K. (1993). *What is patriarchy? India*. Kali for Women.
- Bishop, S.D., 1985. The use of tobacco and snuff by Southern African Blacks. *Culna*, 1985(28), 9-13.
- Blackwood, E. (2002). Reading sexualities across cultures: Anthropology and theories of sexuality. *Out in Theory: The Emergence of Lesbian and Gay Anthropology*. E. Lewin and W. Leap, eds, 69-92.
- Bogdan, R. C., & Bilken, S. K. (1992). Qualitative research for education, 'An introduction to theory and methods'. *Syracuse University*. Alyn Bacon.
- Boss, P. (1993). *Sourcebook of family theories and methods: a contextual approach*. New York: Plenum Press.
- Bouma, G. D., & Atkinson, G. B. J. (1997). *A handbook of social science research*. Oxford;

New York: Oxford University Press.

- Bourscheid, T.G., Cardoso, L.C., Nascimento Santana, M.H., Cimó de Oliveira, L., Reginato, F.Z., Machado, M.M., & Valle de Bairros, A. (2022). Use of snuff and its main constituents for religious purposes in an alternative community with shamanic practices in the south of Brazil. *Journal of Psychedelic Studies*, 6(2), 154-165.
- Braun, V. (2005). In search of (better) sexual pleasure: female genital ‘cosmetic’ surgery. *Sexualities*, 8(4), 407-424.
- Braun, V., & Kitzinger, C. (2001). The perfectible vagina: Size matters. *Culture, health & sexuality*, 3(3), 263-277.
- Braun, V., & Wilkinson, S. (2001). Socio-cultural representations of the vagina. *Journal of Reproductive and Infant Psychology*, 19(1), 17-32.
- Braunstein, S., & Van de Wijgert, J. (2003). *Cultural norms and behavior regarding vaginal lubrication during sex: Implications for the acceptability of vaginal microbicides for the prevention of HIV/STIs*: Population Council New York.
- Braunstein, S., & Wijgert, J. V. D. (2005). Preferences and practices related to vaginal lubrication: implications for microbicide acceptability and clinical testing. *Journal of Women's Health*, 14(5), 424-433.
- Brickell, C. (2006). The sociological construction of gender and sexuality. *The Sociological Review*, 54(1), 87-113.
- Brindley, M. (1982). *The role of old women in Zulu culture: with special reference to three tribes in the district of Nkandla*. [doctoral dissertation] University of Zululand.
- Brink, H.I. (1993). Validity and reliability in qualitative research. *Curationis*, 16(2), 35-38.
- Brotman, R. M., Klebanoff, M. A., Nansel, T. R., Andrews, W. W., Schwebke, J. R., Zhang, J., Scharfstein, D. O. (2008). A longitudinal study of vaginal douching and bacterial vaginosis—a marginal structural modeling analysis. *American journal of epidemiology*, 168(2), 188-196.
- Brown, J. E., & Brown, R. C. (2000). Traditional intravaginal practices and the heterosexual transmission of disease: a review. *Sexually transmitted diseases*, 27(4), 183-187.

- Brown, J. E., Ayowa, O. B., & Brown, R. C. (1993). Dry and tight: sexual practices and potential AIDS risk in Zaire. *Social science & medicine*, 37(8), 989-994.
- Brownmiller, S. (1984). *Femininity*. In. New York: Fawcett Columbine: Ballantine Books.
- Brumberg, J.J. (1988). *Fasting girls: The emergence of anorexia nervosa as a modern disease*. Harvard University Press.
- Burnard, P., Gill, P., Stewart, K., Treasure, E., & Chadwick, B. (2008). Analysing and presenting qualitative data. *British dental journal*, 204(8), 429-432.
- Bush, B. (2006). African echoes, modern fusions: Caribbean music, identity and resistance in the African diaspora. *Music Reference Services Quarterly*, 10(1), 17-35.
- Buthelezi, T. (2006a). 16 days of activism and gender stereotypes in Ilanga, Isolezwe and UmAfrika newspapers. *Southern African Linguistics and Applied Language Studies*, 24(4), 497-509.
- Buthelezi, T. (2006b). The one who has eaten it, has only eaten a part: Exploring traditional Zulu premarital sexual practices. *Sexuality in Africa Magazine*, 3(2), 3-5.
- Butler, J. (1990). Gender trouble, feminist theory, and psychoanalytic discourse. *Feminism/postmodernism*, 327.
- Buvé, A., Bishikwabo-Nsarhaza, K., & Mutangadura, G. (2002). The spread and effect of HIV-1 infection in sub-Saharan Africa. *The lancet*, 359(9322), 2011-2017.
- Buvé, A., Jaspers, V., Crucitti, T., & Fichorova, R. N. (2014). The vaginal microbiota and susceptibility to HIV. *Aids*, 28(16), 2333-2344.
- Carter, M., Gallo, M., Anderson, C., Snead, M., Wiener, J., Bailey, A., Hylton-Kong, T. (2013). Intravaginal cleansing among women attending a sexually transmitted infection clinic in Kingston, Jamaica. *The West Indian medical journal*, 62(1), 56.
- Cassell, C. (1994). *Qualitative methods in organizational research: A practical guide*: Sage Publications Ltd.
- Cattell, M.G. (1997). Ubuntu, African elderly and the African family crisis. *Southern African Journal of Gerontology*, 6(2), 37-39.
- Cattell, M.G. (1997). Zulu grandmothers' socialisation of granddaughters. *Southern African*

Journal of Gerontology, 6(1), 14-16.

- Chaka, J., Beyers, C., & Swanepoel, E. (2018). Voicing adolescent learners' perceptions of sexual messages received from teachers in a rural school within the Free State province. *Journal of Educational Studies*, 17(2), 87-104.
- Chalmers, A. (1982). What is This Thing Called Science? An Assessment of the Nature and Status of Science and its Methods.
- Cham B, Sey Corr R., Weaver S.,R., Eriksen, M.P, Popova L. (2023) Intravaginal insertion of tobacco among women in sub-Saharan Africa. *Tob Control*;0(0):1–2.
- Chandra-Mouli, V., Neal, S., & Moller, A.B. (2021). Adolescent SRH for all in sub-Saharan Africa: A spotlight on inequalities. *Reproductive Health*, 18(1), 1-4.
- Charlton, A. (2004). Medicinal uses of tobacco in history. *Journal of the Royal Society of Medicine*, 97(6), 292-296.
- Charmaz, K. (2006). Constructing grounded theory: A practical guide through qualitative research. *Sage Publications Ltd, London*.
- Chatterji, M., Murray, N., London, D., & Anglewicz, P. (2005). The factors influencing transactional sex among young men and women in 12 sub-Saharan African countries. *Social biology*, 52(1-2), 56-72.
- Chauke, T. (2014). *An Explorative Study of Rural Women's Peceptions of Sexuality and HIV Prevention in Their Local Socio-cultural Context: A Case Study of Rural Schoemansdal, Mpumalanga*. University of South Africa,
- Cheshfar, F., Bani, S., Mirghafourvand, M., Hasanpour, S., & Javadzadeh, Y. (2023). The Effects of Ginger (*Zingiber officinale*) Extract Ointment on Pain and Episiotomy Wound Healing in Nulliparous Women: A Randomized Clinical Trial. *Journal of Caring Sciences*, 12(3), 181.
- Chigidi, W. L. (2009). Shona Taboos: The Language of Manufacturing Fears for Sustainable Development. *Journal of Pan African Studies*, 3(1).
- Chinyanganya, T. L. (2013). Cultural linguistic strategies in HIV/AIDS discourse in Shona: A survey of Bindura Hospital. *International Journal of Social Sciences & Education*, 3(4).

- Chinyanganya, T., & Muguti, J. (2013). Taboos and the pragmatics of teaching HIV and AIDS at primary school: Views from selected primary school teachers in Chipadze, Bindura. *Greener Journal of Educational Research*, 3(2), 46-52.
- Chisale, S.S. (2016). Decolonising HIV prevention: A critical examination of ukusoma and virginity testing. *Alternation Journal*, 23(2), 217-235.
- Chisale, S.S. (2020). The purity myth: A feminist disability theology of women's sexuality and implications for pastoral care. *Scriptura: Journal for Biblical, Theological and Contextual Hermeneutics*, 119(1), 1-11.
- Chisale, S.S., & Buffel, O. (2014). The culturally gendered pastoral care model of women caring for refugee girls in a context of HIV/AIDS. *Studia Historiae Ecclesiasticae*, 40(1), 285-303.
- Choi, K.-H., Hoff, C., Gregorich, S. E., Grinstead, O., Gomez, C., & Hussey, W. (2008). The efficacy of female condom skills training in HIV risk reduction among women: a randomized controlled trial. *American Journal of Public Health*, 98(10), 1841-1848.
- Civic, D., & Wilson, D. (1996). Dry sex in Zimbabwe and implications for condom use. *Social science & medicine*, 42(1), 91-98.
- Clarke, D. (2008). Issues of sexuality. *Paediatric Nursing*, 20(3), 7-8.
- Clowes, L., Shefer, T., Fouten, E., Vergnani, T., & Jacobs, J. (2009). Coercive sexual practices and gender-based violence on a university campus. *Agenda*, 23(80), 22-32.
- Cohen, L., Manion, L., & Morrison, K. (2011). *Research methods in education*. London; New York: Routledge.
- Collins, P. H. (2000). Gender, black feminism, and black political economy. *The annals of the American academy of political and social science*, 568(1), 41-53.
- Condry, J., & Condry, S. (1976). Sex differences: A study of the eye of the beholder. *Child development*, 812-819.
- Connell, R. (1987). *Gender and power: society, the person, and sexual politics*: Stanford University Press.
- Connell, R. W. (2002). *Gender*: Wiley.

- Connell, R. W., & Connell, R. (2000). *The men and the boys*: Univ of California Press.
- Cornwall, A., & Lindisfarne, N. (1994). *Dislocating Masculinity: Gender, Power and Anthropology*.
- COSATU (Producer). (2000). Understanding Gender - a struggle within a struggle. [Political Education Booklet] Retrieved from <http://www.cosatu.org.za/show.php?ID=2168#fw>
- Cottrell, B. H. (2010). An updated review of evidence to discourage douching. *MCN: The American Journal of Maternal/Child Nursing*, 35(2), 102-107.
- Coyne, I. T. (1997). Sampling in qualitative research. Purposeful and theoretical sampling; merging or clear boundaries? *Journal of advanced nursing*, 26(3), 623-630.
- Crann, S. E., Cunningham, S., Albert, A., Money, D. M., & O'Doherty, K. C. (2018). Vaginal health and hygiene practices and product use in Canada: a national cross-sectional survey. *BMC women's health*, 18, 1-8.
- Crawford, G. (2005). Digital gaming, sport and gender. *Leisure Studies*, 24(3), 259-270.
- Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford law review*, 1241-1299.
- Creswell, J. W. (2009). *Research design: qualitative, quantitative, and mixed methods approaches*. Los Angeles: Sage.
- Cronin, P., Ryan, F., & Coughlan, M. (2008). Undertaking a literature review: a step-by-step approach. *British journal of nursing*, 17(1), 38-43.
- Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process*: Sage.
- Crutzen, C. K. (2013). Masks between the Visible and the Invisible. *Gender in Science and Technology: Interdisciplinary Approaches*, 89, 79.
- Curry, L. A., Nembhard, I. M., & Bradley, E. H. (2009). Qualitative and mixed methods provide unique contributions to outcomes research. *Circulation*, 119(10), 1442-1452.
- Curthoys, A. (2000). Gender studies in Australia: A history. *Australian Feminist Studies*, 15(31), 19-38.
- Da Silva, J.M., Da Lima Filho, A.B., & Da Freitas Ferreira, D.R. (2016). Francisco Freire

- Allemão De Cysneiros For The Arquivo Medico Brasileiro De Medicina, Cirurgia E Ciencias Accessorias, 1845 (The Case Of Páo Pereira). *Hygeia: Revista Brasileira de Geografia Médica e da Saúde*, 12(22), 29-45.
- Dada, O. M. O. (2015). Tesho: The Traditional Way of Preventing Pre-Marital Sex among Yoruba People. *Journal of Social Sciences and Humanities*, 1(1), 32-38.
- Dallabetta, G. A., Miotti, P. G., Chiphangwi, J. D., Liomba, G., Canner, J. K., & Saah, A. J. (1995). Traditional vaginal agents: use and association with HIV infection in Malawian women. *Aids*, 9(3), 293-298.
- Davis, K., Evans, M., & Lorber, J. (2006). *Handbook of gender and women's studies*: Sage.
- Davis, S. W. (2002). Loose lips sink ships. *Feminist studies*, 28(1), 7-35.
- De Vos, A. S. (2002). Qualitative data analysis and interpretation. In A. S. De Vos, H. Strydom, C. B. Fouché, & C. S. L. Delpont (Eds.), *Research at grass roots : for the social sciences and human services professions* (2nd ed.). Pretoria: Van Schaik.
- De Vos, A. S. (2002). *Research at grass roots: for the social sciences and human services professions*. Pretoria: Van Schaik.
- Dei, G.J.S. 2000. Rethinking the role of indigenous knowledge in the academy. *International Journal of Inclusive Education*, 4(2), 111-132.
- DeLamater, J. D., & Hyde, J. S. (1998). Essentialism vs. social constructionism in the study of human sexuality. *The Journal of Sex Research*, 35(1), 10-18. Doi: 10.1080/00224499809551913
- Delius, P., & Glaser, C. (2002). Sexual socialisation in South Africa: A historical perspective.
- Dennis, A.C., & Wood, J.T. (2012). “We're not going to have this conversation, but you get it”: Black mother–daughter communication about sexual relations. *Women's Studies in Communication*, 35(2), 204-223.
- Denny, E. (1994). Liberation or oppression? Radical feminism and in vitro fertilisation. *Sociology of Health & Illness*, 16(1), 62-80.
- Denscombe, M. (2010). *The good research guide: for small-scale social research projects*. Maidenhead, England: McGraw-Hill/Open University Press.

- Denzin, N. K., & Lincoln, Y. S. (2003). *The landscape of qualitative research: theories and issues*. Thousand Oaks, Calif.: SAGE Publications.
- Denzin, N.K., & Lincoln, Y. (2000). Aesthetics and the practices of qualitative inquiry. *Qualitative Inquiry*, 6(2), 256-265.
- DePalma, R., & Francis, D. (2014). South African life orientation teachers: (Not) teaching about sexuality diversity. *Journal of Homosexuality*, 61(12), 1687-1711.
- DiCicco-Bloom, B., & Crabtree, B. F. (2006). The qualitative research interview. *Medical education*, 40(4), 314-321.
- Dimulescu, V. (2015). Contemporary Representations of the Female Body: Consumerism and the Normative Discourse of Beauty. *Symposion*, 2(4), 505-514.
- Dingwall, R., Murphy, E., Watson, P., Greatbatch, D., & Parker, S. (1998). Catching goldfish: quality in qualitative research. *Journal of Health Services Research & Policy*, 3(3), 167-172.
- Dlamini, J. (2017). *Equal but Different*. Johannesburg, South Africa: Sifiso Publishers.
- Dlamini, S. N. (2001). The construction of meaning and negotiation of ethnic identities in KwaZulu-Natal. In A. Zegeye (Ed.), *Social identities in the new South Africa* (pp. 195-222). Cape Town; London: Kwela; Global.
- Dlamini, S., Taylor, M., Mkhize, N., Huver, R., Sathiparsad, R., De Vries, H., Naidoo, K., & Jinabhai, C. (2009). Gender factors associated with sexual abstinent behaviour of rural South African high school going youth in KZN, South Africa. *Health Education Research*, 24(3), 450-460.
- dos Santos, G. M., & Soares, G. H. (2015). Rapé e xamanismo entre grupos indígenas no médio Purus, Amazônia. *Amazônica-Revista de Antropologia*, 7(1), 10-27.
- Douglas, M. (1996). *Natural symbols: explorations in cosmology*. London; New York: Routledge.
- Douglas, M. (2003). *Purity and danger: An analysis of concepts of pollution and taboo*: Routledge.
- Douglass, M. (2010). Understanding the Female Conceptualization of Sexual Addiction and the Role of Addiction Treatment.

