

# **FEMALE ADOLESCENT SEXUALITY IN A COLOURED COMMUNITY**

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the Department of Psychology  
University of Stellenbosch**


Petrae roborant cultus recti

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### DECLARATION

I, the undersigned, hereby declare that the work contained in this dissertation is my own original work and that I have not previously in its entirety or in part submitted it at any university for a degree.

Signature:.....

Date:.....10/9/2000.....

## **ACKNOWLEDGEMENT OF FINANCIAL ASSISTANCE**

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## ABSTRACT

Little is known about women's sexuality and even less about female adolescent sexuality. Sex researchers have neglected women, young women and specifically young women of colour and of lower socio-economic status. These gaps in sex research have to be addressed for at least two important reasons. In the first place an understanding of female adolescent sexuality will enhance our understanding of female development in general. More specifically, the prevalence of reproductive health problems like sexually transmitted diseases (STDs) and unplanned pregnancies among female adolescents warrant urgent attention.

This study attempted to address the need for data on female sexuality by focusing on coloured<sup>1</sup> female adolescents in the Stellenbosch district. This target group has been chosen because of the extent of adolescent reproductive health problems, specifically the prevalence of teenage pregnancy, in the low-income coloured community. The objective of the study was to gain an understanding of adolescent female sexuality in a specific community. This goal was reached by collecting quantitative and qualitative data about sexuality from a group of high school learners from a historically coloured community in the Stellenbosch district. Structured questionnaires were used to elicit the quantitative data. The quantitative data were analysed to determine the following (i) the range of sexual behaviours, and (ii) the prevalence of high-risk behaviours that the respondents engaged in. The quantitative results indicate that the research respondents did not represent a sexually high-risk community. Sexual intercourse was limited to a relatively small number of respondents. The sexual behaviour of these respondents, in general, did not differ meaningfully from the sexual behaviour reported in other adolescent communities. Open-ended interviews were used to generate the qualitative data. Twenty-five sexually active girls were interviewed. The grounded theory method was used to analyse the qualitative data and to explore the respondents' constructions of sexuality. Lack of sexual agency and need for connection were identified as the core categories in the interview data. The interview data indicated that the respondents had limited sexual agency and the researcher argued that mothers and boyfriends, as agents of the community, were prominent contributors to sexual disempowerment. The

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<sup>1</sup>The use of the term "coloured" is controversial. It is viewed by some as derogatory, whilst others argue the importance of a "coloured" identity. Here and throughout the term "coloured" will be used descriptively.

researcher concluded that a new discourse of sexual agency for young women must be developed.

## OPSOMMING

Daar bestaan min data oor vroulike seksualiteit en selfs nog minder oor vroulike adolessente seksualiteit. In die verlede het seksnavorsers vroue, jong vroue en spesifiek gekleurde en lae sosio-ekonomiese vroue verwaarloos. Hierdie tekortkominge in seksnavorsing behoort om ten minste twee belangrike redes aangespreek te word. Eerstens sal 'n begrip van vroulike adolessente seksualiteit ons begrip van vroulike ontwikkeling in die algemeen bevorder. 'n Meer spesifieke rede is dat die voorkoms van reprodktiewe gesondheidsprobleme soos seksueel-oordraagbare siektes en onbeplande swangerskappe onder vroulike adolessente, dringende aandag vereis.

Hierdie studie het gepoog om die behoefte aan data oor seksuele gedrag in verskillende Suid-Afrikaanse gemeenskappe aan te spreek deur te fokus op "kleurling" vroulike adolessente in die Stellenbosch-distrik. Hierdie groep is geselekteer vanweë die omvang van adolessente reprodktiewe gesondheidsprobleme, veral die voorkoms van tienerswangerskappe, in die "kleurling" gemeenskap. Die doel van die studie was om 'n begrip te kry van adolessente vroulike seksualiteit in 'n spesifieke gemeenskap. Kwantitatiewe en kwalitatiewe data is versamel oor die seksualiteit van 'n groep hoërskoolleerders wat woonagtig was in 'n histories "kleurling" gemeenskap in die Stellenbosch-distrik. 'n Gestruktureerde vraelys is gebruik om die kwantitatiewe data in te win. Die kwantitatiewe data is geanaliseer om (i) die reeks van seksuele gedrag wat by die respondente voorkom en (ii) die voorkoms van hoë risiko seksuele gedrag onder die respondente te bepaal. Die kwantitatiewe resultate het aangedui dat die navorsingsrespondente nie 'n hoë risiko groep verteenwoordig nie. Seksuele gemeenskap was beperk tot 'n relatiewe klein hoeveelheid respondente. In die algemeen, het die seksuele gedrag van die respondente nie betekenisvol verskil van die seksuele gedrag wat gerapporteer is vir ander adolessente populasies nie. Oop-einde onderhoude is gebruik om die kwalitatiewe data te genereer. Onderhoude is gevoer met vyf en twintig seksueel aktiewe meisies. Die "grounded theory" metode is gebruik om die kwalitatiewe data te analiseer en die respondente se konstruksies van seksualiteit te eksploreer. Gebrek aan seksuele agentskap en behoefte aan konneksie is geïdentifiseer as die kernkategorieë in die onderhoudsdata. Die onderhoudsdata het aangedui dat die respondente oor beperkte seksuele agentskap beskik. Die navorser het aangevoer dat moeders en mansvriende, as agente van die gemeenskap, 'n prominente bydrae tot

gebrek aan seksuele bemagtiging maak. Die navorser het tot die konklusie gekom dat 'n nuwe diskoers van seksuele agentskap vir jong vroue ontwikkel behoort te word.

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**DEDICATED TO MY DAUGHTER, WILDENE.  
I HAVE LEARNED SO MUCH FROM YOU ABOUT MY OWN  
WOMANHOOD,  
I LOOK FORWARD TO SHARING YOUR GIRLHOOD, WOMANHOOD,  
AND SEXUALITY WITH YOU.**

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## CHAPTER 1

### INTRODUCTION AND MOTIVATION

#### 1. Introduction

In the field of Psychology sex research has been limited in a number of ways. Traditionally sex and sexuality have been conceptualised as a set of physical behaviours. The focus was also almost exclusively on the sexual behaviour of western, white, adult males. Little is known about women's sexuality and even less about female adolescent sexuality. Sex researchers have neglected women, young women and specifically young women of colour and of lower socio-economic status. These gaps in sex research have to be addressed for at least two important reasons. In the first place an understanding of female adolescent sexuality will enhance our understanding of female development in general. More specifically, the prevalence of reproductive health problems like sexually transmitted diseases (STDs) and unplanned pregnancies among female adolescents warrant urgent attention.

#### 2. Adolescent reproductive health: international, national and local issues

Internationally there is concern about women and adolescents' reproductive health. This concern developed for many reasons: the number of women and adolescents becoming infected with Human Immunodeficiency Virus (HIV); adolescents presenting with other sexually transmitted diseases; and adolescents falling pregnant. In the USA women are proportionately the fastest growing group of people with Acquired Immunodeficiency Syndrome (AIDS) (Holland, Ramazonoglu, Scott, Sharpe & Thomson, 1990). More than 20% of AIDS cases in the USA are diagnosed among people in their 20s which implies that they have contracted HIV-infection in their adolescence (Kelly, Murphy, Sikkema & Kalichman, 1993). Adolescent girls represent the majority (91,5%) of AIDS cases known to have occurred through heterosexual transmission among adolescents (Amaro, 1995). Among sexually active people, adolescents have the highest rates of sexually transmitted diseases of any age group and more than a million American adolescents become pregnant each year (Santelli & Kirby, 1992). In Africa, women's reproductive health are characterised by adolescent pregnancies, multiple pregnancies, maternal mortality, infant

mortality, induced abortion and sexually transmitted diseases (United Nations Secretariat, 1996). Prevention of most of these problems depends on people adopting safe sex behaviours (Phillips & White, 1991).

In South Africa reproductive health issues are of central importance in the government's development program. The Reconstruction and Development Programme (RDP) Document (African National Congress, 1994) recognised the fact that people's capacity to control their own fertility is an important aspect of being able to control their own lives. This document also highlights the necessity of programmes to combat the spread of sexually transmitted diseases (STDs) and AIDS. Education campaigns directed at South African youth to prevent teenage parenthood and STD's are emphasised.

South African statistics indicate that 30% of South African teenagers gave birth in 1990. It seems that the different population groups do not contribute equally to the teenage pregnancy rate. Statistics show that 13,7% black, 11,8% coloured, 8,3% Indian and 6,2% white adolescents became pregnant in 1994 (Thom, Louw, Van. Ede & Ferns, 1998). According to Macleod (1999) teenage pregnancy has been predominantly defined as a social problem in most countries and much effort has been put into finding the causes of adolescent pregnancy. In the South African literature various contributing factors have been identified. These include reproductive ignorance, early menarche, risk-taking behaviour, psychological problems like poor self-concept, peer pressure, dysfunctional family systems, inadequate family planning service, poor socio-economic status and the breakdown of cultural traditions (Macleod, 1999).