- Duffy, M.E. (1987). Methodological triangulation: A vehicle for merging quantitative and qualitative research methods. *The Journal of Nursing Scholarship*, 19(3), 130-133.
- Dunkle, K. L., Jewkes, R. K., Brown, H. C., Gray, G. E., McIntyre, J. A., & Harlow, S. D. (2004). Transactional sex among women in Soweto, South Africa: prevalence, risk factors and association with HIV infection. *Social science & medicine*, 59(8), 1581-1592.
- Dunkle, K. L., Jewkes, R., Nduna, M., Jama, N., Levin, J., Sikweyiya, Y., & Koss, M. P. (2007). Transactional sex with casual and main partners among young South African men in the rural Eastern Cape: prevalence, predictors, and associations with gender-based violence. *Social science & medicine*, 65(6), 1235-1248.
- Dunne, G. A. (1998). Introduction: add sexuality and stir: towards a broader understanding of the gender dynamics of work and family life. *Journal of Lesbian Studies*, 2(4), 1-8.
- Durham, M. G. (1999). Girls, media, and the negotiation of sexuality: A study of race, class, and gender in adolescent peer groups. *Journalism & Mass Communication Quarterly*, 76(2), 193-216.
- Duvall, C.S. (2017). *Cannabis and tobacco in precolonial and colonial Africa*. https://www.researchgate.net/publication/316093678_Cannabis_and_Tobacco_in_Pre_colonial_and_Colonial_Africa
- Eagly, A. H. (1987). *Sex differences in social behavior: a social-role interpretation*. Hillsdale, N.J.: L. Erlbaum Associates.
- Eagly, A. H., & Wood, W. (1991). Explaining sex differences in social behavior: A meta-analytic perspective. *Personality and Social Psychology Bulletin*, 17(3), 306-315.
- Eagly, A. H., Wood, W., & Diekmann, A. B. (2000). Social role theory of sex differences and similarities: A current appraisal. *The developmental social psychology of gender*, 123-174.
- Eagly, A.H., & Wood, W. (1999). The origins of sex differences in human behaviour: Evolved dispositions versus social roles. *American Psychologist*, 54(6), 408-423.
- Ebila, F. (2015). A proper woman, in the African tradition: The construction of gender and nationalism in Wangari Maathai's autobiography "Unbowed". *Tydskrif vir letterkunde*,

52(1), 144-154.

- Eckert, P., & McConnell-Ginet, S. (2003). *Language and gender*. Cambridge; New York: Cambridge University Press.
- Eckes, T., & Trautner, H. M. (2000). *The developmental social psychology of gender*. New York: Psychology Press.
- Eckes, T., & Trautner, H. M. (2000). The Developmental Social Psychology of Gender: An Integrative Framework. In T. Eckes & H. M. Trautner (Eds.), *The developmental social psychology of gender* (pp. 3-32). New York: Psychology Press.
- Edgerton, R.B. (1966). Conceptions of psychosis in four East African societies. *American Anthropologist*, 68(2), 408-425.
- Edmonds, A. (2008). Beauty and health: Anthropological perspectives. *Medische Antropologie*, 20(1), 151-162.
- Ehrlich, S. L. (2001). *Representing rape: Language and sexual consent*: Psychology Press.
- Eisend, M. (2010). A meta-analysis of gender roles in advertising. *Journal of the Academy of Marketing Science*, 38(4), 418-440.
- Ekpenyong, C. E., & Davies, K. G. (2013). Associations between vaginal douching practice and lower genital tract symptoms and menstrual disorders among young women: A Search for risk modulating factors. *Advances in Sexual Medicine*, 3(04), 76.
- Ekpenyong, C. E., Daniel, N. E., & Akpan, E. (2014). Vaginal douching behavior among young adult women and the perceived adverse health effects. *Journal of Public Health and Epidemiology*, 6(5), 182-191.
- Ennis, C.D., & Chen, S. (2012). 17 Interviews and focus groups. In K. Armour & D. Macdonald (Eds.). *Research Methods in Physical Education and Youth Sport* (pp.217- 236). Routledge
- Epstein, D., & Johnson, R. (1998). *Schooling sexualities*: McGraw-Hill Education (UK).
- Epstein, D., & Morrell, R. (2012). Approaching southern theory: Explorations of gender in South African education. *Gender and Education*, 24(5), 469-482.
- Everatt, D., Sisulu, E., & Community Agency for Social, E. (1992). *Black youth in crisis*:

- facing the future*. Braamfontein, South Africa: Ravan Press.
- Ezebuilo, H. C. (2023). Sexuality And Human Nature: An African Perspective. *Ochendo: An African Journal of Innovative Studies*, 4(1).
- Fahs, B. (2014). Genital panics: Constructing the vagina in women's qualitative narratives about pubic hair, menstrual sex, and vaginal self-image. *Body image*, 11(3), 210-218.
- Familusi, O. (2011). Human Sexuality in African Thought and the HIV/AIDS Scourge. *LUMINA*, 22(2), 1-1.
- Fandrych, I. (2012). Between tradition and the requirements of modern life: Hlonipha in southern Bantu societies, with special reference to Lesotho. *Journal of Language and Culture*, 3(4), 67-73
- Fay, J. (2002). Teaching teens about sexual pleasure. *SIECUS report*, 30(4), 12.
- Fennell, S., & Arnot, M. (2008). Decentring hegemonic gender theory: The implications for educational research. *Compare*, 38(5), 525-538.
- Fiaveh, D. Y., & Okyerefo, M. P. (2017). Femininity, Sexual Positions and Choice. *Sexualities*, 1363460716677281.
- Fiaveh, D. Y., Okyerefo, M. P., & Fayorsey, C. K. (2015). Women's experiences of sexual pleasure in Ghana. *Sexuality & Culture*, 19(4), 697-714.
- Fieldhouse, P. (1995). *Food and Nutrition: Customs and Culture* (2nd ed.). Springer.
- Finlayson, R. (1982). Hlonipha—the women's language of avoidance among the Xhosa. *South African Journal of African Languages*, 2(1), 35-60.
- Finlayson, R. (2002). *Language in South Africa*. Cambridge University Press.
- Flick, U. (2019). The concepts of qualitative data: Challenges in neoliberal times for qualitative inquiry. *Qualitative Inquiry*, 25(8), 713-720.
- Fonck, K., Kaul, R., Keli, F., Bwayo, J. J., Ngugi, E. N., Moses, S., & Temmerman, M. (2001). Sexually transmitted infections and vaginal douching in a population of female sex workers in Nairobi, Kenya. *Sexually Transmitted Infections*, 77(4), 271-275.
- Ford, J.V., Corona Vargas, E., Finotelli Jr, I., Fortenberry, J.D., Kismödi, E., Philpott, A.,

- Rubio-Aurioles, E., & Coleman, E. (2019). Why pleasure matters: Its global relevance for sexual health, sexual rights and well-being. *International Journal of Sexual Health*, 31(3), 217-230.
- Foucault, M. (1979). *The history of sexuality*. London: Allen Lane.
- Foucault, M. 1998. *The history of sexuality: The will to knowledge* (Vol. 1). Penguin.
- Francis, D., & Msibi, T. (2011). Teaching about heterosexism: Challenging homophobia in South Africa. *Journal of LGBT Youth*, 8(2), 157-173.
- Francis, S. C., Baisley, K., Lees, S. S., Andrew, B., Zalwango, F., Seeley, J., Watson-Jones, D. (2013). Vaginal practices among women at high risk of HIV infection in Uganda and Tanzania: recorded behaviour from a daily pictorial diary. *PLoS One*, 8(3), e59085.
- Fredrickson, B. L., & Roberts, T.-A. (1997). Objectification theory: Toward understanding women's lived experiences and mental health risks. *Psychology of women quarterly*, 21(2), 173-206.
- Furstenberg, F. F., & Hughes, M. E. (1997). The influence of neighborhoods on children's development: A theoretical perspective and a research agenda. *Indicators of children's well-being*, 346-371.
- Gadegbeku, C., Wayo, R., Ackah-Badu, G., Nukpe, E., & Okai, A. (2013). Food taboos among residents at Ashongman-Accra, Ghana. *Food Science and Quality Management*, 15(1), 21-29.
- Gafos, M., Mzimela, M., Sukazi, S., Pool, R., Montgomery, C., & Elford, J. (2010). Intravaginal insertion in KwaZulu-Natal: sexual practices and preferences in the context of microbicide gel use. *Culture, health & sexuality*, 12(8), 929-942.
- Gagnon, J. H. (1990). The explicit and implicit use of the scripting perspective in sex research. *Annual review of sex research*, 1(1), 1-43.
- Gale, N.K., Heath, G., Cameron, E., Rashid, S., & Redwood, S. (2013). Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *Biomedical Central, Medical Research Methodology*, 13(1), 1-8.
- Garbus, L., & Khumalo-Sakutukwa, G. (2003). HIV/AIDS in Zimbabwe. *AIDS Policy*

Research Centre, University of California, San Francisco.

- Garcia-Moreno, C., Jansen, H. A., Ellsberg, M., Heise, L., & Watts, C. H. (2006). Prevalence of intimate partner violence: findings from the WHO multi-country study on women's health and domestic violence. *The lancet*, 368(9543), 1260-1269.
- García-Peláez, B., Ferrer-Lorente, R., Gómez-Ollés, S., Fernández-López, J. A., Remesar, X., & Alemany, M. (2004). Measurement of total estrone content in foods. Application to dairy products. *Journal of dairy science*, 87(8), 2331-2336.
- Garnets, L. D., & Peplau, L. A. (2002). A new paradigm for women's sexual orientation: Implications for therapy. *Women & Therapy*, 24(1-2), 111-121.
- Gatwiri, G.J., & McLaren H.J. (2016). Discovering my own African feminism: Embarking on a journey to explore Kenyan women's oppression. *Journal of International Women's Studies*, 17(4), 263-273.
- Geetha, V. (2002). *Theorising Gender*.
https://www.tau.ac.il/~giorar/files/Theorizing_Gender.pdf
- Gerber, R. (2009). *Barbie and Ruth: The story of the world's most famous doll and the woman who created her*: Collins Business.
- Gergen, K. J. (1985). The social constructionist movement in modern psychology. *American psychologist*, 40(3), 266.
- Germov, J., & Williams, L. (1996). The sexual division of dieting: women's voices. *The Sociological Review*, 44(4), 630-647.
- Gill, P., Stewart, K., Treasure, E., & Chadwick, B. (2008). Methods of data collection in qualitative research: interviews and focus groups. *British dental journal*, 204(6), 291.
- Gill, R. (2007). Postfeminist media culture: Elements of a sensibility. *European journal of cultural studies*, 10(2), 147-166.
- Gill, R. (2008). Empowerment/sexism: Figuring female sexual agency in contemporary advertising. *Feminism & psychology*, 18(1), 35-60.
- Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The qualitative report*, 8(4), 597-607.

- Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The qualitative report*, 8(4), 597-606.
- Goldbart, J., & Hustler, D. (2005). Ethnography in B. Somekh and C. Lewin (eds) *Research Methods in Social Sciences*. In: London: Sage Publications.
- Goodsell, T.L. (2013). *The Interpretive Tradition in the Social Sciences*. https://www.ncfr.org/sites/default/files/201701/interpretive_tradition_in_the_social_sciences_goodsell.pdf
- Gqola, P.D. (2007). How the cult of femininity and violent masculinities support endemic gender-based violence in contemporary South Africa. *African Identities*, 5(1), 111- 124.
- Grabe, S., Ward, L. M., & Hyde, J. S. (2008). The role of the media in body image concerns among women: a meta-analysis of experimental and correlational studies. *Psychological bulletin*, 134(3), 460.
- Graham, L., & Mphaphuli, M. (2018). A guy does and you don't; they do you instead: Young people's narratives of gender and sexuality in a low-income context of South Africa. *SAGE Open*, 8(4). <https://journals.sagepub.com/doi/full/10.1177/2158244018819041>
- Green, E. C. (1992). The anthropology of sexually transmitted disease in Liberia. *Social science & medicine*, 35(12), 1457-1468.
- Green, G., Pool, R., Harrison, S., Hart, G. J., Wilkinson, J., Nyanzi, S., & Whitworth, J. A. (2001). Female control of sexuality: illusion or reality? Use of vaginal products in south west Uganda. *Social science & medicine*, 52(4), 585-598.
- Green, G., Pool, R., Harrison, S., Hart, G.J., Wilkinson, J., Nyanzi, S., & Whitworth, J.A. (2001). Female control of sexuality: Illusion or reality? Use of vaginal products in southwest Uganda. *Social Science and Medicine*, 52(4), 585-598.
- Green, J., & Thorogood, N. (2009). *Qualitative methods for health research*. Los Angeles: SAGE.
- Greer, G. (1999). *The Whole Woman*. London: Double Day.
- Greig, A., Peacock, D., Jewkes, R., & Msimang, S. (2008). Gender and AIDS: time to act. *AIDS (London, England)*, 22(Suppl 2), S35.

- Griffin, D. R. (1989). Introduction. In D. R. Griffin, W. A. Beardslee, & J. Holland (Eds.), *Varieties of postmodern theology*: SUNY Press.
- Grimley, D. M., Oh, M. K., Desmond, R. A., Hook III, E. W., & Vermund, S. H. (2005). An intervention to reduce vaginal douching among adolescent and young adult women: a randomized, controlled trial. *Sexually transmitted diseases*, 32(12), 752-758.
- Grix, J. (2004). *The foundations of research*. Basingstoke, Hampshire: New York: Palgrave Macmillan.
- Guba, E.G., & Lincoln, Y.S. (1994). *Competing paradigms in qualitative research*. <https://ethnographyworkshop.files.wordpress.com/2014/11/guba-lincoln-1994-competing-paradigms-in-qualitative-research-handbook-of-qualitative-research.pdf>
- Guerra, F. M., & Simbayi, L. C. (2014). Prevalence of knowledge and use of the female condom in South Africa. *AIDS and Behavior*, 18(1), 146-158.
- Guetterman, T. C. (2015). *Descriptions of sampling practices within five approaches to qualitative research in education and the health sciences*. Paper presented at the Forum Qualitative Sozialforschung/Forum: Qualitative Social Research.
- Gumede, H.S. (2002). *The portrayal of female characters in selected Zulu texts* [doctoral dissertation, University of Durban-Westville, South Africa].
- Gumede, H.S., & Mathonsi, N.N. (2019). Feminist Discourse Analysis of the Image of the “Liberated” Woman in Umshado [Marriage] by N Zulu. *Current Writing: Text and Reception in Southern Africa*, 31(1), 11-20.
- Gune, E., & Manuel, S. (2011). *Doing research on sexuality in Africa: Ethical dilemmas and the positioning of the researcher*. <http://www.arsrc.org/downloads/features/manuelgune.pdf>
- Gune, E., & Manuel, S. (2011). Doing research on sexuality in Africa: ethical dilemmas and the positioning of the researcher. *African Sexualities: A reader, Pambazuka, Oxford*.
- Haipinge, R. (2013). Women vulnerability to HIV/AIDS: an investigation into women's conceptions and experiences in negotiating sex and safe sex in Okalongo constituency, Omusati, Namibia.
- Hakim, C. (2010). Erotic capital. *European Sociological Review*, 26(5), 499-518.

- Hall, K., Borba, R., & Hiramoto, M. (2021). Language and gender. *The international encyclopedia of linguistic anthropology*, 892-912.
- Hamoonga, T. E., Olowski, P., & Musonda, P. (2019). Vaginal douching in Zambia: a risk or benefit to women in the fight against cervical cancer: a retrospective cohort study. *BMC Women's Health*, 19, 1-7.
- Hancock, P., Hughes, B., Jagger, E., Paterson, K., Russell, R., Tulle-Winton, E., & Tyler, M. (2000). *The Body Culture and Society*. Open University Press.
- Hanretta, S. (1998). Women, marginality and the Zulu state: Women's institutions and power
- Hardon, A., Pell, C., Taqueban, E., & Narasimhan, M. (2019). Sexual and reproductive self-care among women and girls: insights from ethnographic studies. *bmj*, 365.
- Harrison, A., Smit, J., Hoffman, S., Nzama, T., Leu, C.-S., Mantell, J., Exner, T. (2012). Gender, peer and partner influences on adolescent HIV risk in rural South Africa. *Sexual health*, 9(2), 178-186.
- Harrison, W. C. (2006). The Shadow and the Substance: The Sex/Gender Debate. In K. Davis, M. Evans, & J. Lorber (Eds.), *Handbook of gender and women's studies* (pp. 35-52): Sage.
- Hart, C. (1998). *Doing a literature review: Releasing the social science research imagination*: Sage.
- Harte, C.B., & Meston, C.M. (2008). Acute effects of nicotine on physiological and subjective sexual arousal in nonsmoking men: A randomised, double-blind, placebo- controlled trial. *The Journal of Sexual Medicine*, 5(1), 110-121.
- Hartley, R.E. (1959). Sex-role pressures and the socialisation of the male child. *Psychological Reports*, 5(2), 457-468.
- Hassan-Bitar, S., & Wick, L. (2007). Evoking the guardian angel: childbirth care in a Palestinian hospital. *Reproductive Health Matters*, 15(30), 103-113.
- Hennink, M., & Kaiser, B. N. (2022). Sample sizes for saturation in qualitative research: A systematic review of empirical tests. *Social science & medicine*, 292, 114523.
- Hentschel, T., Heilman, M.E., & Peus, C.V. (2019). The multiple dimensions of gender stereotypes: A current look at men's and women's characterisations of others and

themselves. *Frontiers in Psychology*,
10.https://www.frontiersin.org/articles/10.3389/fpsyg.2019.00011/full

Herbenick, D., Hensel, D., Smith, N. K., Schick, V., Reece, M., Sanders, S. A., & Fortenberry, J. D. (2013). Pubic hair removal and sexual behavior: findings from a prospective daily diary study of sexually active women in the United States. *The journal of sexual medicine*, 10(3), 678-685.

Herbert, R. K. (1990). Hlonipha and the ambiguous woman. *Anthropos*, 455-473.

Hicks, S. (2015). Social work and gender: An argument for practical accounts. *Qualitative Social Work*, 14(4), 471-487.

Hilber, A. M., Chersich, M., Van de Wijgert, J., Rees, H., & Temmerman, M. (2007). Vaginal practices, microbicides and HIV: what do we need to know? In: The Medical Society for the Study of Venereal Disease.

Hilber, A. M., Hull, T. H., Preston-Whyte, E., Bagnol, B., Smit, J., Wacharasin, C., Group, W. G. S. (2010). A cross cultural study of vaginal practices and sexuality: implications for sexual health. *Social science & medicine*, 70(3), 392-400.

Hilber, A. M., Kenter, E., Redmond, S., Merten, S., Bagnol, B., Low, N., & Garside, R. (2012). Vaginal practices as women's agency in Sub-Saharan Africa: A synthesis of meaning and motivation through meta-ethnography. *Social science & medicine*, 74(9), 1311-1323.

Hill Collins, P. (2002). *Black Feminist Thought: Knowledge, Consciousness and the Politics Of Empowerment*. Routledge.

Hill, J. R., Song, L., & West, R. E. (2009). Social learning theory and web-based learning environments: A review of research and discussion of implications. *The Amer. Jrnl. of Distance Education*, 23(2), 88-103.

Hlavka, H. R. (2014). Normalizing Sexual Violence: Young Women Account for Harassment and Abuse. *Gender & Society*, 28(3), 337-358. Doi: 10.1177/0891243214526468

Hoffman, S., Mantell, J., Exner, T., & Stein, Z. (2004). The Future of the Female Condom. *Perspectives on Sexual and Reproductive Health*, 36(3), 120-126. Doi: 10.1363/3612004

- Hoffman, S., O'sullivan, L. F., Harrison, A., Dolezal, C., & Monroe-Wise, A. (2006). HIV risk behaviors and the context of sexual coercion in young adults' sexual interactions: results from a diary study in rural South Africa. *Sexually transmitted diseases*, 33(1), 52-58.
- Holborn, L., & Eddy, G. (2011). *First steps to healing the South African family*: South African Institute of Race Relations.
- Holland, J., Ramazanoglu, C., Sharpe, S., & Thomson, R. (1998). The male in the head. *Young people*.
- Hollander, T. (2014). Men, Masculinities, and the Demise of a State: Examining Masculinities in the Context of Economic, Political, and Social Crisis in a Small Town in the Democratic Republic of the Congo. *Men and Masculinities*, 17(4), 417-439. Doi: 10.1177/1097184x14544906
- Hooks, B. (2000). *Feminism is for everybody: Passionate politics*: Pluto Press.
- Hoppers, C. A. O. (2001). Indigenous knowledge systems and academic institutions in South Africa. *Perspectives in education*, 19(1), 73-86.
- Horn, J. (2006). Re-righting the sexual body. *Feminist Africa*. https://feministafrica.net/wp-content/uploads/2019/10/fa_6_feature_article_1.pdf
- Hsieh, H.-F., & Shannon, S. E. (2005). Three Approaches to Qualitative Content Analysis. *Qualitative Health Research*, 15(9), 1277-1288. Doi: 10.1177/1049732305276687
- Hudson, R.A. (1996). *Sociolinguistics*. Cambridge University Press.
- Hugo, N. (2012). Dry, tight and warm: Dry sex practices in Central and Southern Africa. *Consultancy Africa Intelligence*.
- Hull, T., Hilber, A. M., Chersich, M. F., Bagnol, B., Prohmmo, A., Smit, J. A., Tumwesigye, N. M. (2011). Prevalence, motivations, and adverse effects of vaginal practices in Africa and Asia: findings from a multicountry household survey. *Journal of Women's Health*, 20(7), 1097-1109.
- Humphries, H., Mehoul-Loko, C., Phakathi, S., Mdladla, M., Fynn, L., Knight, L., & Abdool Karim, Q. (2019). 'You'll always stay right': Understanding vaginal products and the

- motivations for use among adolescent and young women in rural KZN. *Culture, Health and Sexuality*, 21(1), 95-107.
- Hundhammer, T. (2008). *FEMALE= SUBMISSIVE and MALE= ASSERTIVE Sexuality-priming leads to gender-based self-perception and automatic behavior*. Universität zu Köln,
- Hunter, M. (2002). The materiality of everyday sex: thinking beyond 'prostitution'. *African studies*, 61(1), 99-120.
- Hunter, M. (2004). Masculinities, multiple-sexual-partners, and AIDS: the making and unmaking of Isoka in KwaZulu-Natal. *Transformation: critical perspectives on Southern Africa*, 54(1), 123-153.
- Hunter, M. (2010). *Love in the time of AIDS: inequality, gender, and rights in South Africa*: Indiana University Press.
- Hussain, M., Naz, A., Khan, W., Daraz, U., & Khan, Q. (2015). Gender stereotyping in family: An institutionalized and normative mechanism in Pakhtun society of Pakistan. *SAGE Open*, 5(3), 2158244015595258.
- Idowu, E. B. (1982). *Olódùmarè: God in Yoruba belief*. Ikeja: Longman Nigeria.
- Ige, B., & De Kadt, E. (2002). Gendering politeness: Zulu-speaker identities at the University of Natal, Durban. *Southern African Linguistics and Applied Language Studies*, 20(3), 147-161.
- Imam, A., Mama, A., & Sow, F. (1997). [eds] *Engendering African Social Sciences*.
- in the early nineteenth century. Dakar: Council for the Development of Economic and Social Research in Africa.
- Izugbara, C. O. (2004). *Patriarchal ideology and discourses of sexuality in Nigeria*. Paper presented at the Understanding human sexuality seminar series. <http://www.arsrc.org/downloads/uhsss/izugbara.pdf>
- Izugbara, C. O., Undie, C.-C., & Khamasi, J. W. (2010). *Old wineskins, new wine: readings in sexuality in Sub-Saharan Africa*. New York: Nova Science Publishers, Inc.
- Jaafarpour, M., Hatefi, M., Najafi, F., Khajavikhan, J., & Khani, A. (2015). The effect of

- cinnamon on menstrual bleeding and systemic symptoms with primary dysmenorrhea. *Iranian Red Crescent Medical Journal*, 17(4).
- Jacobs, K., & Manzi, T. (2000). Evaluating the social constructionist paradigm in housing research. *Housing, Theory and Society*, 17(1), 35-42.
- Jagire, J. (2013). Indigenous African knowledges and African feminism: Resisting Eurocentric ways of knowing. In N. Wane, J. Jagire & Z. Murad. (Eds.). *Ruptures: Anti-colonial and Anti-Racist Feminist Theorising* (pp. 77-89). Brill.
- Jenkins, K. (2016). Amelioration and inclusion: Gender identity and the concept of woman. *Ethics*, 126(2), 394-421.
- Jewkes, R. (2002). Intimate partner violence: causes and prevention. *The lancet*, 359(9315), 1423-1429.
- Jewkes, R. (2009). Growing up sexual in the age of HIV & AIDS. *Teaching and HIV& AIDS in the South African Classroom. Macmillan, Northlands*, 147-158.
- Jewkes, R., & Morrell, R. (2010). Gender and sexuality: emerging perspectives from the heterosexual epidemic in South Africa and implications for HIV risk and prevention. *Journal of the International AIDS society*, 13(1), 6-6. Doi: 10.1186/1758-2652-13-6
- Jewkes, R., & Morrell, R. (2012). Sexuality and the limits of agency among South African teenage women: Theorising femininities and their connections to HIV risk practises. *Social science & medicine*, 74(11), 1729-1737.
- Jewkes, R., Dunkle, K., Nduna, M., & Shai, N. J. (2012). Transactional sex and HIV incidence in a cohort of young women in the stepping stones trial. *Journal of AIDS and Clinical research*, 3(5).
- Jewkes, R., Morrell, R., & Christofides, N. (2009). Empowering teenagers to prevent pregnancy: lessons from South Africa. *Culture, health & sexuality*, 11(7), 675-688.
- Jewkes, R., Morrell, R., Sikweyiya, Y., Dunkle, K., & Penn-Kekana, L. (2012). Transactional relationships and sex with a woman in prostitution: prevalence and patterns in a representative sample of South African men. *BMC public health*, 12(1), 325.
- Jiyane, P. M., Phiri, S. S., & Peu, M. D. (2012). Nurses' experiences of the ritual of fetching the spirit of the deceased from a public hospital in Mpumalanga, South Africa. *Africa*

Journal of Nursing and Midwifery, 14(1), 116-129.

Johannsdottir, N.K. (2009). *Patriarchy and the subordination of women from a radical* https://skemman.is/bitstream/1946/3017/1/Nina_Katrin_Johannsdottir_fixed.pdf].

Johnsdotter, S., & Essén, B. (2010). Genitals and ethnicity: the politics of genital modifications. *Reproductive Health Matters*, 18(35), 29-37.

Johnson, A. G. (2005). *The gender knot: Unraveling our patriarchal legacy*: Temple University Press.

Johnson, R. B., & Onwuegbuzie, A. J. (2004). Mixed methods research: A research paradigm whose time has come. *Educational researcher*, 33(7), 14-26.

Kahn, J. S. (2009). *An introduction to masculinities*: John Wiley & Sons.

Kairuz, T., Crump, K., & O'Brien, A. (2007). Tools for data collection and analysis. *Pharmaceutical Journal (Vol 278)*.

Kajula, L.J., Darling, N., Kaaya, S.F., & De Vries, H. (2016). Parenting practices and styles associated with adolescent sexual health in Dar es Salaam, Tanzania. *AIDS Care*, 28(11), 1467-1472.

Kakavoulis, A. (2001). Family and sex education: a survey of parental attitudes. *Sex Education: Sexuality, Society and Learning*, 1(2), 163-174.

Kambarami, M. (2006). Femininity, sexuality and culture: Patriarchy and female subordination in Zimbabwe. *South Africa: ARSRC*.

Kangira, J., Mashiri, P., & Gambahaya, Z. (2007). Women writers' use of metaphor as gender rhetoric in discourse on HIV/AIDS and sex-related issues: The case of " Totanga patsva"(We start afresh) by Zimbabwe Women Writers.

Karim, Q. A., Karim, S. S., Soldan, K., & Zondi, M. (1995). Reducing the risk of HIV infection among South African sex workers: socioeconomic and gender barriers. *American Journal of Public Health*, 85(11), 1521-1525.

Katsande, J. (2008). *Management of Sexual Harassment Against Female Trainee Teachers: A study in teacher training colleges in Harare, Zimbabwe*. (Masters in Women's Law Dissertation), University of Zimbabwe,

- Kaufman, C., & Stavrou, S. (2004). 'Bus fare please': the economics of sex and gifts among young people in urban South Africa. *Cult health sex Culture, Health & Sexuality*, 6(5), 377-391.
- Kaya, H.O. (2013). Integration of African indigenous knowledge systems into higher education in South Africa: Prospects and challenges. *Alternation*, 20(1), 135-153.
- Kayode, J. (1986). African ethics on sex. In Abogunrin, S. [ed] Religion and Ethics in Nigeria. Day Star Press. pp 51-59
- Keating, E. (2009). Language and culture: Linguistic Anthropology. In UNESCO (Eds.). *Encyclopedia of Life Support Systems* (pp.75-93). UNESCO.
- Kheswa, J.G., & Notole, M. (2014). The impact of pornography on adolescent males' sexual behaviour in the Eastern Cape, South Africa: A qualitative study. *Mediterranean Journal of Social Sciences*, 5(20).
https://www.researchgate.net/publication/274129744_The_Impact_of_Pornography_on_Adolescent_Males'_Sexual_Behaviour_in_the_Eastern_Cape_South_Africa_A_Qualitative_Study
- Khubisa, T. (2017). Religio-cultural ideals of women's body shapes: A review of black women's engagement with bodybuilding. *African Journal of Gender and Religion*, 23(2).
- Khumalo, S., Taylor, M., Makusha, T., & Mabaso, M. (2020). Intersectionality of cultural norms and sexual behaviours: A qualitative study of young black male students at a university in KZN, South Africa. *Reproductive Health*, 17(1), 1-10.
- Kim, B. (2001). Social constructivism: Emerging perspectives on learning, teaching and technology. ed. M. Orey. Available online at <http://projects.coe.uga.edu/epltt/index.php>.
- Kim, E. E. K., & Mattila, A. S. (2011). The Impact of language barrier & cultural differences on restaurant experiences: A grounded theory approach.
https://scholarworks.umass.edu/gradconf_hospitality/2011/Presentation/56/
- King, A. (2004). The prisoner of gender: Foucault and the disciplining of the female body. *Journal of International Women's Studies*, 5(2), 29-39.

- King, E. M., & Mason, A. D. (2001). Engendering development through gender equality in rights resources and voice. Summary.
- Knox, S., & Burkard, A. W. (2009). Qualitative research interviews. *Psychotherapy Research, 19*(4-5), 566-575.
- Kobo, F. (2016). Umfazi akangeni ebuhlanti emzini. A Womanist Dialogue with Black Theology of Liberation in the 21st Century. *Hervormde Teologiese Studies, 72*(1), 1-6.
- Koedt, A. (1970). *The myth of the vaginal orgasm*: New England Free Press Somerville, MA.
- Koerber, A., & McMichael, L. (2008). Qualitative sampling methods: A primer for technical communicators. *Journal of business and technical communication, 22*(4), 454-473.
- Krauss, S. E. (2005). Research paradigms and meaning making: A primer. *The qualitative report, 10*(4), 758-770.
- Kristina, S.A., Endarti, D., Prabandari, Y.S., Ahsan, A., & Thavorncharoensap, M. (2015). Burden of cancers related to smoking among the Indonesian population: Premature mortality costs and years of potential life lost. *Asian Pacific Journal of Cancer Prevention, 16*(16), 6903-6908.
- Kubeka, M.J., & Masango, M.J. (2010). The impact and effects of trauma resulting from excommunication. *Hervormde Teologiese Studies, 66*(1), 1-13.
- Kubeka, N.P. (2016). *The psychological perspective on Zulu ancestral calling: A phenomenological study* [doctoral dissertation, University of Pretoria, South Africa].
- Kulig, J. C. (1994). Sexuality beliefs among Cambodians: Implications for health care professionals. *Health care for women international, 15*(1), 69-76.
- Kumalo, S., & Mujinga, M. (2017). Now we know that the enemy is from within: Shembeites and the Struggle for Control of Isaiah Shembe's Legacy and the Church. *Journal for the Study of Religion, 30*(2), 122-15.
- Kun, K. E. (1998). Vaginal drying agents and HIV transmission. *International Perspectives on Sexual and Reproductive Health, 24*(2), 93.
- Kunene, L., & Dyili, N. (2014). Socio-Economic Viability of the Protex Business: Hive Infrastructure for the KwaDabeka Township in KZN, South Africa. *Loyola Journal of*

Social Sciences, 28(2). https://www.researchgate.net/publication/339339299_Socio-Economic_Viability_of_the_Protex_Business_Hive_Infrastructure_for_the_KwaDabeka_Township_in_KZN_South_Africa