There seems to be agreement that there is a strong association between socio-economic status and teenage pregnancy. According to Macleod (1999) little systematic research has been done to explore this association. In her review of South African studies, she concluded that the association between poor socio-economic status and teenage pregnancy is not conclusive and that the racial element in the debate must be recognised. She argued that the assumption of an association between socio-economic status and teenage pregnancy "allows for the poor to be blamed for their poverty...and for the 'disaster' of teenage pregnancy to be contained within the safe parameters of happening to the poor" (p.12).

The strong association between socio-economic status/population group and teenage pregnancy in South Africa poses an important question. What factors implicit in socio-economic status and/or population groups contribute to young girls having sex at an early age or having sex without contraceptives? Although researchers like Preston-Whyte and Allen (1992) have started to research this question in the coloured community, they concluded that "a focus on the structural limitations imposed on young coloured women by poverty, lack of career opportunities, and gender stereotypes and expectations, may provide important insights into the incidence of early births" (p.208). These issues, and how they impact on sexuality have, however, not been researched yet. Another limitation is that researchers do not focus on how people in these communities experience and understand their sexuality. Usually, South African research on teenage pregnancies focus on external factors like parental communication about sex, knowledge about contraceptives, and home circumstances (Macleod, 1999). The result is that we do not know enough about female sexuality in the different South African adolescent communities to answer the question of how socio-economic status impacts on young girls' sexuality.

On 1 February 1997 the Choice of Termination of Pregnancy Act was implemented for the first time at designated health facilities across South Africa. National statistics after one year of implementation indicated that 16,6% of women requesting terminations were under the age of 18 years. The number of terminated pregnancies for the Western Cape (February 1997 to December 1997) was 3748. Twenty-two percent of these women were 18 years of age and under the age of 18 (Reproductive Rights Alliance, 1998).

According to the Seventh National HIV survey of women attending antenatal clinics of the Public Health Services, October/November 1996, South Africa is still experiencing a fast growing HIV epidemic (Department Of Health, 1997). It is estimated that 2,4 million people were infected by the end of 1996. Of those infected, 1,4 million are women. Women in their twenties have the highest rates of HIV infection and there is particular concern about the pregnant women under twenty years of age where a prevalence rate of 12,9% was found. According to the survey report these women very likely are not representative of the larger group of adolescent girls in South Africa. They are rather a particular sub-set of adolescent girls who demonstrate high-risk sexual behaviour. Currently the Western Cape has the lowest HIV prevalence rate at 3,09%. The estimate is that 27 470 people in this province were HIV infected by the end of 1996.

Of the 22 009 new episodes of sexually transmitted diseases (excluding HIV) treated during 1996 in the Western Cape Province, 2 046 cases were between the ages of 15 and 19 (Department of Health, 1996). The notification rate in South Africa per 100 000 population for congenital syphilis was 2,49 for 1993. The Eastern Cape had the highest notification rate at 8,31 and the Western Cape the second highest at 4,95 (Department of Health, 1996).

The Stellenbosch Family Planning Forum, of which I<sup>2</sup> have been a member since 1994, has identified adolescent reproductive problems as a major community issue in the Stellenbosch district. Between July 1995 and June 1996 190 babies were born to adolescent mothers in the local hospital. These mothers were mainly coloured. During the same time frame 843 first time female adolescent acceptors of oral/injection contraception presented themselves at local clinics. By the end of 1997 the community in which the research project was undertaken, had the second highest frequency of teenage births of the seven areas included in the Stellenbosch district. The Stellenbosch hospital's statistics for April 1997 to February 1998 indicate 37 terminations of pregnancy in the age group 15 – 19. Twenty-two of these women were coloured (De Villiers, 1998). The availability of pregnancy termination did not seem to have had a visible impact on the frequency of teenage births in this area during 1997. The number of adolescents treated for venereal diseases in the Stellenbosch area is estimated to be between 60 and 100 cases per month (Stellenbosch Family Planning Co-ordinating Committee, 1995). Statistics regarding the incidence of HIV/AIDS in the Stellenbosch area was not available. School principals, youth organisations, teachers and pupils are unanimous about the unsatisfactory level of sex education in schools (Personal communications during public meeting, 1997).

The above-mentioned statistics and conversations with role-players indicate that (i) adolescent sexual activity is a fact that must be recognised in this community; (ii) adolescents in this community have reproductive health problems in the form of venereal diseases and adolescent pregnancy; and (iii) there is a need to change sexual behaviour or to improve contraceptive use. A study of the literature shows that the immediate implementation of existing preventative programmes is not the answer. The problem with prevention programmes in South Africa is that (i) programme effectiveness in changing

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<sup>2</sup> Adhering to the principal of reflexivity as discussed in chapter 5, the personal pronoun *I* will be used when I refer to myself, instead of *the researcher*. The reflexivity principle demands that one acknowledge one's central position in the construction of knowledge.

sexual behaviour is not often studied and (ii) when programme effectiveness is evaluated, limited effectiveness is indicated. Only one study, which evaluated a prevention programme for adolescents in South Africa, could be found. This study indicated that the programme did not significantly change the participants' behavioural intentions (Visser, 1996). The proposed reasons for ineffective programmes are twofold: Firstly, the theoretical frameworks guiding sexuality education/prevention are often not applicable and secondly, there is limited data available on the sexual behaviour and sexuality of different cultural, racial and socio-economic groups in South Africa on which preventative programmes can be based.

Despite the fact that adolescent reproductive health is defined as a major health and development issue world-wide, psychologists have failed to address this question in a systematic way. Many gaps exist in sex research. These gaps will be briefly described in the next sections.

### 3. The focus of sex research: sexual behaviour versus sexuality

Ussher (1999) claimed that:

Within the annals of science, the subject of human sexuality has traditionally been studied within a narrow reductionist framework, in which sex is almost solely conceptualized as a physical behaviour or bodily response. ...The gaze of psychologists who have entered the arena of sex research has historically been focused within a similarly narrow vein. The dictates of positivism and realism that still dominate our discipline mean that experimental studies of biology, behaviour, or bodily response are deemed the most legitimate form of inquiry, with theoretical development being minimal or absent and research framed within a narrow hypothetical-deductive mould (p. 41).

Ussher's quote highlights the ways in which sex research has been limited by narrow definitions of sex and positivist methodologies. Tiefer (1995) and Ussher (1999) further argued that although positivist approaches have been challenged in other areas of psychology, they have not been successfully challenged in mainstream sex research. The majority of sex researchers in the psychology discipline still adhere to the positivist models of scientific inquiry. This is problematic because it does not allow for asking research

participants about their own subjective experience of sex. The result is that we have a limited understanding of firstly how people experience their sexuality and, secondly, of the diversity and complexity of human sexuality.

#### 4. Neglecting women in sex research

Despite the fact that women are disproportionately affected by reproductive health issues and are often held responsible for safe sex, women do not always have the power to implement this primary responsibility for contraceptive and preventative sexual behaviour. At the level of an individual couple, gender power issues often exist. Gendered power relations have implications for women's reproductive health. They are expected to influence a male partner's sexual behaviour and therefore to exert power in a context where they often have little control and few options (Barnett & Blaikie, 1992; Holland et al., 1990; International Planned Parenthood Federation, 1996; Strebel, 1995). Hollway (1984b) argued, however, that heterosexual relationships are more complex than males dominating females. She posited that heterosexual women often fail to recognise that men need relationships; and that women have sources of power in relationships with men. These authors reason that we need to explore females' behaviour in heterosexual contexts to search for the power/effect that women have in heterosexual relationships. This angle will probably contribute more towards women's empowerment than simply seeing them as innocent, passive victims of male sexuality (Flax, 1990; Holland, Ramazonoglu, Sharpe & Thomson, 1992; Hollway, 1984a; 1984b).

The advancement of female reproductive health, however, is not the only reason for an interest in adolescent female sexuality. Tiefer (1995) argued that it is actually detrimental to locate women's sexuality under the rubric of health. According to her the hidden assumptions of norms and deviance, universality, individualism, and biological reductionism that underlie the medical model can lead to reducing female sexuality to biology and sexual behaviours.

Remarkably little is known about women's sexuality and sexual behaviour. Women's sexuality also tend to be defined in response or in contrast to male sexuality (Daniluk, 1991; Fine, 1988; Flax, 1990; Holland et al., 1990). Feminist researchers like Tolman (1997) and Tolman and Szalacha (1999) argued that psychological research needs to

acknowledge and research sexuality and sexual desire as a normative aspect of healthy psychological development in girls. According to them it is therefore essential to move away from a quantitative focus on sexual intercourse to a phenomenological understanding of how girls' experience their sexuality.

#### 5. Neglecting adolescents in sex research

Adolescents have not received the attention that they warrant regarding reproductive health (Brooks-Gunn & Furstenburg, 1989; Fullilove, Fullilove, Haynes & Gross, 1990; Hovell et al., 1994; Kelly et al., 1993; Krahe & Reiss, 1995; Newcomer & Baldwin, 1992; Santelli & Kirby, 1992). As indicated earlier, a significant proportion of adolescents become infected with sexually transmitted diseases in South Africa and teenage pregnancy is also a very real phenomenon in some black and coloured South African communities.