- Kura, B., & Sulaiman, Y. (2012). Qualitative and Quantitative Approaches to the Study of Poverty: Taming the Tensions and Appreciating the Complementarities. *Qualitative Report*, 17, 34.
- Kyalo, P. (2012). A reflection on the African traditional values of marriage and sexuality. *International Journal of Academic Research in Progressive Education and Development*, 1(2), 211-219.
- L'Engle, K.L., & Jackson, C. (2008). Socialisation influences on early adolescents' cognitive susceptibility and transition to sexual intercourse. *Journal of Research on Adolescence*, 18(2), 353-378.
- Lam, D., Marteleto, L. J., & Ranchhod, V. (2013). The influence of older classmates on adolescent sexual behavior in Cape Town, South Africa. *Studies in family planning*, 44(2), 147-167.
- Langa, M. (2014). Meaning making in growing up without a father: Narratives of young adolescent boys. *The open family studies journal*, 6(1).
- Langa, M., & Eagle, G (2008). The intractability of militarised masculinity: A case study of former Self-Defence Unit members in the Kathorus area, South Africa. *South African Journal of Psychology*, 38(1), 152-175.
- Langa, M.L. (2012). *Some gendered practices in a Zulu family: A feminist perspective* [master's dissertation, University of KwaZulu-Natal, South Africa].
- Leburu, G., & Phetlho-Thekisho, N. (2015). Reviewing gender-based violence against women and HIV/AIDS as intersecting issues. *Social Work*, 51(3), 399-420.
- Leclerc-Madlala, S. (2002). On the virgin cleansing myth: gendered bodies, AIDS and ethnomedicine. *African Journal of AIDS Research*, 1(2), 87-95.
- Leclerc-Madlala, S. (2003). Transactional sex and the pursuit of modernity. *Social dynamics*, 29(2), 213-233.
- Leclerc-Madlala, S. (2008). Age-disparate and intergenerational sex in southern Africa: the

- dynamics of hypervulnerability. *Aids*, 22, S17-S25.
- Leclerc-Madlala, S., & Mazibuko-Ngidi, N.N. (2018). *Vaginal Practices: Improving HIV prevention programming for adolescent girls and young women by incorporating vaginal health education*.
https://www.researchgate.net/publication/327189296_
- Leclerc-Madlala, S., Simbayi, L. C., & Cloete, A. (2009). The sociocultural aspects of HIV/AIDS in South Africa. In *HIV/AIDS in South Africa 25 Years On* (pp. 13-25): Springer.
- Leclerc-Madlala, S. (2001). Virginitiy testing: Managing sexuality in a maturing HIV/AIDS epidemic. *Medical anthropology quarterly*, 15(4), 533-552.
- Lee, Y. (2008). *The Role of Positivism in Husserl's Transcendental Phenomenology*. Paper presented at the Proceedings of the XXII World Congress of Philosophy.
- Leeman, J. (2016). *Understanding Church Discipline*. B&H Publishing Group.
- Lees, S., Zalwango, F., Andrew, B., Vandepitte, J., Seeley, J., Hayes, R. J., & Francis, S. C. (2014). Understanding motives for intravaginal practices amongst Tanzanian and Ugandan women at high risk of HIV infection: the embodiment of social and cultural norms and well-being. *Social science & medicine*, 102, 165-173.
- Lefkowitz, E. S., & Espinosa-Hernandez, G. (2007). Sex-related communication with mothers and close friends during the transition to university. *Journal of Sex Research*, 44(1), 17-27.
- Lefkowitz, E. S., Shearer, C. L., Gillen, M. M., & Espinosa-Hernandez, G. (2014). How gendered attitudes relate to women's and men's sexual behaviors and beliefs. *Sexuality & Culture*, 18(4), 833-846.
- Lett, J. (1990). Emics and ethics: Notes on the epistemology of anthropology. In Thomas N. Headland, Kenneth L. Pike & M. Harris (Eds.), *Emics and ethics: The insider/outsider debate* (pp.127-142). SAGE Publications.
- Lever, J., Frederick, D. A., & Peplau, L. A. (2006). Does size matter? Men's and women's views on penis size across the lifespan. *Psychology of Men & Masculinity*, 7(3), 129.

- Lichtman, M. (2006). *Qualitative Research in Education: A User's Guide*. SAGE Publications (CA).
- Lincoln, Y. S., & Denzin, N. K. (2000). *The handbook of qualitative research*. London: SAGE.
- Lincoln, Y.S., & Guba, E.G. (1989). Ethics: The failure of positivist science. *The Review of Higher Education*, 12(3), 221-240.
- Litosseliti, L. (2003). *Using focus groups in research*: A&C Black.
- Little, A. C., & Roberts, S. C. (2012). Evolution, appearance, and occupational success. *Evolutionary Psychology*, 10(5), 147470491201000503.
- Little, A. C., Burt, D. M., Penton-Voak, I. S., & Perrett, D. I. (2001). Self-perceived attractiveness influences human female preferences for sexual dimorphism and symmetry in male faces. *Proceedings of the Royal Society of London B: Biological Sciences*, 268(1462), 39-44.
- Lobban, G. (1975). Sex-Roles in Reading Schemes. *Educational Review*, 27(3), 202-210.
- Lock, M. (1993). Cultivating the body: Anthropology and epistemologies of bodily practice and knowledge. *Annual Review of Anthropology*, 22(1), 133-155.
- Loeto, P. T. (2014). Notions of Beauty and Attractiveness. Retrieved from <http://www.osisa.org/buwa/regional/notions-beauty-and-attractiveness>
- Lorber, J. (1994). *Paradoxes of gender*: Yale University Press.
- Lorber, J. & Martin, P.Y. (2012). *The Socially Constructed Body*. https://www.researchgate.net/publication/363585251_The_Socially_Constructed_Body_Insights_from_Feminist_Theory
- Luke, N. (2003). Age and economic asymmetries in the sexual relationships of adolescent girls in sub-Saharan Africa. *Studies in family planning*, 34(2), 67-86.
- Luong, M.-L., Libman, M., Dahhou, M., Chen, M. F., Kahn, S. R., Goulet, L., Platt, R. W. (2010). Vaginal douching, bacterial vaginosis, and spontaneous preterm birth. *Journal of Obstetrics and Gynaecology Canada*, 32(4), 313-320.
- Lusekelo, A. (2015). The consequences of the contacts between Bantu and non-Bantu languages around Lake Eyasi in Northern Tanzania. *International Journal of Society*,

Culture and Language, 3(1), 62-75.

Luthuli, T.P. (2007). *Assessing politeness, language and gender in hlonipha* [master's dissertation, University of KZN, South Africa].

Maathai, W. (2007). *Unbowed: A memoir*. Anchor.

Mabaso, M., Makola, L., Naidoo, I., Mlangeni, L.L., Jooste, S., & Simbayi, L. (2019). HIV prevalence in South Africa through gender and racial lenses: Results from the 2012 population-based national household survey. *International Journal for Equity in Health*, 18(1), 1-11.

Mabunda, A., & Madiba, S. (2017). *The context of parent-child communication about sexuality and HIV prevention: The perspectives of high school learners in Gauteng province, South Africa*.

https://www.researchgate.net/publication/322402877_The_context_of_parent-child_communication_about_sexuality_and_HIV_prevention_The_perspectives_of_high_school_learners_in_Gauteng_Province_South_Africa

Mack, L. (2010). The philosophical underpinnings of educational research. *Polyglossia*, 19, 5-11.

Mackenzie, N., & Knipe, S. (2006). Research dilemmas: Paradigms, methods and methodology. *Issues in educational research*, 16(2), 193-205.

MacKinnon, C. A. (1983). Feminism, Marxism, method, and the state: Toward feminist jurisprudence. *Signs: Journal of women in culture and society*, 8(4), 635-658.

MacKinnon, C. A. (1989). *Toward a feminist theory of the state*: Harvard University Press.

MacNealy, M. S. (1999). *Strategies for empirical research in writing*: Longman.

Maduna, L. (2015). Snuff, sex and stigma. Retrieved from <https://www.thedailyvox.co.za/snuff-sex-and-stigma-the-facts-and-the-myths/>

Magoqwana, B. (2017). *Repositioning uMakhulu as an Institution of Knowledge: Beyond 'Biologism' towards uMakhulu as the body of Indigenous Knowledge*. Paper presented at the Pre-Colonial Catalytic Conference, Port Elizabeth: Nelson Mandela Metropolitan University.

- Magwaza, T. (2011). Private transgressions: The visual voice of Zulu women. *Agenda*, 16(49), 25-32.
- Mahlalela, N., & Maharaj, P. (2016). Acceptability and use of female condoms among young people in South Africa. 2016, 30(2). Doi: 10.11564/30-2-873
- Maitse, T.E., & Marchbank, J. (2000). Revealing silence: Voices from South Africa. In S. Jacobs, R. Jacobson and J. Marchbank (Eds.) *States of Conflict: Gender, Violence and Resistance* (pp. 199-214). Zed Books.
- Makama, G. A. (2013). Patriarchy and gender inequality in Nigeria: The way forward. *European Scientific Journal, ESJ*, 9(17).
- Makaudze, G., & Shoko, P. H. (2015). The Re-conceptualization of Shona and Venda Taboos: Towards an Afrocentric Discourse. *Journal of Pan African Studies*, 8(2).
- Makoni, B. (2015). Labelling female genitalia in a Southern African context: Linguistic gendering of embodiment, Africana womanism, and the politics of reclamation. *Feminist Studies*, 41(1), 42-71.
- Makoni, B. (2015). Labelling female genitalia in a Southern African context: Linguistic gendering of embodiment, Africana womanism, and the politics of reclamation. *Feminist Studies*, 41(1), 42-71.
- Makoni, S., & Meinhof, U.H. (2004). Western perspectives in applied linguistics in Africa. *AILA Review*, 17(1), 77-104.
- Makoni, S., & Meinhof, U.H. (2004). Western perspectives in applied linguistics in Africa. *AILA Review*, 17(1), 77-104.
- Malinowski, B. (1922). *Argonauts of the Western Pacific*, London: George Routledge & Sons Ltd.
- Mandal, G., Raina, D., & Balodi, G. (2014). Vaginal douching: Methods, practices and health risks. *Health Sciences Research*, 1(4), 50-57.
- Manfre, C., & Rubin, D. (2012). *Integrating gender into forestry research: A guide for CIFOR scientists and programme administrators*. Cifor.
- Mankayi, N. (2008). Morality and sexual rights: Constructions of masculinity, femininity and sexuality among a group of South African soldiers. *Culture, health & sexuality*, 10(6),

625-634.

- Mantell, J. E., Needham, S. L., Smit, J. A., Hoffman, S., Cebekhulu, Q., Adams-Skinner, J., Stein, Z. A. (2009). Gender norms in South Africa: implications for HIV and pregnancy prevention among African and Indian women students at a South African tertiary institution. *Culture, health & sexuality*, 11(2), 139-157.
- Marais, K. (2019). Calls for Pleasure: How African feminists are challenging and unsilencing women's sexualities. *Agenda*, 33(3), 87-95.
- Marinova, J. (2003). Gender stereotypes and the socialization process. *Réunion du groupe d'experts, Le rôle des hommes et des garçons pour parvenir à l'égalité entre les sexes*, 9.
- Markham, C., Van Laar, D., Gibbard, D., & Dean, T. (2009). Children with speech, language and communication needs: Their perceptions of their quality of life. *International Journal of Language & Communication Disorders*, 44(5), 748-768.
- Markula, P., Bruce, T., & Hovden, J. (2010). Key themes in the research on media coverage of women's sports. In T. Bruce, J. Hovden, & P. Markula (Eds.), *Sportswomen at the Olympics: A Global Content Analysis of Newspaper Coverage* (pp. 1-18): Sense Publishers.
- Maroon, M. L. (2009). Transactional Sex as Agency Granting in Developing Countries: Sex for More than Just Money. *Graduate Student Journal of Anthropology*, 2(1), 12-21.
- Marston, C., & King, E. (2006). Factors that shape young people's sexual behaviour: a systematic review. *The lancet*, 368(9547), 1581-1586.
- Martin Hilber, A. K. E., Redmond, S., Merten, S., Low, N., & Garside, R. (2009). *Can harmful vaginal practices be modified? A meta ethnography*. Paper presented at the 5th IAS Conference on HIV Pathogenesis and Treatment, Cape Town.
- Masuku, N. (2005). *Perceived Oppression of Women in Zulu Folklore: Feminist Critique* [doctoral dissertation, University of South Africa, South Africa].
- Masuku, N. (2012). Songs and Folktales as conduits for social change in Zulu culture: A perspective on Umkhwekazi Namasi. *Muziki*, 9(1), 90-98.
- May, E.R. (2003). *Virginity testing: Towards outlawing the cultural practical practice that*

violates our daughters [doctoral dissertation, University of the Western Cape, South Africa].

- May, V.M. (2015). *Pursuing intersectionality, unsettling dominant imaginaries*. Routledge.
- Mbikusita-Lewanika, M., Stephen, H., & Thomas, J. (2009). The prevalence of the use of 'dry sex' traditional medicines, among Zambian women, and the profile of the users. *Psychology, health & medicine, 14*(2), 227-238.
- Mbiti, J. S. (1970). *African religions & philosophy*. Garden City, N.Y.: Doubleday & Co.
- Mbugua, N. (2007). Factors inhibiting educated mothers in Kenya from giving meaningful sex-education to their daughters. *Social science & medicine, 64*(5), 1079-1089.
- McClelland, R. S., Lavreys, L., Hassan, W. M., Mandaliya, K., Ndinya-Achola, J. O., & Baeten, J. M. (2006). Vaginal washing and increased risk of HIV-1 acquisition among African women: a 10-year prospective study. *Aids, 20*(2), 269-273.
- McElhinny, B. (2014). Theorizing gender in sociolinguistics and linguistic anthropology. *The handbook of language, gender, and sexuality*, 48-67.
- Mcetywa, S.A.M. (2001). *The interaction of African traditional religio-medical practice and western healing methods* [doctoral dissertation, University of KwaZulu Natal, South Africa]. <https://researchspace.ukzn.ac.za/xmlui/handle/10413/10414>
- McFadden, P. (2003). Sexual Pleasure as Feminist Choice. *Feminist Africa, (2)*, 8. Retrieved from
- McFadden, P. (2003). Sexual pleasure as feminist choice. *Feminist Africa, 2*(1), 50-60.
- McFadden, P. (2016). *Becoming contemporary African feminists: Her-stories, legacies and the new imperatives*. Friedrich-Ebert-Stiftung.
- Mchunu, G., Peltzer, K., Tutshana, B., & Seutlwadi, L. (2012). Adolescent pregnancy and associated factors in South African youth. *African Health Sciences, 12*(4), 426-434.
- Mchunu, M. (2005). *Zulu fathers and their sons: Sexual taboos, respect, and their relationship to the HIV/AIDS pandemic*. Ann Arbor Publishing.
- Mchunu, T.B., Ross, A.H., & Sobuwa, S. (2019). Understanding and management of low back pain: A qualitative study of perceptions of traditional healers at the Warwick Muthi

- Market in Durban, South Africa. *African Journal for Physical Activity and Health Sciences (AJPHES)*, 25(3), 404-417.
- Mda, Z. (2000). *The Heart of Redness*. Picador.
- Mead, M. (1928). *Coming of Age in Samoa*. New York: Morrow
- Meintjes, L. (2017). *Dust of the Zulu: Ngoma aesthetics after apartheid*. Duke University Press.
- Meiu, G.P. (2015). Colonialism and sexuality. In R.T. Francoeur & R.J. Noonan (Eds.). *The International Encyclopedia of Human Sexuality* (pp. 197-290). Continuum.
- Mema, T. (2012). Trapped in the closet: Why sexual pleasure and the erotic remain locked away. Retrieved from <http://www.osisa.org/buwa/regional/trapped-closet-why-sexual-pleasure-and-erotic-remain-locked-away>
- Merriam, S. B. (1998). *Qualitative Research and Case Study Applications in Education. Revised and Expanded from "Case Study Research in Education."* ERIC.
- Mertens, D. M. (2015). *Research and evaluation in education and psychology: integrating diversity with quantitative, qualitative, and mixed methods*. Thousand Oaks, CA: SAGE.
- Meyer-Rochow, V.B. (2009). Food taboos: Their origins and purposes. *Journal of Ethnobiology and Ethnomedicine*, 5(1), 1-10.
- Meyer, J. (2013). Deconstructing masculinity: Dominant discourses on gender, sexuality and HIV and AIDS from the experience of the adolescent male orphan. *HTS Theological Studies*, 69(1), 01-09.
- Meyerhoff, M. (2015). Gender performativity. In *The International Encyclopedia of Human Sexuality*: John Wiley & Sons, Ltd.
- Mhlongo, S.P. (2009). *Reasons for undergoing virginity testing: A study of young people in rural KwaZulu-Natal, South Africa* [doctoral dissertation, University of KwaZulu-Natal, South Africa].
- Michel, J., Stuckelberger, A., Tediosi, F., Evans, D. & Eeuwijk, P.V. (2019). The roles of a grandmother in African societies-please do not send them to old people's homes.

- Journal of Global Health*, 9(1). <https://pubmed.ncbi.nlm.nih.gov/31217948/>
- Mikell, G. ed., 1997. African feminism: The politics of survival in sub-Saharan Africa. University of Pennsylvania Press.
- Mikkola, M. (2008). *Feminist Perspectives on Sex and Gender*. In The Stanford Encyclopedia of Philosophy, Vol. Summer 2008. E. N. Zalta (Ed.). Retrieved from <https://plato.stanford.edu/entries/feminism-gender/>
- Milena, Z. R., Dainora, G., & Alin, S. (2008). Qualitative research methods: A comparison between focus-group and in-depth interview. *Annals of the University of Oradea, Economic Science Series*, 17(4), 1279-1283.
- Mills, J., Bonner, A., & Francis, K. (2006). Adopting a constructivist approach to grounded theory: Implications for research design. *International journal of nursing practice*, 12(1), 8-13.
- Mills, J., Bonner, A., & Francis, K. (2006). The development of constructivist grounded theory. *International journal of qualitative methods*, 5(1), 25-35.
- Mischel, W. (1966). A social-learning view of sex differences in behavior. *The development of sex differences*, 56, 81.
- Mitchell, J. (2018). The difference between gender and sexual difference. In I Matthis (Ed.). *Dialogues on Sexuality, Gender and Psychoanalysis* (pp. 67-78). Routledge.
- Mkhize, G., & Vilakazi, F. (2021). Rethinking gender and conduits of control: A feminist review. *Image & Text*, 35(1), 1-22. http://www.scielo.org.za/scielo.php?script=sci_arttext&pid=S1021-14972021000100007
- Mkhize, V.V.O. (2009). *Umsamo: Iziko lamaThongo*. Umsamo African Institute.
- Mlisa, L.-R. N. (2009). *Ukuthwasa initiation of Amagqirha: Identity construction and the training of Xhosa women as traditional healers*. University of the Free State,
- Mncwabe, D. (2017). Sebevala inanazi ngezivalo zeziphuzo ezihlohlozayo. *Isolezwe*. Retrieved from <https://www.isolezwe.co.za/> website: <https://www.isolezwe.co.za/izindaba/sebevala-inanazi-ngezivalo-zeziphuzo->

- Mofolo, T. (2010) Understanding How Cultural Norms and Practices, Specifically Female Genital Mutilation Facilitate the Spread of HIV/AIDS. In, *The Role of Culture in Contributing to the Spread of HIV/AIDS* (pp. 12): Africa Institute of South Africa.
- Mokgobi, M.G. (2014). Understanding traditional African healing. *African Journal for Physical Health Education, Recreation and Dance*, 20(sup-2), 24-34.
- Moran, C. (2017). Re-positioning female heterosexuality within postfeminist and neoliberal culture. *Sexualities*, 20(1-2), 121-139.
- Moran, C., & Lee, C. (2016). 'Everyone wants a vagina that looks less like a vagina': Australian women's views on dissatisfaction with genital appearance. *Journal of health psychology*, 1359105316637588.
- Morgerou, L., Mama, A.A., & Sow, F. (1997). *Engendering African social sciences*. https://www.researchgate.net/publication/270137318_Engendering_African_Social_Sciences
- Morrell, R., Jewkes, R., & Lindegger, G. (2012). Hegemonic masculinity/masculinities in South Africa: Culture, power, and gender politics. *Men and Masculinities*, 15(1), 11-30.
- Morris, P. K. (2006). Gender in print advertisements: A snapshot of representations from around the world. *Media Report to Women*, 34(3).
- Morse, J. M., Barrett, M., Mayan, M., Olson, K., & Spiers, J. (2002). Verification strategies for establishing reliability and validity in qualitative research. *International journal of qualitative methods*, 1(2), 13-22.
- Mosime, S. (2004). *Our Africa, our tradition, our tobacco, our heritage, our roots, our gods, our cure live and let live*. <https://static.pmg.org.za/docs/1998/981019mosime.htm>
- Mosothwane, M. N. (2001). An ethnographic study of initiation schools among the Bakgatla ba ga Kgafela at Mochudi (1874-1988).
- Moss, S. (2009). Self discrepancy theory. *Sicotests*, 16, 2015. Retrieved from <https://www.sicotests.com/psyarticle.asp?id=336>
- Mosue, L.M. (2000). *The role of the dead-living in the African family system* [doctoral

dissertation].https://researchspace.ukzn.ac.za/xmlui/bitstream/handle/10413/3816/Mosue_Letta_M_2000.pdf?sequence=1&isAllowed=y

- MOTSOENENG, B. (2015). Why are South African women buying 'punani fruit' for their vaginas? *The Sunday Times*. Retrieved from <https://www.timeslive.co.za> website: <https://www.timeslive.co.za/sunday-times/lifestyle/2015-12-17-why-are-south-african-women-buying-punani-fruit-for-their-vaginas/>
- Mpondo, F., Ruiter, R.A., Schaafsma, D., Van den Borne, B., & Reddy, P.S. (2018). Understanding the role played by parents, culture and the school curriculum in socialising young women on sexual health issues in rural South African communities. *Journal of Social Aspects of HIV/AIDS*, 15(1), 42-49.
- Msibi, T., & Rudwick, S. (2015). *Intersections of two isiZulu genderlects and the construction of skesana identities*. https://www.researchgate.net/publication/282776785_Intersections_of_two_isiZulu_genderlects_and_the_construction_of_'skesana'_identities
- Msimang, C. T. (1975). *Kusadliwa ngoludala*: Shuter & Shooter.
- Mswela, M. (2009). Cultural practices and HIV in South Africa: a legal perspective. *PER: Potchefstroomse Elektroniese Regsblad*, 12(4), 172-213.
- Mthiyane, I.N., & Dolamo, B.L. (2019). Young Zulu Men's Perspectives on Masculinity and Sexual Behaviour In Rural Kwazulu-Natal. *Biomedical Journal of Scientific & Technical Research*, 22(5), 17007-17012.
- Mudaly, R. (2012). Shattering and reassembling hypersexual moments: Girls indulging in the pursuit of pleasure. *Sexualities*, 15(2), 225-242.
- Mudhovozi, P., Ramarumo, M., & Sodi, T. (2012). Adolescent Sexuality and Culture: South African Mothers' Perspective. *Adolescent Sexuality and Culture*, 16(2), 119-138.
- Mugambi, J. N. K., & Magesa, L. (1990). *The church in African Christianity: Innovative essays in ecclesiology*: Initiatives.
- Muhanguzi, F. K., Bennett, J., & Muhanguzi, H. R. (2011). The construction and mediation of sexuality and gender relations: Experiences of girls and boys in secondary schools in Uganda. *Feminist formations*, 23(3), 135-152.

- Mukhopadhyay, C., Blumenfield, C., Harper, S. & Gondek, A. (2017). Gender and Sexuality. In Nina Brown, Laura Tubelle Gonzalez, and Thomas McIlwraith (Eds.), *Perspectives: An Open Invitation to Cultural Anthropology*. Retrieved from <http://scholarexchange.furman.edu/ant-publications/>
- Mukoma, W., Flisher, A.J., Ahmed, N., Jansen, S., Mathews, C., Klepp, K.I., & Schaalma, H. (2009). Process evaluation of a school-based HIV/AIDS intervention in South Africa. *Scandinavian Journal of Public Health*, 37(2_suppl), 37-47.
- Munthali, A. C., & Zulu, E. M. (2007). The timing and role of initiation rites in preparing young people for adolescence and responsible sexual and reproductive behaviour in Malawi. *African journal of reproductive health*, 11(3), 150-167.
- Munyai, H., Makhado, L., Ramathuba, D., & Lebese, R. (2023). Challenges on sexual health communication with secondary school learners, Limpopo province. *Curationis*, 46(1), doi:<https://doi.org/10.4102/curationis.v46i1.2321>
- Myburgh, A. C. (1981). *Anthropology for southern Africa*. Pretoria: J.L. van Schaik.
- Myer, L., Denny, L., De Souza, M., Barone, M. A., Wright Jr, T. C., & Kuhn, L. (2004). Intravaginal practices, HIV and other sexually transmitted diseases among South African women. *Sexually transmitted diseases*, 31(3), 174-179.
- Myer, L., Kuhn, L., Stein, Z. A., Wright Jr, T. C., & Denny, L. (2005). Intravaginal practices, bacterial vaginosis, and women's susceptibility to HIV infection: epidemiological evidence and biological mechanisms. *The Lancet infectious diseases*, 5(12), 786-794.
- Myers, M. D. (1997). Qualitative research in information systems. *Management Information Systems Quarterly*, 21(2), 241-242.
- Naidu, M., & Mazibuko, N. (2016). Izikhothani Perceptions on Women, Sex and Sexuality. *The Oriental Anthropologist*, 16(1), 1.
- Naidu, M., & Ngqila, K.H. (2013). Enacting masculinities: Pleasure to men and violence to women. *Agenda*, 27(1), 61-70.
- Nakonezny, P. A., & Denton, W. H. (2008). Marital relationships: A social exchange theory perspective. *The American Journal of Family Therapy*, 36(5), 402-412.
- Nann, S. (2021). How beliefs in traditional healers' impact the use of allopathic medicine: The

- case of indigenous snakebite in Eswatini. *PLoS Neglected Tropical Diseases*, 15(9).
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8428564/>
- Nappi, R., Salonia, A., Traish, A. M., Van Lunsen, R. H., Vardi, Y., Kodiglu, A., & Goldstein, I. (2005). PATHOPHYSIOLOGY: Clinical Biologic Pathophysiology of Women's Sexual Dysfunction. *The journal of sexual medicine*, 2(1), 4-25.
- Ndebele, L. M. (2014). Traditional and Spiritual healing powers and foreseeing with bones. Retrieved from <http://khokhovula.co.za/spiritual-connection/traditional-and-spiritual-healing-powers-and-foreseeing-with-bones>
- Ndinda, C., Ndhlovu, T., & Khalema, N. E. (2017). Conceptions of Contraceptive Use in Rural KwaZulu-Natal, South Africa: Lessons for Programming. *International journal of environmental research and public health*, 14(4), 353.
<https://doi.org/10.3390/ijerph14040353>
- Ndinda, C., Uzodike, U. O., Chimbwete, C., & Mgeyane, M. T. (2011). Gendered perceptions of sexual behaviour in rural South Africa. *International journal of family medicine*, 2011, 973706. <https://doi.org/10.1155/2011/973706>
- Ndinda, C., Uzodike, U., Chimbwete, C., & Mgeyane, M. (2011). Gendered perceptions of sexual behaviour in rural South Africa. *International journal of family medicine*, 2011.
- Ndlovu, B. (2016). Umhlonyane. *Ulwazi Programme*. Retrieved from <http://www.ulwaziprogramme.org/2016/10/umhlonyane/>
- Ndoma, B.E. (2019). *Emerging Sexual Ethics and the Erosion of African Ethos*. <https://philarchive.org/rec/NDOESE>
- Ndwinga, J., Mugambi, K., & Magesa, L. (1990). Editorial. In *The church in African Christianity: Innovative essays in ecclesiology*: Initiatives.
- Neely, A.H. (2021). Hlonipha and health: Ancestors, taboos and social medicine in South Africa. *Africa*, 91(3), 473-492.
- Nel, M.J. (2007). *The ancestors and Zulu family transitions: A Bowen theory and practical theological interpretation* [doctoral dissertation, University of South Africa, South Africa]. <https://core.ac.uk/download/pdf/43165099.pdf>
- Nene, J.O., 2014. The concept of traditional healing and its role in African modern society.

International Journal of Social Science and Human Behavior Study, 1(1), 1-15.

- Ngabaza, S., & Shefer, T. (2019). Sexuality education in South African schools: Deconstructing the dominant response to young people's sexualities in contemporary schooling contexts. *Sex Education*, 19(4), 422-435.
- Ngubane, J.B. (1984). The Role of Amadlozi/Amathongo as seen in the Writings of WB Vilakazi. *Religion in Southern Africa*, 5(2), 55-75.
- Ngubane, S. J. (2010). *Gender roles in the African culture: implications for the spread of HIV/AIDS*. Stellenbosch: University of Stellenbosch,
- Ngubane, S.D. (2017). *Being a good Zulu woman: An investigation of female UKZN students' self-perception of Zuluness*. <https://researchspace.ukzn.ac.za/handle/10413/15258>
- Njogu, K., & Mazrui, E. (2008). Culture, gender inequality and women rights in the Great Lakes. *Culture, performance and identity*, 1-39.
- Njogu, K., & Orchardson-Mazrui, E. (2009). Gender Inequality And Women's Rights In The Great Lakes: Can Culture Contribute To Women's Empowerment? UNESCO
- Njogu, K., & Orchardson-Mazrui, E. (2013). Gender inequality and women's rights in the Great Lakes: can culture contribute to women's empowerment. *UNICEF policy document*.
- Nkabinde, A. C. (1985). *Isichazamazwi 2* (Vol. 2): Oxford University Press, South Africa.
- Nkosi, G. (2015). African children and sexuality: A perspective on traditional and contemporary approaches. *Obiter*, 36(1), 112-120.
- Noar, S. M., & Morokoff, P. J. (2002). The relationship between masculinity ideology, condom attitudes, and condom use: Stage of change; a structural equation modeling approach. *International Journal of Men's Health*, 1(1), 43.
- Noble, H., & Smith, J. (2015). Issues of validity and reliability in qualitative research. *Evidence-Based Nursing*, ebnurs-2015-102054.
- Ntseane, P. G. (2004). Cultural dimensions of sexuality: Empowerment challenge for HIV/AIDS prevention in Botswana. *Development in Southern Africa*, 22 (3) pp.347-363

- Ntseane, P. G., & Preece, J. (2005). Why HIV/AIDS prevention strategies fail in Botswana: Considering discourses of sexuality. *Development Southern Africa*, 22(3), 347-363.
- Ntshangase, M.C. (2012). *Some gendered African ritual practices: The case of impepho (an indigenous African plant)*. <https://researchspace.ukzn.ac.za/xmlui/handle/10413/6349>
- Ntuli, P. (2002). *African Knowledge Systems and African Renaissance: Indigenous Knowledge and Integration of Knowledge Systems*.
https://monoskop.org/images/8/87/Odora_Hoppers_Catherine_A_ed_Indigenous_Knowledge_and_the_Integration_of_Knowledge_Systems_2002.pdf
- Nyanzi, S. (2011) 'Unpacking the governmentality of African sexualities' in S Tamale, (ed) *African Sexualities: A Reader*, Cape Town: Pambazuka
- Nyawose, T.Z. (2013). *Living in two worlds: Optimising our indigenous knowledge systems to address the modern pandemic, HIV and AIDS* [doctoral dissertation, Durban University of Technology, South Africa].
- Nyoko, M. (2014). Why African parents can't talk about sex. *This is Africa*. Retrieved from This is Africa website: <https://thisisafrika.me/why-african-parents-cant-talk-about-sex/>
- O. Nyumba, T., Wilson, K., Derrick, C. J., & Mukherjee, N. (2018). The use of focus group discussion methodology: Insights from two decades of application in conservation. *Methods in Ecology and evolution*, 9(1), 20-32.
- Odhiambo, T. (2008). The black female body as a 'consumer and a consumable' in current Drum and True Love magazines in South Africa. *African studies*, 67(1), 71-80.
- Ogana, W.N., & Ojong, V.B. (2013). The thin/thick body ideal: Zulu women's body as a site of cultural and postcolonial feminist struggle. *Agenda*, 27(4), 110-119.
- Ojwang, H.J., Kabira, W.M., & Ogada, P.A. (2021). Philosophical Foundations of African Women's indigenous Knowledge for Food Security: Towards Narrative Feminist Pedagogy. *Florida Distance Learning Association Journal*, 6(1), 4. <https://nsuworks.nova.edu/fdla-journal/vol6/iss1/4>
- Okazaki, S. (2002). Influences of culture on Asian Americans' sexuality. *The Journal of Sex Research*, 39(1), 34-41. doi:10.1080/00224490209552117
- Okechi, O.S. (2018). The indigenous concept of sexuality in African tradition and