Despite these concerns serious gaps exist in the data concerning adolescent sexuality (Brooks-Gunn & Furstenburg, 1989, 1990; Fullilove et al., 1990; Kelly et al., 1993; Krahe & Reiss, 1995; Newcomer & Baldwin, 1992; Santelli & Kirby, 1992). Little is known about adolescents' sexual behaviour and the meaning of intercourse in their sexual experimentation (Brooks-Gunn & Furstenburg, 1989, 1990). Female adolescents have specifically been neglected in research. Research suggests that adolescence is the crucial moment in the development of psychological disempowerment for many women. As they enter adolescence, many girls may lose an ability to make contact with and speak about their own experiences as they come under societal pressure to be good girls and ultimately good women (Gilligan as cited in Tolman, 1997). While sex education recognises and legitimises male adolescent sexual desire, girls, in contrast, are taught to recognise and to control the sexual desire of boys. Girls are not taught to acknowledge or even to recognise their own sexual feelings (Daniluk, 1991; Fine, 1988; Tolman, 1997).

The research conducted in South Africa on adolescent sexuality has mainly focused on onset of sexual activity, teenage pregnancy and sexual attitudes (Potgieter & Fredman, 1997). A recent study by the National Progressive Primary Health Care Network (NPPHCN) (as cited in Potgieter & Fredman, 1997) indicated that African children become sexually active at a young age and that heterosexual relationships for African youth implicitly mean that the partners in the relationship are agreeing to have sexual intercourse. Adolescent sexual behaviour and sexuality, and its gender and cultural



variations, have not received enough attention. Researchers and practitioners in this field argue that we need to generate an in-depth understanding of the complexities of human sexuality. We need to focus specifically on adolescents' sexuality and sexual behaviour in the contexts (i.e. the intimate relationship in which adolescents engage in sexual activity; gender context, ethnicity, culture, social class) in which it occurs if the effectiveness of preventative programmes is to be improved (Brooks-Gunn & Furstenburg, 1989; Brunswick & Banaszak-Holl, 1996; Davis & Harris, 1982; Fullilove et al., 1990; Kelly & Lawrence, 1990; Mahoney, 1995; Rosenthal, Muram, Tolley, Peeler & Pitts, 1992; United Nations Secretariat, 1996; Wyatt, 1994).

## 6. Neglect of social context in research and theory

Within a postmodern, social constructionist perspective, sexuality is defined as being constructed within specific social and biological contexts. The historical and social contexts in which people are sexual, influence their sexual behaviour (Caplan, 1987; Foucault, 1987; Unger & Crawford, 1996). Research findings also indicate that gender, age, social class, ethnicity and culture are important factors in determining sexual behaviour (Caplan, 1987; Fullilove et al., 1990; Holland et al., 1990; Worth, 1989). Research conducted in other countries can therefore not be generalised to the different population groups in South Africa. It is imperative that rather than aiming for educational messages suitable for all people, an approach should be adopted which stratifies groups and develops interventions that are tailored to the needs, interests and sexual beliefs and behaviours of specific communities (Phillips & White, 1991; United Nations Secretariat, 1996). What is therefore urgently needed, is basic explorative and descriptive research on human sexual behaviour and sexuality in our different communities. The studying of female sexuality deserves priority, since (i) our understanding of female sexuality is limited; (ii) the burden of safe sex is usually placed on females and (iii) reproductive health issues disproportionately affect women.

## 7. Conclusion

An overview of the literature clearly suggests that both the conceptualisation of human sexuality and the way it has been researched are problematic. The most prominent figures in the area of sex research have limited their conceptualisation of human sexuality to

sexual behaviour. Social constructionists have recently started to advocate a more encompassing conceptualisation of human sexuality. An overview of the literature also suggests that if all people are to be provided with effective reproductive health programmes, current sex research should focus on people of colour, women and adolescents. In the current study it will be argued that research should not only focus on the frequencies of specific sexual behaviours, but should also provide an understanding of sexual behaviour. The different contexts (for example ethnicity, culture, gender relations, socio-economic class) which influence sexual behaviour, must be accounted for.

This study proposes to address the need for data on sexual behaviour and sexuality in different South African communities by focusing on coloured female adolescents in the Stellenbosch district. This target group has been chosen because of the extent of adolescent reproductive health problems, specifically the prevalence of teenage pregnancy, in the low-income coloured community. The objective of the study was to gain an understanding of adolescent female sexuality in a specific community. Quantitative and qualitative data about sexual behaviour and sexuality were collected from a group of high school learners from a historically coloured community in the Stellenbosch district. Structured questionnaires were used to elicit the quantitative data. The quantitative data was analysed to determine the following: (i) the range of sexual behaviours, and (ii) the prevalence of high-risk behaviours that the respondents engaged in. Open-ended interviews were used to generate the qualitative data. Twenty-five sexually active girls were interviewed. The grounded theory method was used to analyse the qualitative data and to explore the respondents' constructions of sexuality.

## ORGANIZATION OF THE DISSERTATION

In chapter two key concepts and terms will be defined. The divide in the conceptualisation of human sexuality as sexual behaviour on the one hand and an encompassing socially constructed entity on the other hand, will be highlighted. Chapter three contains a review of the psychological theories and research on female adolescent sexual behaviour and sexuality. In chapter four the theoretical departure point for the study will be presented. In chapter five the research methodology of the study will be explained. In chapter six the quantitative data is presented and discussed. Chapter seven contains the grounded theory analysis of the qualitative data and in chapter seven a summary of findings, a critical review of the study and recommendations are provided.

## CHAPTER 2

### DEFINING KEY CONCEPTS AND TERMS

In this chapter the concepts *sex* and *sexuality*, as well as key terms in the definition of *sexuality* will be defined. The terms *sexual behaviour* and *sexuality* will be further clarified by providing a brief history of sex research to highlight the division between theories and research on adolescent sexual behaviour and theories and research on adolescent sexuality.

#### 1. Defining sex and sexuality

The language for sex and sexuality is very limited. Generally the word *sex* is used to refer to either biological gender or to penis-vagina penetration. According to Masters, Johnson and Kolodny (1992) distinctions can be made between sex acts (for example masturbation, kissing, sexual intercourse), and sexual behaviours (which include sexual acts and also behavioural aspects like flirting, dressing sexy, reading pornography and dating) without much being said about sexuality. The word *sexuality* has a broader meaning and refers to all aspects of being sexual.

The concept *sexuality* is notoriously difficult to define. In a study of human sexuality textbooks, Reiss (as cited in Aron & Aron, 1991) found that only five of the textbooks contained definitions of sexuality. He also reported that there were few similarities between these definitions. Some of the definitions subscribe to a biological understanding of sexuality and others see it as a social and cultural phenomenon rather than a biological one. Aron and Aron (1991) concluded, however, that the core elements in most definitions are physiological sexual arousal and sexual desire. They proposed the following working definition of sexuality which they regard as "neutral with regard to how sexuality is constructed – biologically, developmentally, and culturally" (p. 27): "Sexuality is the constellation of sensations, emotions, and cognitions that an individual associates with physiological sexual arousal and that generally gives rise to sexual desire and/or behaviour" (p. 27).

While Aron and Aron (1991) argued for an "objective" definition of sexuality that can be equally applied to all people, social constructionists argue for a more subjective definition of sexuality. Holland et al. (1990) for example held that the construction of sexuality is an integral part of its definition and that the definition cannot be neutral and universal:

By sexuality we mean not only sexual practices, but also what people know and believe about sex, particularly what they think is natural, proper and desirable. Sexuality also includes people's sexual identities in all their cultural and historical variety. This assumes that while sexuality cannot be divorced from the body, it is also socially constructed (p. 339).

Weeks' (1986) definition concurs with the above:

But I am suggesting that what we define as "sexuality" is a historical construction which brings together a host of different biological and mental possibilities – gender identity, bodily differences, reproductive capacities, needs, desires and fantasies – which need not be linked together, and in other cultures have not been. All the constituent elements of sexuality have their source either in the body or the mind, and I am not attempting to deny the limits posed by biology or mental processes. But the capacities of the body and the psyche are given meaning only in social relations (p.15).

It seems then that while some authors look for neutral all-encompassing definitions of sexuality, others focus on the fact that the concept of sexuality is one that has been and is continuously being constructed in different ways in different historical and cultural contexts.

In the current study the term *sexual behaviour* will be used to refer to specific sexual acts as well as other behavioural aspects like homosexual experiences and dating. The term *sexual intercourse* will be used to indicate penis-vagina penetration. The term *sexuality* will refer to: a subjective experience (both embodied and psychological) associated with sexual arousal that is always historically specific and context-bound. This experience can be emotive, cognitive or behavioural, but it is in this multi-faceted and multi-determined experience that the meaning of sex is constructed.

The terms *subjectivity*, *context* and *meaning* are key terms in this definition. These key terms are clarified below.

### 1.1 Subjectivity

Theoretical approaches like symbolic interactionism, ethnomethodology, existentialism, phenomenology and social constructionism emphasise the person's active role in structuring her/his reality. This contrasts with empiricist and positivist theoretical approaches that emphasise the importance of factors that can be investigated objectively (Tiefer, 1995). Henriques, Hollway, Urwin, Venn and Walkerdine (1984) defined subjectivity as:

...individuality and self-awareness – the condition of being a subject – but (we) understand in this usage that subjects are dynamic and multiple, always positioned in relation to particular discourses and practices and produced by these – in the condition of being subject (p. 3).