- globalisation. *Global Journal of Reproductive Medicine*, 6(1), 1-5.
- Okiria, E. M. (2014). Perspectives of sexuality and aging in the African culture: Eastern Uganda. *International Journal of Sociology and Anthropology*, 6(4), 126.
- Olesen, V. (2000). Feminisms and Models of Qualitative Research. In Y. S. Lincoln & N. K. Denzin (Eds.), *The handbook of qualitative research*. London: SAGE.
- Online, H.-N. H. S. S. (2015). Call for Papers: Sexuality and Culture in Postcolonial Africa [Press release]
- Onoya, D., Reddy, P. S., Ruiter, R. A., Sifunda, S., Wingood, G., & van den Borne, B. (2011). Psychosocial correlates of condom use consistency among Isixhosa-speaking women living with HIV in the Western Cape Province of South Africa. *Journal of health psychology*, 16(8), 1208-1220.
- Onwuegbuzie, A. J., & Collins, K. M. (2007). A typology of mixed methods sampling designs in social science research. *The qualitative report*, 12(2), 281-316.
- Onwuegbuzie, A. J., & Leech, N. L. (2005). The role of sampling in qualitative research. *Academic Exchange Quarterly*, 9(3), 280-285.
- Organization, W. H. (2012). A multi-country study on gender, sexuality and vaginal practices: implications for sexual health: policy brief.
- Oriel, J. (2005). *Sexual pleasure as a human right: Harmful or helpful to women in the context of HIV/AIDS?* Paper presented at the Women's Studies International Forum.
- Osafo, J., Asampong, E., Langmagne, S., & Ahiedeke, C. (2014). Perceptions of parents on how religion influences adolescents' sexual behaviours in two Ghanaian communities: Implications for HIV and AIDS prevention. *Journal of Religion and Health*, 53(1). 959-971.
- Osakue, G., & Martin-Hilber, A. (1998). Women's Sexuality and Fertility in Nigeria: Breaking the Culture of Silence. In R. P. Petchesky & K. Judd (Eds.), *Negotiating reproductive rights: women's perspectives across countries and cultures*. London; New York, NY, USA: Zed Books.
- Osmond, M. W., & Thorne, B. (1993). Feminist theories: The social construction of gender in families and society. In P. Boss (Ed.), *Sourcebook of family theories and methods: a*

- contextual approach* (pp. 591-623). New York: Plenum Press.
- Otu, O.O. (2016). African women and forbidden grounds: Female sexuality and self-determination in African literature. *International Journal of African Literary and Comparative Studies*, 7(1), 40-54.
- Padian, N. S., van der Straten, A., Ramjee, G., Chipato, T., de Bruyn, G., Blanchard, K., . . . Cheng, H. (2007). Diaphragm and lubricant gel for prevention of HIV acquisition in southern African women: a randomised controlled trial. *The lancet*, 370(9583), 251-261.
- Panday, S., Makiwane, M., Ranchod, C., & Letsoala, T. (2009). *Teenage pregnancy in South Africa—With a specific focus on school-going learners*.
https://www.gov.za/sites/default/files/gcis_document/201409/dobeteenagepregnancyr eport.pdf
- Parker, W., Makhubele, B., Ntlabati, P., & Connolly, C. (2007). Concurrent sexual partnerships amongst young adults in South Africa. Challenges for HIV prevention communication.
- Partington, G. (2001). Qualitative research interviews: Identifying problems in technique. *Issues in Educational Research*, 11(2), 32-44.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods*: SAGE Publications, Inc.
- Peixoto, M.M., Amarelo-Pires, I., Pimentel Biscaia, M.S., & Machado, P.P. (2018). Sexual self-esteem, sexual functioning and sexual satisfaction in Portuguese heterosexual university students. *Psychology and Sexuality*, 9(4), 305-316.
- Peltzer, K. (2001a). Tobacco smoking in black and white South Africans. *East African Medical Journal*, 78(3), 115-118.
- Peltzer, K. (2001b). Tobacco use among black South African university students: Attitudes, risk awareness and health locus of control. *Curationis*, 24(2), 4-8.
- Peltzer, K., Phaswana, N., & Malaka, D. (2001). Smokeless tobacco use among adults in the Northern Province of South Africa: qualitative data from focus groups. *Substance use & misuse*, 36(4), 447-462.
- Petchesky, R. P., & Judd, K. (1998). *Negotiating reproductive rights: women's perspectives across countries and cultures*. London; New York, NY, USA: Zed Books.

- Peté, S.A., & Crocker, A.D. (2012). Ancient rituals and their place in the modern world; Culture, masculinity and the killing of bulls-part one. *Obiter*, 33(2), 278-296.
- Peters, A., Van Driel, F., & Jansen, W. (2014). Acceptability of the female condom by sub-Saharan African women: a literature review. *African journal of reproductive health*, 18(4), 34-44.
- Phetla, G., Busza, J., Hargreaves, J.R., Pronyk, P.M., Kim, J.C., Morison, L.A., Watts, C., & Porter, J.D. (2008). “They have opened our mouths”: Increasing women's skills and motivation for sexual communication with young people in rural South Africa. *AIDS Education and Prevention*, 20(6), 504-518.
- Phiri, P. (2024) Women in Zambia are Obsessed With Using Tobacco for Sex-Despite the Health Risks. <https://globalpressjournal.com/africa/zambia/zambian-women-obsessed-using-tobacco-sex-despite-health-risks/>
- Pinto, J. (2012). Performatividade Radical: ato de fala ou ato do corpo? [Radical performativity: Speech act or body act?]. *Gênero* 3 (1): 101–110.
- Polela, M. (2011). *My father, my monster*: Jacana Media.
- Polit, D. F., & Beck, C. T. (2010). Generalization in quantitative and qualitative research: Myths and strategies. *International journal of nursing studies*, 47(11), 1451-1458.
- Pope, C., Ziebland, S., & Mays, N. (2000). Analysing qualitative data. *British Medical Journal*, 320(7227), 114-116. doi:10.1136/bmj.320.7227.114
- Pope, C., Ziebland, S., & Mays, N. (2000). Qualitative research in health care: analysing qualitative data. *BMJ: British Medical Journal*, 320(7227), 114.
- Posel, D. (2004). ‘Getting the nation talking about sex’: reflections on the discursive constitution of sexuality in South Africa since 1994. *Agenda*, 18(62), 53-63.
- Posel, D., Rudwick, S., & Casale, D. (2011). Is marriage a dying institution in South Africa? Exploring changes in marriage in the context of ilobolo payments. *Agenda*, 25(1), 102-111.
- Prohmmo, A., & Watcharasin, C. (2007). *Motivations and prevalence of vaginal practices among Thai women*. <https://paa2007.populationassociation.org/papers/71877>

- Pylypa, J. (1998). Power and bodily practice: Applying the work of Foucault to an anthropology of the body. *Arizona Anthropologist*.
- Qi, X., Zhang, W., Ge, M., Sun, Q., Peng, L., Cheng, W., & Li, X. (2021). Relationship between dairy products intake and risk of endometriosis: a systematic review and dose-response meta-analysis. *Frontiers in Nutrition*, 8, 701860.
- Querna, K. (2008). Designer Vaginas. *Journal Of Student Social Work*, VI, 57-67.
- Raday, F. (2003). Culture, religion, and gender. *International Journal of Constitutional Law*, 1(4), 663-715.
- Rajasekar, S., Philominathan, P., & Chinnathambi, V. (2006). Research Methodology. 1-53.
- Ramashala, M. D. (1997). The informal sector in hostels: the case of KwaDabeka Hostels.
- Ramphela, M. (1992). Social disintegration in the black community. In D. Everatt, E. Sisulu, & E. Community Agency for Social (Eds.), *Black youth in crisis: facing the future*. Braamfontein, South Africa: Ravan Press.
- Randolph, J. J. (2009). A guide to writing the dissertation literature review. *Practical Assessment, Research & Evaluation*, 14(13), 1-13.
- Ranganathan, M., Heise, L., Pettifor, A., Silverwood, R. J., Selin, A., MacPhail, C., Hughes, J. P. (2016). Transactional sex among young women in rural South Africa: prevalence, mediators and association with HIV infection. *Journal of the International AIDS society*, 19(1).
- Raskin, J. D. (2002). Constructivism in psychology: Personal construct psychology, radical constructivism, and social constructionism. In J. D. Raskin & S. K. Bridges (Eds.), *Studies in meaning: Exploring constructivist psychology*: Pace University Press.
- Raskin, J. D., & Bridges, S. K. (2002). *Studies in meaning: Exploring constructivist psychology*: Pace University Press.
- Ratele, K. (2006). Ruling masculinity and sexuality. *Feminist Africa*, 6(6).
- Ratele, K. (2008). Masculinity and male mortality in South Africa. *African Safety Promotion*, 6(2), 19-41.
- Ratele, K. (2013). Masculinities without tradition. *Politikon*, 40(1), 133-156.

- Ratele, K., & Suffla, S. (2011). Men, Masculinity, and Cultures of Violence and Peace in South Africa. In C. Blazina, & D. Shen-Miller, D. S. (Eds.). *An International Psychology of Men* (1st ed.) (pp. 1011-1022). Routledge
- Ray, S., Gumbo, N., & Mbizvo, M. (1996). Local voices: what some Harare men say about preparation for sex. *Reproductive Health Matters*, 4(7), 34-45.
- Reason, P., & Rowan, J. (1981). *Human inquiry: a sourcebook of new paradigm research*: J. Wiley.
- Reddy, P., Meyer-Weitz, A., Van Den Borne, B., & Kok, G. (1999). STD-related knowledge, beliefs and attitudes of Xhosa-speaking patients attending STD primary health-care clinics in South Africa. *International journal of STD & AIDS*, 10(6), 392-400.
- Reed, B. D., Ford, K., & Wirawan, D. N. (2001). The Bali STD/AIDS study: association between vaginal hygiene practices and STDs among sex workers. *Sexually Transmitted Infections*, 77(1), 46-52.
- Rembe, S., Chabaya, O., Wadesango, N., & Muhuro, P. (2011). Child and forced marriage as violation of women's rights, and responses by member states in Southern African Development Community. *Agenda*, 25(1), 65-74.
- Remes, P., Renju, J., Nyalali, K., Medard, L., Kimaryo, M., Changanlucha, J., Wight, D. (2010). Dusty discos and dangerous desires: community perceptions of adolescent sexual and reproductive health risks and vulnerability and the potential role of parents in rural Mwanza, Tanzania. *Culture, health & sexuality*, 12(3), 279-292.
- Reyna, V. F., & Farley, F. (2006). Risk and rationality in adolescent decision making: Implications for theory, practice, and public policy. *Psychological science in the public interest*, 7(1), 1-44.
- Ritchie, J., Lewis, J., Nicholls, C. M., & Ormston, R. (2013). *Qualitative research practice: A guide for social science students and researchers*: Sage.
- Roberts, C., & Street, B. (2017). Spoken and written language. In R. Wodak & B. Johnstone (Eds.). *The Handbook of Sociolinguistics* (pp.168-186). Wiley.
- Roberts, P., & Priest, H. (2006). Reliability and validity in research. *Nursing Standard*, 20(44), 41-46.

- Rodrigues, S. (2012). From vaginal exception to exceptional vagina: The biopolitics of female genital cosmetic surgery. *Sexualities, 15*(7), 778-794.
- Rohlinger, D. A. (2002). Eroticizing men: Cultural influences on advertising and male objectification. *Sex Roles, 46*(3-4), 61-74.
- Rohrbaugh, J., & Jessor, R. (1975). Religiosity in youth: A personal control against deviant behavior. *Journal of personality, 43*(1), 136-155.
- Rubin, G. S. (1984). Thinking Sex: Notes for a Radical Theory of the Politics of Sexuality. In C. S. Vance (Ed.), *Pleasure and danger: Exploring female sexuality* (pp. 188-234).
- Rudman, L. A., & Glick, P. (2001). Prescriptive gender stereotypes and backlash toward agentic women. *Journal of social issues, 57*(4), 743-762.
- Rudwick, S. I. (2008). Shifting norms of linguistic and cultural respect: Hybrid sociolinguistic Zulu identities. *Nordic Journal of African Studies, 17*(2), 152-174.
- Rudwick, S., & Shange, M. (2009). Hlonipha and the rural Zulu woman. *Agenda, 23*(82), 66-75.
- Runganga, A., Pitts, M., & John, M. (1992). The use of herbal and other agents to enhance sexual experience. *Social science & medicine, 35*(8), 1037-1042.
- Ryan, M., J., & Julia, M., B. (2007). *The Symbiotic Nature of Hermeneutical vs. Classical Generated Knowledge*. Paper presented at the AMA Winter Educators' Conference, Chicago.
- Saldaña, J. (2009). *The coding manual for qualitative researchers*. London; Thousand Oaks, Calif.: Sage.
- Salih, S. (2002). On Judith Butler and Performativity. In S. Salih (Ed.), *Judith Butler* (pp. 55-68): Routledge.
- Salisu, M. (2023). Older Black Women's Narratives on Sexuality. *Generations, 46*(4), 8-17.
- Salkind, N. J. (2012). *Exploring research*. Boston: Pearson.
- Salo, E. (2001). Talking about feminism in Africa. *Agenda, 16*(50), 58-63.

- Sanchez, D. T., Kiefer, A. K., & Ybarra, O. (2006). Sexual submissiveness in women: Costs for sexual autonomy and arousal. *Personality and Social Psychology Bulletin*, 32(4), 512-524.
- Sarkar, S. (2014). Media and women image: A Feminist discourse. *Journal of Media and Communication Studies*, 6(3), 48.
- Sasaki, J. Y., & Kim, H. S. (2011). At the intersection of culture and religion: A cultural analysis of religion's implications for secondary control and social affiliation. *Journal of Personality and Social Psychology*, 101(2), 401.
- Satcher, D. (2001). The Surgeon General's call to action to promote sexual health and responsible sexual behavior. *American Journal of Health Education*, 32(6), 356-368.
- Schalkwyk, J. (2000). Culture, gender equality and development cooperation. *Note prepared for the Canadian International Development Agency (Cida), Quebec. Online: www.oecd.org/dataoecd/2/9/1896320.pdf (downloaded Nov. 14, 2008).*
- Schick, V. R., Calabrese, S. K., Rima, B. N., & Zucker, A. N. (2010). Genital appearance dissatisfaction: Implications for women's genital image self-consciousness, sexual esteem, sexual satisfaction, and sexual risk. *Psychology of women quarterly*, 34(3), 394-404.
- Schippers, M. (2007). Recovering the feminine other: Masculinity, femininity, and gender hegemony. *Theory and society*, 36(1), 85-102.
- Schwandt, T. A. (2003). Three epistemological stances for qualitative inquiry: Interpretativism, hermeneutics and social constructionism. In N. K. Denzin & Y. S. Lincoln (Eds.), *The landscape of qualitative research: theories and issues* (pp. 292-331). Thousand Oaks, Calif.: SAGE Publications.
- Scorgie, F., Beksinska, M., Chersich, M., Kunene, B., Hilber, A. M., & Smit, J. (2011). "Cutting for love": genital incisions to enhance sexual desirability and commitment in KwaZulu-Natal, South Africa. *Reproductive Health Matters*, 18(35), 64-73.
- Scorgie, F., Beksinska, M., Chersich, M., Kunene, B., Hilber, A.M., & Smit, J. (2010). "Cutting for love"; Genital incisions to enhance sexual desirability and commitment in KZN, South Africa. *Reproductive Health Matters*, 18(35), 64-73.