This definition indicates that subjectivity refers to how individual human beings experience events. It also acknowledges that human individual experiences vary according to the context in which the experience takes place. Subjectivity is therefore not unitary, but is the product of intrapsychic, as well as social sources.

### 1.2 Context

Social constructionists argue for a merged view of the person and their social context where the boundaries of one cannot easily be separated from the boundaries of the other. The person, consciousness, mind and the self are seen as social through and through. Social constructionists argue that, although we have a strong sense of an enclosed, private and self-contained world inside our heads, it would be more accurate to describe this internal place as a line momentarily and arbitrarily drawn around pieces of the public world (Wetherell & Maybin, 1996). Throughout this dissertation it is reiterated that human sexuality is influenced by social contexts. This means that people's sexuality is not a self-contained, separate, independent and consistent experience or entity. It emerges in practices and meanings that are organised according to historical time, culture, gender and class (Kelly & Kalichman, 1995).

### 1.3 Meaning

In social constructionism the concept *construction* is synonymous with making meaning. People do not respond to an external reality but to their own definition of reality (Ibáñez, 1994). Furthermore, socio-cultural practices and belief systems present the individual with constructs that make her/his experiences meaningful. These constructs are developed in a person's daily interactions in specific relational contexts. They are therefore not products of the individual. The way a person makes meaning of experiences is imbedded in her/his context (Wortham, 1996).

## 2. The historical division between sexual behaviour and sexuality

The following section is not an attempt to give a comprehensive history of sex research. Its purpose is to clarify the terms *sexual behaviour* and *sexuality* by highlighting the consistent split in the history of sex theory and research between those who focused on sexual behaviour and those who focused on sexuality. This section is divided into the different discourses that can be discerned when reviewing the Western world's history of sex.

In this section one must keep in mind that the theories on human sexuality are intricately and inherently bound up with the historical context within which sexuality was defined. One must also keep in mind that even in a specific historical period, there was variance among different countries, levels of society, and religious groups (Masters et al., 1992).

### 2.1 Medical and moral discourses

The first scientific sex theories were proposed in the eighteenth century. During this period sex really only featured as a medical concern and as a moral issue. The rules in these two discourses often coincided. Foucault and Sennet (as cited in Tiefer, 1995) argued that the Christian morality of self-purification became linked with anti-masturbation campaigns in the eighteenth century. This was then translated into the medical idea that sex was located in the individual body, was separated from the spirit and mind and preceded any sexual relationship or activity. Masturbation was seen as a source of damage to the nervous system and a cause of insanity and other illnesses. Women were also believed to have no

or limited capacity for sexual response. The term sexuality first appeared in a book published in 1889 to account for why women suffered from illnesses from which men did not suffer. The term then referred more to what we today understand as gender. From then on the subject of sexuality was limited to male-authored articles about sex as a physical behaviour and it was published in mostly medical journals which were accessible to a select few. In 1886, for example, Von Krafft-Ebing (a German psychiatrist) published his *Psychopathia Sexualis* that provided a detailed classification of sexual disorders (Masters et al., 1992). This work focused on so-called "abnormal" behaviour. Krafft-Ebing frequently used sensational and lurid accounts of sexual acts in his book and in this way contributed to the general public's fear of and loathing for almost all forms of sexual behaviour. Towards the end of the nineteenth century there was a fear of all sexual excitement and medical people were intent on providing cures for "lust" (Parker & Gagnon, 1995).

From the above it is clear that medical and moral discourses coincided to produce a sex research tradition that focused on sex behaviour, highlighted "abnormalities" and associated female sexuality with illness. In the process it contributed to discrediting sexuality as a normal aspect of human development and functioning.

## 2.2 Psychoanalytic discourse

The end of the nineteenth century was also characterised by the emergence of new views of sexuality and sexuality began to be investigated in a more objective manner. These new views were often reactions to the conservatism of the Victorian period that emphasised sexual self-control. Scientists like Moll and Ellis and the theories of Freud triggered new ways of thinking about sex (Hyde & DeLamater, 1997; Masters et al., 1992; Unger & Crawford, 1996).

Freud proposed the first psychological theory on sexuality. His theories on sexuality were part of a larger psychological theory that provided a model that attempted to explain a spectrum of phenomena like neuroses and normal personality development. Freud's contribution was the thesis that the young child's sexual development determines the adult's sexuality and personality and that the repression of sexuality was the cause of neurosis and perversion. Freud believed that human sexuality was in opposition with civilisation and that humans needed to repress their sexuality in order to be civilised. His

introduction of the concept "libido" was also an attempt to explain gender differences in sexual development. Freud's notion regarding female sexuality was that female sexuality started to develop when the girl becomes aware of not having a penis. This penis envy causes a girl to turn away from her mother (therefore rejecting the clitoris) and turn toward her father (to get a penis from him). Freud contended that this process of necessity results in a diminished libido in women (Giddens, 1992). Although Freud's definition of female sexuality was clearly male-centered and problematised female sexuality, he was one of the theorists who viewed sexuality as more than just sexual behaviour. He conceptualised sexuality as a complex entity that was closely linked to human development, identity, psychological well-being and pathology.

### 2.3 Behaviourist discourse

While most of the scientific sex theories and research in the nineteenth and early twentieth century originated in Europe, sex research was mostly conducted in the USA after the two wars in Europe. The study of sexuality from then on became embedded in the individualistic American culture. Following the behaviorist emphasis in American psychology, sex surveying replaced clinical interviews and life histories as methods to study sexuality. Sex surveys focused on the counting of specific sexual behaviours and the search for a more psychological understanding of human sexuality was largely abandoned. Each survey respondent was given equal weight in determining the representation of the sexual life of society. In the 1940s Kinsey began collecting sex data by using personal interviews. Kinsey published *Sexual behaviour in the human male* in 1948 and *Sexual behaviour in the human female* in 1952. Since Kinsey focused exclusively on sexual behaviour, some critics claimed that Kinsey's research reduced sex to an impersonal and meaningless act (Masters et al., 1992). In the 1960s to 1970s laboratory observation and experiments, pioneered by William Masters and Virginia Johnson, became the most popular methods. Their respondents were prostitutes and later on homosexual, white, well-educated volunteers (Unger & Crawford, 1996). Masters and Johnson observed and recorded the physical details of human sexual arousal. Their work was criticised for employing a mechanistic approach to human sexuality and reducing sex to physiological responses (Masters et al., 1992; Tiefer, 1995). Up to this stage the subjects of sex research were usually white, adult males.



After the late 1960s sex research was strongly influenced by a rising concern about adolescent, unmarried sexual activity and pregnancy in the USA (Brooks-Gunn & Furstenburg, 1989). In the late 1970s and early 1980s strong opposition arose to what was perceived as the permissive and immoral sexual practices of young people. Supporters of this movement sought to ban sex education from public schools and the right-to-life movement challenged the legality of abortion. In 1983 the Reagan administration even attempted to implement a policy that required the parents of adolescents requesting contraceptives to be notified. In an effort to control adolescent sexual behaviour, sex research projects focused almost exclusively on the prevalence of sexual intercourse and contraceptive behaviour (Masters et al., 1992). Understanding adolescent sexuality was not considered a priority.

Gagnon & Parker (1995) summarised the most important ideas of western thinking about sexuality during what they call the “sexological” period dating from 1890 to 1980:

- Sex was a powerful natural drive that needed to be controlled if society’s civilisation was to be advanced.
- The individual rather than society shaped sexuality and therefore the sexual behaviour of the individual had to be studied.
- There were inherent sexual differences between men and women. These differences were related to the natural differences between males and females.
- Theories of sexuality were based on heterosexual, male sexuality.
- The motivation for sex research was to educate people sexually.
- Most of the sex researchers of this time worked within in a positivist scientific framework. They therefore assumed that there was an underlying, true, universal human sexuality that remained constant over time, place and culture.

#### 2.4 Critical new discourses

By the 1970s sex research had become a field of study in many academic disciplines and institutions: sociology, anthropology, psychology, biology, the medical profession, religious institutions, political organisations and state agencies. Many of these researchers began challenging the above mentioned premises. Existing sex research was criticised for having the following limitations: it focused on the sexual behaviour of mainly white, male, well-educated Americans; it inevitably involved the quantification of sexual behaviour; and it

often involved the observation of biological sexual responses. The result was limited data on people of colour, women, adolescents and children. The new fields of feminist studies, and lesbian and gay studies also challenged the traditional view of sexuality. They worked with a more holistic understanding of sexuality. Sexuality was not only viewed as behaviour, but as an integral aspect of identity, development, psychological health and gender (Hyde & DeLamater, 1997; Parker & Gagnon, 1995; Tiefer, 1995).