- Scorgie, F., Kunene, B., Smit, J.A., Manzini, N., Chersich, M.F., & Preston-Whyte, E.M. (2009). In search of sexual pleasure and fidelity: Vaginal practices in KwaZulu-Natal, South Africa. *Culture, Health and Sexuality*, 11(3), 267-283.
- Scot, A. (2022) A Brief Note on Socio-Cultural Anthropology. *Global Journal of Anthropology and Sociology* 11 (2) pp. 001-002
- Scotland, J. (2012). Exploring the philosophical underpinnings of research: Relating ontology and epistemology to the methodology and methods of the scientific, interpretive, and critical research paradigms. *English Language Teaching*, 5(9), 9.
- Seale, C. (1999). Quality in Qualitative Research. *Qualitative Inquiry*, 5(4), 465-478. Doi: 10.1177/107780049900500402
- Segoete, L. (2015). African female sexuality is past taboo. Retrieved from <https://thisisafrica.me/sexuality-taboo/> website: <https://thisisafrica.me/sexuality-taboo/>
- Selikow, T.-A., Zulu, B., & CEDRA, E. (2002). The ingagara, the regte and the cherry: HIV/AIDS and youth culture in contemporary urban townships. *Agenda*, 17(53), 22-32.
- Selikow, T.A. (2004). "We have our own special language." Language, sexuality and HIV/AIDS: A case study of youth in an urban township in South Africa. *African Health Sciences*, 4(2), 102-108.
- Sesay, W. (2010). Female bodies: Gender inequalities, vulnerability, HIV and AIDS in Kenya. *Advancing Women in Leadership*, 30.
- Shabanian, S., Khalili, S., Lorigooini, Z., Malekpour, A., & Heidari-Soureshjani, S. (2017). The effect of vaginal cream containing ginger in users of clotrimazole vaginal cream on vaginal candidiasis. *Journal of Advanced Pharmaceutical Technology and Research*, 8(2), 80-84.
- Shahhosseini, Z., Gardeshi, Z. H., Poursaghar, M., & Salehi, F. (2014). A review of affecting factors on sexual satisfaction in women. *Materia socio-medica*, 26(6), 378.
- Sharifian, F. (2014). *The Routledge handbook of language and culture*: Routledge.
- Shava, S., & Masuku, S. (2019). Living currency: The multiple roles of livestock in livelihood sustenance and exchange in the context of rural indigenous communities in southern

Africa. *Southern African Journal of Environmental Education*, 35.
<https://www.ajol.info/index.php/sajee/article/view/187214>

Shefer, T., & Foster, D. (2001). Discourses on women's (hetero) sexuality and desire in a South African local context. *Culture, health & sexuality*, 3(4), 375-390.

Shefer, T., & Foster, D. (2009). Heterosex amongst Young South Africans: Research Reflections. In M. E. Steyn & M. Van Zyl (Eds.), *The prize and the price: shaping sexualities in South Africa* (pp. 267-289). Cape Town, South Africa: HSRC Press.

Shefer, T., & Macleod, C. (2015). Life Orientation sexuality education in South Africa: Gendered norms, justice and transformation. *Perspectives in Education*, 33(2), 1-10.

Shefer, T., Crawford, M., Strebel, A., Simbayi, L., & Dwadwa-Henda, N. (2009). Intersections of Gender & HIV: Overview & critical reflection on new directions. *University of the Western Cape*.

Shipley, H. (2015). Introduction. In P. D. Young, H. Shipley, & T. J. Trothen (Eds.), *Religion and sexuality: Diversity and the limits of tolerance* (pp. 3-17): UBC Press.

Shisana, O. (2004). *Gender and HIV/AIDS: Focus on Southern Africa*. Paper presented at the Inaugural International Institute on Gender and HIV/AIDS, Kopanong Conference Centre, Johannesburg, South Africa.
https://cdn.dal.ca/content/dam/dalhousie/pdf/diff/ace-women-health/HIV/ACEWH_IIGHA_strengthening_connection_between_practice_policy_final_report.pdf

Shisana, O., Rehle, T., Simbayi, L., Zuma, K., Jooste, S., Wyk, P.V., Mbelle, N., Van Zyl, J., Parker, W., Zungu, N.P., & Pezi, S. (2009). *South African national HIV prevalence, incidence, behaviour and communication survey, 2008: A turning tide among teenagers?* <https://www.hsrcpress.ac.za/books/south-african-national-hiv-prevalence-incidence-behaviour-and-communication-survey-2008>

Shtarkshall, R.A., Santelli, J.S., & Hirsch, J.S. (2007). Sex education and sexual socialisation: Roles for educators and parents. *Perspectives on Sexual and Reproductive Health*, 39(2), 116-119.

Sik, V. L. (2016). Can a woman have more than one husband? *Drum Digital*. Retrieved from <https://www.news24.com/Drum/Archive/can-a-woman-have-more-than-one-husband->

- Silberschmidt, M. (1999). *"Women forget that men are the masters": gender antagonism and socio-economic change in Kisii District, Kenya*. Nordic Africa Institute.
- Silindza, B.N. (2020, November 17). Indlu Ka-Gogo (Umsamo). *Consciousness Magazine*. <https://consciousness.co.za/indlu-ka-gogo-umsamo/>
- Simamane, N. (2013). *Young Black Women's Constructions of Sexuality in the Context of HIV and AIDS in a Township School in Durban*. University of KwaZulu-Natal, Durban,
- Simon, W., & Gagnon, J. H. (2003). Sexual scripts: Origins, influences and changes. *Qualitative sociology*, 26(4), 491-497.
- Singh, C., & Bhagwan, R. (2020). African spirituality: Unearthing beliefs and practices for the helping professions. *Social Work*, 56(4), 403-415.
- Singletary, K. (2019). Cinnamon: update of potential health benefits. *Nutrition Today*, 54(1), 42-52.
- Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative research in psychology*, 1(1), 39-54.
- Sofaer, S. (2002). Qualitative research methods. *International journal for quality in health care*, 14(4), 329-336.
- Sofaer, S. (2002). Qualitative research methods. *International Journal for Quality in Health Care*, 14(4), 329-336.
- Sosibo, K. (2016, April 7). Cows: The sacred and the profane. *Mail & Guardian*. <https://mg.co.za/article/2016-04-07-cows-the-sacred-and-the-profane/>
- Spanier, G.B. (1977). Sexual socialisation: A conceptual review. *International Journal of Sociology of the Family*, 7(1), 7-106.
- Spaumer, A. (2017). *Conflict management in black African marriages in an urban context: An exploratory study* [doctoral dissertation, University of Pretoria, South Africa].
- Sprecher, S., Cate, R. M., Harvey, J., & Wenzel, A. (2004). Sexual satisfaction and sexual expression as predictors of relationship satisfaction and stability. *The handbook of*

sexuality in close relationships, 235-256.

- Stanisiere, J., Mousset, P.Y., & Lafay, S. (2018). How safe is ginger rhizome for decreasing nausea and vomiting in women during early pregnancy? *Foods*, 7(4). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5920415/>
- Steyn, M. E., & Van Zyl, M. (2009). *The prize and the price: shaping sexualities in South Africa*. Cape Town, South Africa: HSRC Press.
- Stoebenau, K., Heise, L., Wamoyi, J., & Bobrova, N. (2016). Revisiting the understanding of “transactional sex” in sub-Saharan Africa: A review and synthesis of the literature. *Social science & medicine*, 168, 186-197.
- Strebel, A., Crawford, M., Shefer, T., Cloete, A., Henda, N., Kaufman, M., Kalichman, S. (2006). Social constructions of gender roles, gender-based violence and HIV/AIDS in two communities of the Western Cape, South Africa. *SAHARA-J: Journal of Social Aspects of HIV/AIDS*, 3(3), 516-528.
- Subedi, K. R. (2021). Determining the Sample in Qualitative Research. *Online Submission*, 4, 1-13.
- Sultana, A. (2012). Patriarchy and Women’s Subordination: A Theoretical Analysis. *Arts Faculty Journal*, 4(July 2010-June 2011), 1-18. doi:<http://dx.doi.org/10.3329/afj.v4i0.12929>
- Sutherland, M.A., Fantasia, H.C., & Adkison, L. (2014). Sexual health and dissociative experiences among abused women. *Issues in Mental Health Nursing*, 35(1), 41-49.
- Sutton, J., & Austin, Z. (2015). Qualitative research: data collection, analysis, and management. *The Canadian journal of hospital pharmacy*, 68(3), 226.
- Swain, J., & King, B. (2022). Using informal conversations in qualitative research. *International Journal of Qualitative Methods*, 21(1). <https://journals.sagepub.com/doi/10.1177/16094069221085056>
- Szymanski, D. M., Moffitt, L. B., & Carr, E. R. (2011). Sexual objectification of women: Advances to theory and research 1ψ7. *The Counseling Psychologist*, 39(1), 6-38.
- Talcott, G.W., Ebbert, J.O., Klesges, R.C., Linde, B.D., Seals, R.W., Krukowski, R.A., Grieser, E.A., Oh, J.Y., & Martin-Zona, D.M. (2015). Tobacco research in the military:

- Reflections on 20 years of research in the United States Air Force. *Military Medicine*, 180(8), 848-850.
- Tamale, S. (2005). Eroticism, sensuality and “women's secrets” among the Baganda. *Feminist Africa*, 37(5), 9-36.
- Tamale, S. (2010). The right to culture and the culture of rights: A critical perspective on women's sexual rights in Africa. In C. O. Izugbara, C.-C. Undie, & J. W. Khamasi (Eds.), *Old wineskins, new wine: readings in sexuality in Sub-Saharan Africa* (pp. 53-69). New York: Nova Science Publishers, Inc.
- Tamale, S. (2011). Researching and theorising sexualities in Africa. *African Sexualities*, 14(3), 11-36.
- Tamale, S. (2014). Exploring the contours of African sexualities: Religion, law and power. *African Human Rights Law Journal*, 14(1), 150-177.
- Tamale, S. (2016). Controlling Women's Fertility in Uganda: Perspectives on religion, law and medicine. *International Journal on Human Rights*, 24(13), 117-128.
- Tanaka, L. (2015). Language, Gender and Culture. In F. Sharifian (Ed.), *The Routledge handbook of language and culture* (pp. 100-113): Routledge.
- Taylor, B. J. (2006). *Research in nursing and health care: Evidence for practice*: Cengage Learning Australia.
- Terre Blanche, M., & Durrheim, K. (1999). Social constructionist methods. *Research in practice: Applied methods for the social sciences*, 147-172.
- Thabede, D. (2008). The African worldview as the basis of practice in the helping professions. *Social Work/Maatskaplike Werk*, 44(3).
<https://socialwork.journals.ac.za/pub/article/view/237/219>
- Thetela, P.H. (2002). Sex discourses and gender constructions in Southern Sotho: A case study of police interviews of rape/sexual assault victims. *Southern African Linguistics and Applied Language Studies*, 20(3), 177-189.
- Thobejane, T. D., & Flora, T. (2014). An exploration of polygamous marriages: A worldview. *Mediterranean Journal of Social Sciences*, 5(27 P2), 1058.
- Thompson, J. A., O’Sullivan, P. B., Briffa, N. K., & Neumann, P. (2006). Assessment of

voluntary pelvic floor muscle contraction in continent and incontinent women using transperineal ultrasound, manual muscle testing and vaginal squeeze pressure measurements. *International Urogynecology Journal*, 17(6), 624-630.

Thompson, P. W. (2013). Constructivism in mathematics education. In *Encyclopedia of mathematics education* (pp. 96-102): Springer.

Thorne, S. (2000). Data analysis in qualitative research. *Evidence-Based Nursing*, 3(3), 68-70.

Tiefer, L. (1995). *Sex is Not a Natural Act and Other Essays*. Boulder.

Tischler, H. L. (2013). *Cengage Advantage Books: Introduction to Sociology*: Cengage Learning.

Tokuhata, G.K. (1967). Epidemiology of cancer of the cervix. IV. Tobacco and cancer of the genitalia among married women. *American Journal of Public Health and the Nation's Health*, 57(5), 830-839.

Trapido, A. (2020). Snuff is Existentially Important to Many South Africans. <https://www.news24.com/citypress/trending/snuff-is-existentially-essential-to-many-south-africans-20200412>

Trollope-Kumar, K. (2001). Cultural and biomedical meanings of the complaint of leukorrhea in South Asian women. *Tropical Medicine & International Health*, 6(4), 260-266.

Trudgill, P. (1974). Linguistic change and diffusion: Description and explanation in sociolinguistic dialect geography. *Language in Society*, 3(2), 215-246.

Truter, I. (2007). African traditional healers: Cultural and religious beliefs intertwined in a holistic way. *South African Pharmaceutical Journal*, 74(8), 56-60.

Tsai, C. S., Shepherd, B. E., & Vermund, S. H. (2009). Does douching increase risk for sexually transmitted infections? A prospective study in high-risk adolescents. *American Journal of Obstetrics & Gynecology*, 200(1), 38. e31-38. e38.

Tuli, F. (2011). The basis of distinction between qualitative and quantitative research in social science: Reflection on ontological, epistemological and methodological perspectives. *Ethiopian Journal of Education and Sciences*, 6(1).

Turner, A. N., Morrison, C. S., Munjoma, M. W., Moyo, P., Chipato, T., & Van de Wijgert, J.

- H. (2010). Vaginal practices of HIV-negative Zimbabwean women. *Infectious diseases in obstetrics and gynecology*, 2010.
- Turner, B. S. (2008). *The Body and Society: Explorations in Social Theory*: SAGE.
- Uchem, R. N., & Ngwa, E. S. (2014). Subordination of Women in 21st century Africa: Cultural Sustainability or a New Slavery? Implications for Educational Development. *Developing Country Studies*, 4(24), 143-150.
- Udeze, C.N., Ezenwa, M.O., & Abamara, N.C. (2020). Effect of cancer education on the practice of breast self-examination among adult women in Nigeria. *Cogent Psychology*, 7(1).
- Undie, C.C., Crichton, J., & Zulu, E. (2007). Metaphors we love by: Conceptualisations of sex among young people in Malawi. *African Journal of Reproductive Health*, 11(3), 221-235.
- UNESCO. (2014). *Gender equality, heritage and creativity*. Retrieved from France:
- Unger, R. K. (2001). *Handbook of the psychology of women and gender*. New York: Wiley.
- UNICEF (United Nations International Children's Emergency Fund). (No Date). *UNICEF for every child*. <https://www.unicef.org/>
- Uwah, C., & Wright, S. (2012). Socio-cultural identities, perceptions of sexuality/sexual behaviour and cultural contexts as determinants of HIV and AIDS prevalence in Southern Africa. *World Journal of AIDS*, 2(1), 17-23.
- van Andel, T., de Boer, H., & Towns, A. (2015). Gynaecological, Andrological and Urological Problems: An Ethnopharmacological Perspective. *Ethnopharmacology*, 199.
- Van den Berg, P., Paxton, S.J., Keery, H., Wall, M., Guo, J., & Neumark-Sztainer, D. (2007). Body dissatisfaction and body comparison with media images in males and females. *Body Image*, 4(3), 257-268.
- Van den Berg, P., Paxton, S.J., Keery, H., Wall, M., Guo, J., & Neumark-Sztainer, D. (2007). Body dissatisfaction and body comparison with media images in males and females. *Body Image*, 4(3), 257-268.
- van der Straten, A., Cheng, H., Chidanyika, A., De Bruyn, G., Padian, N., & Team, M. (2010).

- Vaginal practices and associations with barrier methods and gel use among Sub-Saharan African women enrolled in an HIV prevention trial. *AIDS and Behavior*, 14(3), 590-599.
- Van der Zeijst, M., Veling, W., Makhathini, E.M., Susser, E., Burns, J.K., Hoek, H.W., & Susser, I. (2021). Ancestral calling, traditional health practitioner training and mental illness: An ethnographic study from rural KZN, South Africa. *Transcultural Psychiatry*, 58(4), 471-485.
- Vasileiou, K., Barnett, J., Thorpe, S., & Young, T. (2018). Characterising and justifying sample size sufficiency in interview-based studies: systematic analysis of qualitative health research over a 15-year period. *BMC medical research methodology*, 18, 1-18.
- Verona, A. P. A., & Regnerus, M. (2014). Pentecostalism and premarital sexual initiation in Brazil. *Revista Brasileira de Estudos de População*, 31(1), 99-115.
- Vicsek, L. (2007). A scheme for analyzing the results of focus groups. *International journal of qualitative methods*, 6(4), 20-34.
- Vilakazi, A. (1962). *Zulu transformations: A study of the dynamics of social change*. University of Natal Press.
- Villanueva, M. I. M. (1997). *The Social Construction of Sexuality: Personal Meanings, Perceptions of Sexual Experience, and Females' Sexuality in Puerto Rico*. Virginia Tech,
- Vincent, W., Parrott, D. J., & Peterson, J. L. (2011). Effects of traditional gender role norms and religious fundamentalism on self-identified heterosexual men's attitudes, anger, and aggression toward gay men and lesbians. *Psychology of Men & Masculinity*, 12(4), 383.
- Wadesango, N., Rembe, S., & Chabaya, O. (2011). Violation of women's rights by harmful traditional practices. *The Anthropologist*, 13(2), 121-129.
- Walby, S. (1990). *Theorizing patriarchy*. Oxford, UK; Cambridge, MA, USA: B. Blackwell.
- Walby, S. (1994). Towards a theory of patriarchy. *Polity reader in gender studies*, 22-28.
- Wallace, D. M. (2007). It's a MAN thang": Black male gender role socialization and the performance of masculinity in love relationships. *The Journal of Pan African Studies*, 1(7), 11-22.