## 2.5 The impact of HIV/AIDS

The lack of understanding of sexuality and sexual behaviour in different cultures has become increasingly evident in the 1990s with the HIV/AIDS crisis. Even though the funding for traditional sex research was increased, the understanding of the dynamics of HIV transmission is still very limited. Again the focus in sex research was largely on sex behaviours and contraceptive behaviours. By the beginning of the 1990s it was realised that research would have to focus on the social and cultural contexts within which sexual behaviour is shaped. Determining frequencies of sexual behaviour was not enough. The power relations and cultural systems in which sexual behaviour is embedded must receive attention. The focus has shifted away from isolated sexual behaviours to the collective and cultural rules that direct human sexuality. Understanding sexuality in different social and cultural contexts has become very important. This implies that instead of just asking respondents to indicate the frequency of sexual intercourse, they would also have to be asked about who initiated the sex, the circumstances of the initiation, was it possible to refuse, why did you have sex, etcetera. (Parker & Gagnon, 1995; Moore & Rosenthal, 1992; Unger & Crawford, 1996).

## 3. Conclusion

A review of the literature on sex research indicates firstly that from the earliest times sex researchers focused on quantitative surveying of sexual behaviour and not on a psychological understanding of sexuality. Sex was almost exclusively defined as a physical behaviour or bodily response. Such behaviours and responses were studied because they were to be controlled. Secondly, psychologists did not make an early contribution to sex research. Those psychologists who eventually did sex research affirmed the narrow, individualistic and physical nature of sexuality. The result is that within the Psychology discipline, sexuality is a relatively new area of research and although much

data exist on the sexual behaviour of people, little is known about a psychological understanding of human sexuality. Thirdly, even when authors had a wider understanding of sexuality (such as Freud), their theories were mostly based on white middle-class males and to a lesser extent females.

In the following chapter the division between sexual behaviour and sexuality in adolescent sex research will be highlighted by first presenting the psychological theories and data on female adolescent sexual behaviour and secondly the psychological theories and data on female adolescent sexuality.

## Chapter 3

### **A review of the psychological literature: Female adolescent sexual behaviour and female adolescent sexuality**

In this chapter the division between theory and research on female adolescent sexual behaviour and female sexuality will be presented by firstly reviewing the theories and research on female adolescent sexual behaviour and secondly, reviewing the theories and research on female adolescent sexuality. Each of these sections will begin with a discussion of theory, followed by a summary of empirical studies that have been conducted in the field of Psychology.

#### 1. Female adolescent sexual behaviour

##### 1.1 Psychological theories on female adolescent behaviour

The main theories that have been used to examine adolescent sexual behaviours regarding unintended pregnancies and STD's have been adopted or modified from established theories that have been used to influence other health behaviours like smoking and contraceptive use for fertility control. Most prominent of these theories are the Health Belief Model (HBM), Social Learning Theory (SLT)/Social Cognitive Theory (SCT) and the Theory of Reasoned Action (TRA)/Theory of Planned Behaviour (TPB) (DeHart & Birkimer, 1997; Joffe, 1996; Kendall, 1995; Mahoney, 1995; Morrison, Gillmore & Baker, 1995).

The HBM maintains that individuals must first develop a sense of urgency and the belief that they can control the activities that put them at risk of contracting a condition, before they will stop engaging in health-threatening behaviours or adopt practices that will prevent the condition. Individuals must also perceive rewards and benefits in changing their behaviour that are greater than those they gain from engaging in these behaviour and/or that supercede the problems they anticipate in changing their behaviour (Brunswick & Banaszak-Holl, 1996; Rosenstock, Strecher & Becker, 1994). According to the TRA, sexual behaviour is a function of intention to behave in a particular way. Intention is a function of an individual's attitudes about sexual behaviour and the perception of social pressure to perform or not to perform the behaviour. Attitudes refer to the individual's perception and evaluation of the consequences of the behaviour. Perceived norm refers to

how the individual perceives the behavioural norm regarding sexual behaviour and how motivated the individual is to comply with the norm (DeHart & Birkimer, 1997; Fishbein, Middlestadt & Hitchcock, 1994). According to Bandura (1994) the SCT is based on the fact that information alone is not enough to change people's behaviour. People need the behavioural means, resources and social supports to change their behaviours. To regulate one's own behaviour one needs self-motivation and self-guidance skills. There is also a difference between having self-regulative skills and being able to use them effectively and consistently under difficult circumstances. It requires that one have a strong belief in one's efficacy to exercise personal control.

The main areas of criticism against these models are the following: Firstly, these models assume that individuals are future-orientated and think about sex and its consequences before it occurs (Wyatt, 1994). Findings about adolescents indicate, however, that a large proportion of adolescents does not plan their sexual initiation and later sexual behaviour (Brooks-Gunn & Furstenburg, 1989; 1990). Wyatt (1990) found that African American women's sexual encounters were often not anticipated. She hypothesised that sex is more of an affective experience than a cognitive experience for many ethnic groups and women.

Secondly, these models assume that sexual behaviour is under an individual's volitional or conscious control. Sexual behaviour, however, cannot always be controlled by one individual, since high risk sexual behaviour occurs in a context with at least one other individual who can influence his/her partner's decision making (Joffe, 1996; Morrison et al., 1995; Mahoney, 1995). Even if it is indeed the case that an individual can make decisions about sexual behaviour, it is questionable whether such decisions can be construed as being "individual". Social constructionists point out that sexual behaviour occurs in a variety of contexts and that it is therefore shaped by factors other than the cognitions, emotions and intentions of an individual. Feminists also highlight how sexual behaviour has historically been influenced by social, economic and cultural factors (Holland, et al., 1990; Hollway, 1984a; Strebel, 1995). A third point of criticism (related to the above) is that the utility of the models for ethnic minority populations, adolescents, and women, especially those with low socio-economic status, is limited. Studies conducted in the USA (Brunswick & Banaszak-Holl, 1996) and South Africa (Visser, 1996), indicate that interventions based on the assumption that cognition and attitudes precede sexual behaviour have not been borne out when tested on black populations. Brunswick and Banaszak-Holl (1996) concluded that a relevant model needs to focus more on the

external influences (e.g. social networks and social norms) that drive sexual behaviour. Fourthly, even if one works from within a positivist framework, it is not clear that these models have been consistently supported by empirical research. According to Mahoney (1995) many of the findings from studies using these frameworks have been contradictory. According to Joffe's (1996) review of the relevant literature it seems that the causal assumptions of beliefs about preventative behaviour leading to safer sexual behaviour (as implied in the HBM and TRA/TPB) are not borne out. There is also limited evidence that AIDS-related knowledge and attitudes shape AIDS-related sexual practices. Due to the similarities and limits of these models, recent literature reviews have called for the development and testing of new conceptualisations to guide prevention efforts (Brunswick & Banaszak-Holl, 1996; Gibbons & Gerrard, 1995; Joffe, 1996; Mahoney, 1995; Morrison et al., 1995). Sexual behaviour and decision-making seem to be the result of complex interrelationships among many psychological and contextual factors. Effective prevention of sexual risk-taking behaviours is therefore dependent upon continued research seeking to explain the complexities of such behaviours (Brunswick & Banaszak-Holl, 1996). Despite the criticisms raised against these theories, they have been the basis or point of departure of numerous studies. Such studies that are specifically concerned with female adolescent behaviour, are discussed in the next section.

## 1.2 Female adolescent sexual behaviour: a review of psychological studies

Hyde and DeLamater (1997) summarised the following trends regarding adolescent sexual behaviour worldwide. Firstly, in most countries more adolescents engage in premarital intercourse; secondly, first intercourse occur at earlier ages; thirdly, there are large ethnic-group variations in sexual activity in the United States; and fourthly there are substantial variations from one country to another regarding sexual activity. In the following section the research on female adolescent sexual behaviour will be presented. The aspects that will be focused on reflect a broad view of sexual behaviour and include physiological changes, masturbation, petting and kissing, communication about sex and contraception, peer group influences, sexual intercourse, sexual abuse, choice of first sexual partner, reasons for having or abstaining from sexual intercourse, homosexual experiences, number of sexual partners, and frequency of continued sexual activity.

### 1.2.1 Physiological changes

Issues around sexuality and reproduction seem to be central in female adolescence. The beginning of the adolescent stage is marked by physical characteristics that indicate reproductive capacity (Schlegel, 1995). Puberty involves physical events such as the growth spurt, changes in body composition, and the development of sexual characteristics. There is a great deal of variation between individual girls in terms of the timing of pubertal changes. The timing, sequence and duration of these changes may influence an adolescent's view of herself positively or negatively when she compares herself with her peers. Girls gain in fat and height around puberty. Fatty tissue appears to be necessary for sexual maturation and menarche usually occurs when approximately 24 percent of the body weight are composed of fat (Nielsen, 1996; Unger & Crawford, 1996). With these physical changes girls are, for the first time, recognised as sexual beings (Laws & Schwartz, 1977).

The age of menarche has been falling since the beginning of the twentieth century. Girls from higher socio-economic groups start menarche approximately 11 months earlier than girls from lower socio-economic groups. In Europe and the USA the average age for menarche is between 12 and 13 years, in central Africa between 17 and 18 years and in South Africa between 13 and 15 years. These differences can be ascribed to better nutrition and health care and lower stress levels associated with higher socio-economic life circumstances (Thom et al., 1998). Most women, however, have experienced their first menarche by the age of 16. Menarche is a very important event because it is the most pertinent change that occurs during female sexual maturation. Girls often feel ambivalent about menarche (Nielsen, 1996; Unger & Crawford, 1996). Those who have been prepared for menarche, usually accepts it as a sign of womanhood. In some traditional cultures in South Africa special ceremonies take place to celebrate menarche. On the other hand, girls who have not been prepared for menarche or who experience menarche at a young age, often have negative experiences of menarche. (Thom et al., 1998).

It is these physical changes that usually precede the beginning of sexual activity in girls. Such "sexual" activities range from masturbation to dating, kissing and petting, sexual intercourse and lesbian sex. Although physical maturation usually precedes sexual activity, younger girls are also often sexually active. This again highlights the fact that sex is not simply a natural outflow of biological and physical development.

### 1.2.2 Masturbation

Girls start to masturbate later than boys and they also masturbate less or not at all. It is estimated that about one-third of American girls (study population not classified) have masturbated by their middle adolescent years (Brookes-Gunn & Furstenberg, 1990). Most African-American adolescent females (83%) report that they do not masturbate (Wyatt, 1997). Women's lack of masturbation seems to have implications for their sexuality. Masturbation can be a way for a girl to learn about her own patterns of sexual arousal and satisfaction. It has often been shown that a girl's comfort and familiarity with her own body is an important prerequisite to sexual knowledge and responsibility. Girls need the permission and privacy to get to know their bodies, because it is part of being sexually responsible (Wyatt, 1997). If a girl knows her own sexual desires and responses, she is also more capable to teach her partner about her sexuality (Unger & Crawford, 1996). In a society where feelings of sexual desire are not deemed normal or appropriate for young women it is not surprising, however, that few teenage girls talk about masturbation (Brooks-Gunn & Furstenberg, 1990).

It seems then that if respondents' self-reports are to be believed, masturbation is fairly uncommon among female adolescents. Experts, however, see it as an important element of sexual development and express concern about the taboos about masturbation and/or talking about it.

### 1.2.3 Dating

In western societies "dating" during adolescence is seen as an essential part of healthy development (Nielsen, 1996). Dating can be defined as a formal arrangement in which a boy and girl go out together to a social activity such as a movie or a dance or a meal (Louw et al., 1997). It gives young people the opportunity to learn how to be sexually and emotionally intimate with another person (Nielsen, 1996). The first date age of young white American women is between 13 and 18 with the majority of individuals starting to date at the age of 15 and "going steady" at 16 (Thornton, 1990). At the age of 13 years 69% of American girls have dated. Typically they date only a few times a year. Going steady also starts at this stage (Hyde & DeLamater, 1997). Dating age (first date) in a study (with the sample population of one quarter Black, one quarter white and one half Hispanic American



adolescents) was estimated to be between 13 years 9 months and 14 years 7 months (De Anda, 1983). Hispanic American adolescents start to date later than white teenagers and African American adolescents tend to start dating earlier than either Hispanic or White Americans. In general adolescents date people similar in race, age, physical attractiveness and family background (Nielsen, 1996).

The likelihood of sexual intercourse is highest within a committed dating relationship. Levels of sexual activity decreases as dating decreases (Miller, Christophersen & King, 1993). Approximately 30% of young American women who reported a first dating age of 13 or younger had experienced sexual intercourse by age 15 or younger (Thornton, 1990). At the stage where adolescents date and feel in love 16% of adolescent females reported having had intercourse. By the following stage (dating one person only and being in love) the percentage of females reporting intercourse experience rose to 59% (Roche & Ramsbey, 1993). In Olivier's (1996) South African study it was found that 9,7% of the adolescent respondents had sex during their first date, 15,4% had sex after several dates, 18,6% of sexually active adolescents was involved in steady relationships and 33,2% was involved in serious and committed relationships.

These studies suggest that for most adolescents in most cultures sexual activity take place within a dating relationship. The anxieties voiced by parents and the popular media that adolescents are becoming sexually promiscuous (promiscuity meaning casual sexual interactions), therefore, seem to be unfounded.

#### 1.2.4 Petting and kissing

According to Masters et al., (1992) petting is often defined as sexual touching "below the waist" and does not include kissing. Other sexual touching is often referred to as "necking". Available data on Western adolescents indicate that there is regular progression in heterosexual behaviour from kissing, French kissing, breast and genital touching, to intercourse and oral-genital contact (Hyde & DeLamater, 1997; Laws & Schwartz, 1977). This usually occurs over a period of four or more years. By the age of 15 many girls have experience of kissing and french-kissing (Jakobsen, Rise, Aas & Anderssen, 1997). According to Tiefer (1995) western societies regard the exploration of mouths and tongues as an instinctive way to express love and to arouse desire. Anthropology and history, however, indicate that a kiss may be constructed differently depending on time, place or

culture. Tiefer (1995) also argued that sex researchers are uninterested in kissing and petting, because sex for them means intercourse.

No literature could be found on the petting and kissing behaviour of South African adolescents and it is not known whether the regular progression in heterosexual physical intimacy identified in Western adolescent populations is also characteristic of South African adolescents.

### 1.2.5 Communication about sex and contraception

Parents are adolescents' principal source of information about sexuality until puberty, after which their importance declines, giving way to that of the peer group and sexual partner (Zani, 1991). American adolescents rated their parents highest in terms of influence on sexual opinions, beliefs and attitudes, but lower than friends, school, and books as sources of sexual information in a study by Sanders and Mullis (as cited in White & DeBlassie, 1992). Nearly all the young respondents indicated that they would prefer that sex education come from their parents, yet only 15% reported that parents were a major source of this information (White & DeBlassie, 1992). Inman (as cited in Davis & Harris, 1982) found in her study on white, Mexican-American and Black adolescents that most of them received sexual information from the family while other studies cited by the authors found that parents rated third on the list.

Amonker and Thornburg (as cited in Davis & Harris, 1982) found that American teenagers ranked friends as their primary source of sexual information. Davis and Harris (1982) also found that friends were the most frequently cited source of sexual information for American adolescents. In their study they found that parents were consistently rated second or third to friends and media when it came to sexual information vending. In an Italian survey only 15% of adolescents reported that parents were their primary source of information concerning sex. Italian adolescents turn mainly to pairs of friends or to a small group of best friends for meaningful communication about sexuality, where they usually exchange accounts of personal experiences (Zani, 1991). Adolescent Italian girls have a greater tendency to discuss sexual issues with their mothers, than boys do. Menarche is a topic of discussion, though mainly to underline the reproductive aspect of the event, not the implications for sexuality. First sexual experiences are often kept secret by girls, or merely hinted at in indirect ways (Zani, 1991).

Other researchers (Pick & Palos, 1995; Baumeister, Flores & VanOss Marín, 1995) have found that adolescents who communicated poorly with their mothers were likely to engage in sex at a younger age and also more likely to abstain from using contraceptives. Hepburn (1980) and King and Larusso (1997) concluded that direct transmission of sex information is only a small part of the sex communication process. Much of the communication appears to be indirect. Mothers and fathers appear to convey sexual attitudes and values indirectly through general family discussions and through comments on the behaviour of other people. Darling and Hicks (1982) have found that the most frequent message given by parents was that sex is a dangerous experience and that personal sexual education for females is usually deferred until they become involved in intimate relationships. According to Fitzgerald and Fitzgerald (as cited in Pick & Palos, 1995) open sexual communication between parents and children is hindered by parental embarrassment, lack of knowledge, poorly defined values, fear of encouraging sexual activity, and inability to initiate and maintain a conversation about the subject.

Parents in South Africa give little sexual information to their adolescent children. Setloane (as cited in Macleod, 1999) found that 42% of his urban and 6,85% of his rural sample of pregnant adolescents reported that their parents informed them about contraceptives. Oosthuizen (as cited in Mayekiso & Twaise, 1993) attributed the lack of parental communication to parents' refusal to acknowledge their daughters' sexuality with the result that parents often leave their daughters' sexual education to chance or natural instincts.

It seems that adolescents do consider their parents to be important sources of sex information and education. It also is clear, though, that parents usually provide information and education about physical and reproductive aspects of sexuality. Generally, they seldom talk about the experience and meaning of sex. Adolescents tend to turn to friends for meaningful discussions about sex.

### 1.2.6 Peer group influences

Many researchers have concluded that peer influence plays a role in adolescent sexual activity. If an adolescent's friends are sexually active, the likelihood that she is also sexually active increases. Friends' behaviour can become a barometer or criterion in determining an adolescent's behaviour. Many young women discuss their own sexual

experiences or sex in general with their friends. When girls hear friends' discussions they may perceive this as subtle pressure to become sexually active (Wyatt, 1997).

Two South African studies, cited in Macleod (1999), found that respectively 20% and 10% of sexually experienced adolescents reported that peer pressure influenced them to become sexually active. Peer pressure may include nuanced strategies like excluding sexually inexperienced teenagers when having discussions about sexual matters (Macleod, 1999).