- Wamoyi, J., Wight, D., Plummer, M., Mshana, G. H., & Ross, D. (2010). Transactional sex amongst young people in rural northern Tanzania: an ethnography of young women's motivations and negotiation. *Reproductive health*, 7(1), 2.
- Wane, N.N. (2002). African women and spirituality: Connections between thought and education. In E. O'Sullivan, A. Morrell & M. O'Connor (Eds.). *Expanding the boundaries of transformative learning: Essays on theory and praxis* (pp. 135-150). Springer.
- Wang, Y., & Fesenmaier, D. R. (2004). Towards understanding members' general participation in and active contribution to an online travel community. *Tourism management*, 25(6), 709-722.
- Weaver, K., & Olson, J. K. (2006). Understanding paradigms used for nursing research. *Journal of advanced nursing*, 53(4), 459-469.
- Welsh, D.J. (1971). *The roots of segregation: Native policy in colonial Natal, 1845-1910*. Quagga Book.
- Wentzell, E., & Labuski, C. (2020). Role of medical anthropology in understanding cultural differences in sexuality. *Cultural Differences and the Practice of Sexual Medicine: A Guide for Sexual Health Practitioners*, 23-35.
- West, C., & Zimmerman, D. H. (1987). Doing gender. *Gender & Society*, 1(2), 125-151.
- WHO & PAHO. (2012). Female genital mutilation. *Understanding and Addressing Violence against Women*, 8. Retrieved from http://www.who.int/reproductivehealth/publications/violence/rhr12_41/en/
- Whiffin, C.J., Bailey, C., Ellis-Hill, C., & Jarrett, N. (2014). Challenges and solutions during analysis in a longitudinal narrative case study. *Nurse Researcher*, 21(4), 20-26.
- Whitaker, C., Stevelink, S., & Fear, N. (2017). The use of Facebook in recruiting participants for health research purposes: a systematic review. *Journal of medical Internet research*, 19(8), e290.
- White, P. (2015). The concept of diseases and health care in African traditional religion in Ghana. *HTS/Theological Studies*, 71(3), 1-7.
- WHO (World Health Organisation). (2012). *A multi-country study on gender, sexuality and*

vaginal practices: Implications for sexual health.
<https://www.who.int/publications/i/item/WHO-RHR-HRP-12-25>

- Wickström, A. (2010). Virginité testing as a local public health initiative: a 'preventive ritual' more than a 'diagnostic measure'. *Journal of the Royal Anthropological Institute*, 16(3), 532-550.
- Widman, L., Noar, S.M., Choukas-Bradley, S., & Francis, D.B. (2014). Adolescent sexual health communication and condom use: A meta-analysis. *Health Psychology*, 33(10), 1113.
- Wiederman, M. W. (2015). Sexual script theory: Past, present, and future. In *Handbook of the sociology of sexualities* (pp. 7-22): Springer.
- Williams, J. E., Satterwhite, R. C., & Best, D. L. (1999). Pancultural gender stereotypes revisited: The five factor model. *Sex Roles*, 40(7-8), 513-525.
- Willis, J. W., & Jost, M. (2007). *Foundations of qualitative research: Interpretive and critical approaches*: Sage.
- Wingood, G. M., Reddy, P., Lang, D. L., Saleh-Onoya, D., Braxton, N., Sifunda, S., & DiClemente, R. J. (2013). Efficacy of SISTA South Africa on sexual behavior and relationship control among isiXhosa women in South Africa: results of a randomized-controlled trial. *Journal of acquired immune deficiency syndromes (1999)*, 63(0 1), S59-65.
- Wittig, M. (1993). One is not born a woman. *The lesbian and gay studies reader*, 103-109.
- Wojcicki, J. M. (2002). "She drank his money": survival sex and the problem of violence in taverns in Gauteng province, South Africa. *Medical anthropology quarterly*, 16(3), 267-293.
- Wood, H. (2017). Feminists and their perspectives on the church fathers' beliefs regarding women: An inquiry. *Verbum et ecclesia*, 38(1), 1-10.
- Wood, J. T. (1994). Gendered media: The influence of media on views of gender. *Gendered lives: Communication, gender and culture*, 231-244.
- Wood, J. T. (2008). Critical feminist theories: giving voice and visibility to women's experiences in interpersonal communication. In L. Baxter & D. Braithwaite (Eds.),

- Engaging Theories in Interpersonal Communication: Multiple Perspectives* (pp. 323-334). Thousand Oaks, California: SAGE Publications, Inc.
- Wood, K., & Jewkes, R. (1997). Violence, rape, and sexual coercion: Everyday love in a South African township. *Gender & Development*, 5(2), 41-46.
- Wood, W., & Eagly, A.H. (2009). Gender identity. In M.R. Leary & R.H. Hoyle (Eds.). *The Handbook of Individual Differences in Social Behaviour* (pp.109-125). The Guilford Press.
- Xavier Medina, F. (2019). *Sustainable Food Systems in Culturally Coherent Social Contexts: Discussions Around Culture, Sustainability, Climate Change and the Mediterranean Diet*. <https://www.mdpi.com/1660-4601/18/11/5687>
- Yilmaz, F.A., Avci, D., Aba, Y.A., Ozdilek, R., & Dutucu, N. (2018). Sexual dysfunction in postpartum Turkish women: Its relationship with depression and some risk factors. *African Journal of Reproductive Health*, 22(4), 54-63.
- Young, P. D., Shipley, H., & Trothen, T. J. (2015). *Religion and sexuality: Diversity and the limits of tolerance*: UBC Press.
- Zalta, A.K., & Chambless, D.L. (2012). Understanding gender differences in anxiety: The mediating effects of instrumentality and mastery. *Psychology of Women Quarterly*, 36(4), 488-499.
- Zbella, E. A., Nemec, L. A., & Vermesh, M. (1984). Vaginal douching: Pros, cons, and proper technique. *Postgraduate medicine*, 76(8), 93-97.
- Zegeye, A. (2001). *Social identities in the new South Africa*. Cape Town; London: Kwela; Global.
- Zondi, N. (2013). Position of Women in Zulu and Shona Societies: The Case of Uvalo Lwezinhlonzi and Nervous Conditions. *Alternation*, 20(2), 164-182.
- Zukula, S., Dold, T., & Abbott, T. (2012). *Medicinal and Charm Plants of Pondoland*. South African National Biodiversity Institute.
- Zuma, T., Wight, D., RoCHAT, T., & Moshabela, M. (2016). The role of traditional health practitioners in Rural KwaZulu-Natal, South Africa: Generic or mode specific? *Biomed Central Complementary and Alternative Medicine*, 16(1), 1-13.

Zungu, P.J. (1985). *A study of Hlonipha terms amongst Zulu* [honours thesis, University of Natal, Durban, South Africa].

APPENDICES

Appendix A: Informed consent letter

Dear Participant,

My name is Nokubonga Nokwanda Mazibuko-Ngidi (209526985). I am a PhD candidate at the University of KwaZulu-Natal, Howard College Campus. The title of my research is *Smoking hot': The use of ntsu as a vaginal stimulant among Young Women in a South African township setting*. The study aims to gain insights into the sociocultural, interpersonal, and individual factors that motivate the use of vaginal-enhancing products amongst women and whether it speaks to their freedom. I am interested in interviewing you to share your experiences and observations on the subject matter.

Please note the following:

- The information that you provide will be used for scholarly research only.
- Your participation is entirely voluntary. You have a choice to participate, not to participate or stop participating in the research. You will not be penalised for taking such an action.
- Your views in this interview will be presented anonymously. Neither your name nor identity will be disclosed in the study.
- The interview will take about an hour.
- The record, as well as other items associated with the interview, will be held in a password-protected file accessible only to myself and my supervisors. After 5 years, in line with the university's rules, it will be disposed of by shredding and burning.
- If you agree to participate, please sign the declaration attached to this statement (a separate sheet will be provided for signatures)

I can be contacted at School of Social Sciences, University of KwaZulu-Natal, Howard College Campus, Durban. Email: [REDACTED]

Cell: [REDACTED]

My supervisor is Dr Maheshvari Naidu, located at the School of Social Sciences, Howard College Campus, Durban, of the University of KwaZulu-Natal. Contact details: email naiduu@ukzn.ac.za

The Humanities and Social Sciences Research Ethics Committee contact details are as follows:
Ms. Phumelela Ximba, University of KwaZulu-Natal, Research Office. Email: ximbap@ukzn.ac.za Phone number: +27312603587.

Thank you for your contribution to this research.

DECLARATION

I..... (*full name of participant*) hereby confirm that I understand the contents of this document and the nature of the research project, and I consent to participate in the research project.

I understand that I am at liberty to withdraw from the project at any time should I so desire.

I understand the intention of the research. I hereby agree to participate.

I consent /do not consent to have this interview recorded (if applicable)

SIGNATURE OF PARTICIPANT

DATE

Appendix B: IsiZulu informed consent letter

Incwadi Yesicelo Semvume Yokuba Yingxenye Yocwaningo

Kozimbandakanyayo

Igama lami nginguNokubonga Nokwanda Mazibuko (209526985). Ngingumfundi weziqu zobuDokotela Enzululwazini (PhD) eNyuvesi ya KwaZulu-Natal i esikhungweni sase-Howard. Isihlonko socwaningo lwami sithi: *'Smoking hot': The use of ntsu as a vaginal 'stimulant' among Young Women in a South African Township Setting*. Inhloso yalolucwaningo ukuthola imicabango mayelana nezinto eziyimithelela eqgugquzela abesifazane ukuba basebenzise isinemfu njengesikhuthazi sesitho sangasese ngokwesiko lokuhlalisana kwabantu, ngokuxhumana ngobudlwano phakathi kwabantu. Kanye nangokomuntu ngamunye nokuthi ngabe loku kuchaza inkululeko kwezocansi na? Nginentshisekelo yokukubuza imibuzo ukuze ungichazele ngokwesipiliyoni sakho nokubona kwakho kulolu-daba.

Ngicela uqaphele loku:

Ulwazi olunikezelayo luzosetshenziselwa ucwaningo lwangokwezemfundo.

Ukuzimbandakanya kwakho kungokokuzikhethela. Ungakhetha ukuba yingxenye noma ungaqhubeki nokuba yingxenye yalolu-cwaningo. Angeke ujeziswe ngaloku.

Imibono yakho kulengxoxo izothulwa ngokuyimfihlo. Igama lakho nobuqobo bakho abuzokudalulwa kulolu-cwaningo.

Lengxoxo izothatha cishe ihora.

Umshini wokuqopha izwi nezinto eziphathelele nengxoxo zizobekwa efayeleni evikeliwe nge-*password* ezotholakala kumina nakumeluleki wami kuphela. Uma sekuphele isikhathi esiyiminyaka emihlanu, izodathsulwa ishiswe njengokwemigomo yenyuvesi.

Uma uvuma ukuba yingxenye yalolu-cwaningo ngicela usayinde isifungo esihambisana nalesitatimende.

Ungaxhumana name eSikoleni sezeSayensi Yokuhlalisana Kwabantu, eNyuvesi yaKZNI esikhungweni sase-Howard, eThekwini. I-email: [REDACTED].

Inombolo kamakhalekhukhwini: [REDACTED] 2. Umeluleki wami uDkt. Naidu uyatholakala eSikoleni sezeSayensi Yokuhlalisana Kwabantu, esikhungweni sase-Howard, eThekwini

eNyuvesi yakwaZulu-Natali. Imininingwane yakhe: i-email: naiduu@ukzn.ac.za. Inombolo yocingo:

Imininingwane yeKomiti elibhekene neMithetho Yocwaningo kwezoLuntu neSayensi Yezokuhlalisana Kwabantu nansi: Nksz Phumelele Ximba, weHhovisi Lezocwaningo eNyuvesi yakwaZulu-Natali, i-email: ximbap@ukzn.ac.za. Inombolo yocingo +27312603587

Ngiyabonga ngokuba yingxenye kwakho kulolu-cwaningo.

Isefungo

Mina..... (amagama agcwele alowo ozimbandakanya kanye nocwaningo) ngiyeqinisekisa ukuthi ngiyakuqonda okuqukethwe kuleli-pheshana nobunjalo bocwaningo, ngiyavuma ukuba ingxenye yalomsebenzi wocwaningo.

Ngiyakuqonda ukuthi ngikhululekile ukushenxa kulomsebenzi wocwaningo nanoma ingasiphi isikhathi uma ngifisa. Ngiyayiqondisisa inhloso yocwaningo futhi ngiyavuma ukuzimbandakanya njengengxenye yabazophendula imibuzo eqondene nocwaningo.

Ngiyavuma/noma ngiyala ukuba kuqoshwe inkulumo (uma kunesidingo).

ISIGINESHA YOZIMBANDAKANYA NJENGENGXENYE YOCWANINGO
USUKU

Appendix C: Interview schedule

Section A: Demographics

Age:.....

Occupation:

Highest level of education:.....

Questions

What inspired you to start using sexual enhancement products?

Do you think that sexual enhancement products work?

How do they work?

Which of the available enhancement products have you tried?

How often do you use these products?

Which enhancement product do you use the most, and what made you stick to it?

Is your partner aware that you are using these products?

How has using these products influenced your relationship with your partner?

How has the use of sexual enhancement products influenced or changed your sexual performance and pleasure?

Would you describe yourself as an independent person when it comes to sexual/intimate relationships?

How many intimate partners are you involved with?

Appendix D: Ethical Clearance Letter



24 May 2021

Ms Nokubonga Nokwanda Mazibuko (209526985)
School of Social Sciences
Howard College Campus

Dear Mr Mazikubo,

Protocol reference number : HSS/1512/015D

Project title: 'Smoking Hot' : The use of Ntsu as a Vaginal 'stimulant' among young women in a South African Township setting

Approval Notification – Recertification Application

Your request for Recertification dated 21 May 2021 was received.

This letter confirms that you have been granted Recertification Approval for a period of one year from the date of this letter. This approval is based strictly on the research protocol submitted and approved in 2015.

Any alterations to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study must be reviewed and approved through the amendment /modification prior to its implementation. Please quote the above reference number for all queries relating to this study.

PLEASE NOTE: Research data should be securely stored in the school/department for a period of 5 years

All research conducted during the COVID-19 period must adhere to the national and UKZN guidelines.

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

Yours sincerely,

Professor Dipane J Hlalele (Chair)

/dd

cc Supervisor: Professor Maheshvari Naidu
cc Academic Leader Research: Professor Sabine Marschall
cc School Administrator: Ms Nonhlanhla Radebe

Humanities & Social Sciences Research Ethics Committee
UKZN Research Ethics Office Westville Campus, Govan Mbeki Building
Postal Address: Private Bag X54001, Durban 4000
Tel: +27 31 260 8350 / 4557 / 3587

Website: <http://research.ukzn.ac.za/Research-Ethics/>

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

INSPIRING GREATNESS

04 April 2024

Nokubonga Nokwanda Mazibuko (209526985)
School of Social Sciences
Howard College Campus

Dear NN Mazibuko,

Protocol reference number: HSS/1512/015D

Project title: 'Smoking Hot': The Use of Ntsu as a Vaginal Sexual Stimulant among Women in a South African Township Setting

Amended title: 'Smoking hot': The use of Ntsu as a vaginal sexual stimulant among women at KwaDabeka Township (Durban, South Africa)

Approval Notification – Amendment Application

This letter serves to notify you that your application and request for an amendment received on 03 April 2024 has now been approved as follows:

- Change in title

Any alterations to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form; Title of the Project, Location of the Study must be reviewed and approved through an amendment /modification prior to its implementation. In case you have further queries, please quote the above reference number.

PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

Best wishes for the successful completion of your research protocol.






Yours faithfully



.....
Professor Dipane Hlalele (Chair)

/ss

Humanities & Social Sciences Research Ethics Committee
UKZN Research Ethics Office Westville Campus, Govan Mbeki Building
Postal Address: Private Bag X54001, Durban 4000
Tel: +27 31 260 8350 / 4557 / 3587
Website: <http://research.ukzn.ac.za/Research-Ethics/>

Founding Campuses:  Edgewood  Howard College  Medical School  Pietermaritzburg  Westville

INSPIRING GREATNESS