### 1.2.7 Sexual intercourse

There is a relatively predictable process of becoming sexually active that is similar across countries, with approximately one half of adolescents having intercourse by age 18 (Petersen, Leffert & Graham, 1995). There is little variation between different countries in the average age of first intercourse. In most countries the age of first intercourse for girls is 16 or 17 (Hyde & DeLamater, 1997). National surveys of American youth indicate that the median age for first intercourse declined from age 19 in 1971 to approximately age 16,5 in 1988 (Santelli & Beilenson, 1992). Available data suggests that currently 56% of eighteen-year-old American women have had sexual intercourse at least once. This does not mean that adolescent girls are sexually promiscuous. Most American adolescent girls wait until they are at least 17 to have sex. Nearly half are still virgins at that age, while only 15% have had sex as 13 year olds (Nielsen, 1996). A Youth Risk Behaviour Survey found that the reported median age of initial coitus was 16,9 years for female American high school students (Yaber & Parrillo, 1992). In general African American adolescents are sexually active at an earlier age than are other teenagers. Half of black females have had sex by age 16, while Hispanics and White American teenagers generally first have sex at about 17 or 18 years of age.

Regardless of race, adolescents living in poverty or in low-income families are the most likely to have sex, become sexually active at a young age, use no birth control, and get pregnant (Nielsen, 1996; Petersen et al., 1995). Half of low-income adolescent girls have sex before the age of 17, six months sooner than do other girls their age. Half of all black American females have had sex by the age of 16. Hispanic and white American adolescent girls reach this level of sexual activity at approximately 18 years of age. When social class, however, was controlled for in American studies, little variation in the sexual

behaviour of black and white adolescents has been found (Lauritsen, 1994; Nielsen, 1996). It is clear, however, that even when race and class was taken into account, it resulted in the counting of sexual behaviour and not in gaining an understanding of how these factors impact on sexuality.

In many parts of Europe the age of first sexual intercourse is rising. In Italy the average age of first sexual intercourse was 14 or 15 in the late 1980s and today it is just under 17 years (Usher, 1999a). A nation wide survey on the health and life-style of 15 to 20 year old adolescents in Switzerland indicated that 45% of the boys and 46% of the girls had sexual intercourse at least once; 14% of the girls and 18% of the boys had first intercourse when they were less than 15 years old (Moreau-Gruet, Ferron, Jeannin & Dubois-Arber, 1996). In Sweden the median age of first sex for girls is 14.3 years (De Gaston, Jensen & Weed, 1995). In Germany, a mean age of 16,8 years for females who had experience of sexual intercourse is reported (Krahè & Reiss, 1995). In Japan two-thirds of Japanese girls have sex by age 15 (Nielsen, 1996). With the onset of democracy and a free market in Russia, the number of girls who said they became sexually active before turning 16 jumped from 16% in 1993 to almost a third (33.3%) in 1995 (Zarakhovich, 1999).

In stark contrast with the data available for other countries, limited data exist on the sexual activity of the South African adolescent population. The available data do indicate that significant differences in sexual activity exist between different population groups. Since the geographical area differs between studies and the age of the respondents varies, the reported percentage of South African adolescents who are sexually active also varies significantly (MacLeod, 1999). In a study among African adolescents from Swaziland it was found that most sexually active respondents have had their first sexual intercourse by the time they were 16 years of age. Slightly more females (68%) than males (57%) reported beginning coitus by 15 years of age (McLean, 1995). In a study in the Eastern Cape among adolescents (age not specified) of all population groups, it was found that an average of 24,3% (30,1% males and 18,4% females) reported that they were sexually active. English-speaking adolescents were more sexually active than Afrikaans-speaking adolescents. It was also found that 90,1% of the male and 76% of the female Xhosa-speaking adolescents (age not specified) in the rural areas of Transkei reported that they were sexually active (Thom et al., 1998). Flisher et al., 1993) surveyed adolescents (age not specified) in the Cape Peninsula. It was found that 3,9% of Afrikaans-speaking, 12,7% of English-speaking and 60,8% of Xhosa-speaking adolescent girls reported that they were

sexually active. In her study conducted in a Cape Town teenage clinic, Nash (1990) found that with girls (population not classified) experiencing their first menarche before the age of twelve, 56% of girls had sexual experiences by age 15. Thomas (as cited in Potgieter & Fredman, 1997) indicated that it is the norm for young girls in South African rural areas to be sexually active by the age of 12 or 13. Although the average age at first coitus for different South African communities is reported to be between 14 and 16 years of age (MacLeod, 1999), the data about sexual intercourse of South African adolescents are problematic. Data is either not available or not specific enough. Research is often focused on age of first intercourse and does not tell us much about adolescent sexuality. Although race and class seem to be crucial factors when looking at sexual intercourse, these factors have not yet been explored adequately.

The data available on the populations in different countries indicate that there is some variance between the average age of first intercourse in different countries. The reasons for these variances are however not clear. It seems that social processes in a specific country partially explain the differences. Zarakhovich (1999) speculated for example that the liberating effect of democracy in Russia partially explains the decline of age at first intercourse for Russian girls. On the other hand, Schmidt, Klusmann, Zeitschel and Lange (1994) hypothesised that a change in gender issues in a sophisticated country like West Germany where the feminist movement has made a significant impact on gender relations, partially explains the increase of age at first intercourse. Equalitarian sexual standards for both sexes are promoted and it is no longer believed that men's sexual urges are uncontrollable. The differences in age at first intercourse between different South African adolescent populations have not yet been adequately explored and explained. It can be hypothesised that culture and religion are important here. What is clear, however, is that the age of first intercourse tells one little about female adolescent sexuality. The focus on determining the age of first intercourse is probably a relic of the belief that young people's sexuality must be controlled and of the traditional construction of sexuality that "the younger it occurs the worse it is".

#### 1.2.8 Sexual abuse

Laumann, Gagnon, Michael and Michaels (1994) found that sexual contacts by adolescents and adults with children are not rare. Seventeen percent of the women in their study reporting being sexually touched when they were children. Men primarily touched

the girls. Medora, Goldstein and Von der Hellen (1993) found in their sample group of pregnant teenagers (White, Hispanic, Black and Other American), that 26% of the subjects had been sexually abused. Rickel and Hendren (1993) reported that the prevalence of sexual abuse for both sexes before the age of 18 lies between 19% and 31%. In two studies of South African women students, prevalence rates for contact forms of child sexual abuse were 30,9% and 34.8% respectively (Collings, 1997). These prevalence figures are higher than comparative rates for American college students. These studies' figures are consistent, however, with victimisation surveys that have repeatedly indicated that the prevalence rates for sexual abuse among South African women are two to four times higher than comparable rates for the United States (Collings, 1997).

A substantial percentage of sexually active women under the age of 16 have experienced involuntary intercourse (Santelli & Beilenson, 1992). Nearly 75% of the girls in an American study (population not classified) who had sex before age 14 said they were forced to have sex compared to 7% who were between the ages of 18 and 22 when they first had sex. In their study Laumann et al., (1994) found that of the American women who had reported being forced to have sex, 70% reported being physically forced, while 8% reported use of a weapon and 25% reported being verbally threatened. South African qualitative studies involving pregnant adolescents found that most of these respondents felt that they were coerced to have sex (Lesch, 1996; Macleod, 1999). South African quantitative studies, however, found that force or coercion occurs less frequently. Approximately 30% of South African respondents reported that their first sex was a result of force or coercion (Macleod, 1999). Macleod (1999) noted that respondents may interpret the word force in different ways. It can be understood to mean verbal coercion or rape.

Date rape is more likely to occur with older females who are already experienced in sex while incest is more likely to happen to younger girls regardless of dating or sexual activity status (De Gaston et al., 1995). Levy (as cited in Nielsen, 1996) reported that a female is four times more likely to be sexually assaulted by someone she knows when she is between the ages of 15 and 20 than at any other time in her life. Usually she is assaulted by a male several years older than she is. In a study of American women who were forced sexually, 22% indicated that they knew their attackers very well, while 19% indicated that the perpetrator was someone whom they were in love with or their spouse or an

acquaintance. Only 4% of the women in this study reported that they were sexually assaulted by a stranger (Laumann et al., 1994).

The implication of the above is that one would expect a relatively high prevalence rate for sexual abuse in South African communities. One would also expect the perpetrators to be males known to the female.

#### 1.2.9 Choice of first sexual partner

In general, adolescent girls first have sexual intercourse with long-term partners. Baldwin et al. (as cited in Leland & Barth, 1992) reported that American females have few sexual partners and are likely to question their partners about high-risk sexual behaviours. They also reported knowing their partner for a longer period before engaging in sex than their male counterparts. Nearly 84% of the American women in Wyatt's (1997) study had sex for the first time with steady boyfriends and 14% with men they knew but did not date. Nearly 50% maintained their relationship with their first partner for one to five years after first intercourse. African-American adolescent women tend to have long term relationships with their first partner, only 9% reported having sex for the first time with a one-night stand. African teenagers (i.e. black teenagers living in Africa) tend to have multiple partners. The major contributing factors proposed for multiple partners among African adolescents are lack of trust between partners and financial needs (McLean, 1995).

It was found that most Italian girls had their first sexual encounters with a partner they have had a relationship with for the past seven to eight months. Very few, mainly non-students, had their "first time" with someone they had not known long. Half of the girls had a partner more grown up than themselves (from 4 to 12 years older); very few had a partner of their own age (Zani, 1991). McLean (1995) asserted that more African female adolescents turn to older, employed males as sexual partners, because they can also satisfy their desire for material goods.

Cross-cultural comparisons with Swedish adolescents showed that two-thirds (67%) of the girls and less than half of the boys (41%) had their first intercourse with a steady date. One-fourth of males and females had first sex with a friend, while a third of the boys (33%) but only one-tenth of the girls (9%) had first sex with a casual acquaintance (De Gaston et al., 1995).



As concluded in section 1.2.3, it is again emphasised that adolescent girls have sex with either a boyfriend who they have a steady relationship with or with someone they know quite well. This fact seems to be important for our understanding of what sex means to them and for our efforts to develop reproductive health strategies. There is, however a complete absence of South African research regarding this aspect.

#### 1.2.10 Reasons for having or abstaining from sexual intercourse

The most common reasons provided by young women for having sex include expressing love or affection for a partner; experiencing physical arousal or desire; wanting to please the partner; curiosity about sex and feeling pressure from peers (Hyde & DeLamater, 1997; Wyatt, 1997). Normative perceptions among peer groups are an important motivation for early sexual initiations among younger adolescents, even though sexual activity may be in part hormonally mediated (Brookes-Gunn & Furstenberg, 1989). Rosenthal, Lewis and Cohen (1996) identified sexual desire or arousal as a factor for having sex in a small sample of female adolescents, paired with the curiosity of adolescents and a desire to be accepted by female friends. In the study conducted by Laumann et al. (1994) it was found that half the female respondents cited affection for their partner as their reason for having sex.

Rogers (as cited in Collins, 1990) identified the emergence of a new standard among adolescents in which men require stricter morality of women and women want a stricter morality in men. It is somewhat different from the old double standard, in that women now expect better behaviour both from themselves and from men. Women now respect themselves more, expect equality, no longer perceive themselves as sex objects and are coming to accept as valid their own sexual needs.

Nielsen (1996) reported that adolescents' future orientation influence their sexual decisions. Adolescents who have dreams and desires for good education and a good job are better at postponing sex and at using contraceptives than are those who have none or very few plans for the future. Religiosity and a high socio-economic status are related to a lower risk for adolescent sexual intercourse (De Gaston et al., 1995). Santelli and Beilenson (1992) found that young American people who attend church frequently and who value religion in their lives have the least permissive sexual attitudes and are less

sexually experienced. Religion not only acts as a constraint on early premarital experience but may also facilitate early marriage and thus younger age at first intercourse (Laumann et al., 1994).

Among American black adolescents several factors were associated with not being sexually active. These were involvement in a church, an intact family, including the presence of a father, younger age, more career motivated, more academically motivated and less approving of premarital sex in general (Keith, McCreary, Collins, Smith & Bernstein, 1991).

It seems that those factors that encourage a future orientation in adolescents also have a constraining effect on adolescent sexual intercourse. The following two hypotheses can be made. Firstly, adolescents with a future orientation may believe that sexual intercourse will jeopardise their future goals and therefore abstain from sexual intercourse. Secondly, those adolescents with a future orientation are often individuals with strong religious, family and school affiliations and very likely have close and fulfilling interpersonal relationships. Perhaps they have less of a need for the closeness and affiliation that an intimate sexual relationship can bring. These adolescents also stand to lose much more if sexual activity is exposed, namely the displeasure and disappointment of parents, teachers and the church.

#### 1.2.11 Homosexual experiences

Most girls in western societies are taught to value femininity and heterosexuality. Homosexuality is therefore considered abnormal and perverse and something that must be avoided. For this reason some women only become aware of homosexual desires and needs later in their lives. Few girls report having had a homosexual experience (Unger & Crawford, 1996). Sorenson (as cited in Masters et al., 1992) reported in 1973 that 6% of the adolescent females he surveyed reported at least one episode of homosexual activity, while Hass (as cited in Masters et al., 1992) reported in 1979 that 11% of the adolescent girls he studied, had at least one sexual encounter with a person of the same sex. Hass noted that this figure was probably an underestimate because many respondents did not consider preadolescent games in which sexual touches occurred, as sexual acts. Wyatt (1997) in her study with American women found that approximately 9% of them reported that they had a sexual experience with another female during adolescence. The figures

available on the occurrence of female adolescent homosexual experiences may not be accurate. Because of the stigma attached to homosexuality, girls may not want to disclose homosexual experience or they may not define homosexuality or lesbianism in the way that the researchers define it. No other data could be found on the prevalence of homosexual experiences for adolescent girls.

#### 1.2.12 Number of sexual partners

There is a relationship between age of dating and the number of sexual partners an individual has. For example, 18-year-old American women who reported first dating before age 14 had on average 2.7 sexual partners, whereas the women waiting until 17/18 to start dating only had 0.6 partners on average (Thornton, 1990). There is also a relationship between early initiation into sexual intercourse and later promiscuity (White & DeBlassie, 1992). Statistics suggest that overall teenagers are not promiscuous. Amongst Australian youth between the ages of 17 and 20 years, 66% of the males and 82% of the females either had not had intercourse or had it with only one partner in a six month period (Collins, 1990). Half of all American teenagers wait 18 months after first having sex before they have sex with another person, but even by their 20s', 40% of all women have had sex with only one or two people (Nielsen, 1996).

Promiscuity is expected of adolescents in some societies. In the adolescent houses of the Muria, a hill tribe in India, the head girl and boy make sure that sleeping partners are rotated. Participants are expected to change partners, and it is considered selfish and unsociable to restrict one's attention to a special friend (Schlegel, 1995).

Again, the available data on western adolescent populations suggests that the fear of adolescent sexual promiscuity or adolescents having sex randomly with multiple partners is exaggerated. Whether this is also the case in the different South African adolescent populations is not known. It is often speculated, though, that black adolescents tend to have sex with multiple partners more than their white counterparts.

It must also be reiterated that a statistic like the number of sexual partners elucidates little about human sexuality. We do not know enough about why most adolescents have only one and others have several sexual partners.

### 1.2.13 Frequency of continued sexual intercourse

Literature indicates that the term sexual activity may not reflect the real nature of adolescents' sexual behaviour, since sexual intercourse is often an isolated or infrequent event for many adolescents. Santelli and Beilenson (1992) reported that even though 44.9% of white American women aged 15-19 were sexually experienced only 28% had sex in the past month and only 14.9% had been consistently experiencing sex over the past 12 months. In a study on pregnant White, Hispanic, Black and Other American teenagers, 37% of the respondents answered affirmatively when asked if they were currently sexually active while 60% responded negatively (Medora et al., 1993).

The implication of this American research is again that sexual intercourse is not rife among American adolescent girls. In fact, for many girls sexual intercourse occurs very rarely. The frequency of sexual intercourse among adolescent girls has not yet been researched in South Africa.

### 1.2.14 Conclusion

After reviewing the psychology literature on female adolescent sexual behaviour, it seems that we know the following:

- the age at which girls start to date, kiss/pet and have sexual intercourse;
- that few girls report that they masturbate;
- that sexual abuse is not a rare occurrence;
- that young girls generally have sex in steady or dating relationships;
- that young girls have sex with few partners;
- that young girls have sex infrequently;
- that girls who have a future orientation are more inclined to postpone sex and to use contraceptives when they do have sex;
- that homosexual experiences occur rarely; and
- that those girls who are sexually active often manage their sexuality inadequately. They are therefore at risk for contracting STD's or having unplanned pregnancies.

The data reported in this section focus mainly on sexual behaviour and cognitions. Apart from the fact that this research does not focus on emotions, it also does not pay enough attention to the fact that such behaviours and cognitions are shaped by cultural, socio-

economic, and political factors. This data tell us little about why girls have sexual intercourse. It does not tell us *how* girls date, kiss, pet and have sexual intercourse. It also does not tell us how they experience and understand these behaviours. This understanding is needed for two reasons. Firstly, psychologists need to understand sexuality as an integral part of the development of young girls. Secondly, it is imperative to understand the meaning girls ascribe to the experience of sex if we want to design more effective reproductive health interventions.

## 2. Adolescent female sexuality

In the previous section it was clear that the data on female adolescent sexual behaviour tell us little about why girls engage in sexual intercourse and how they experience it. In the following section theories of adolescent development that can incorporate the definition of sexuality presented in chapter 2, will be described. The extent to which psychological research supports these theories will also be explored.

### 2.1 Psychological theories about female adolescent sexuality

Although traditional sex research focusing on behaviour and cognitions have been powerfully critiqued from many theoretical vantage points, commentators still argue that comprehensive theories of sexuality have not yet been developed. In the absence of psychological theories that specifically explain female adolescent sexuality, theories on adolescent development and how they can be utilised for a better understanding of female adolescent sexuality will be presented.

#### 2.1.1 Theories of adolescent development

Adolescence is generally considered to be a transitional time between childhood and adulthood and is considered to a time dominated by change and challenge (Petersen et al., 1995). Biological, social learning, psychoanalytic and cognitive stage theories have been the most influential perspectives used to explain adolescence.

According to the biological theories adolescent behaviour is related to physiological factors like hormone levels and inherited traits. Adolescent behaviour can be explained by the marked physiological changes that occur during the adolescent years (Nielsen, 1996).

Social learning theorists argue that modelling affects our behaviour and attitudes. This means that one imitates the people one sees receiving the rewards that one would like for oneself. Bandura (as cited in Nielsen, 1996) emphasised that the beliefs and thinking styles one has developed when one reaches adolescence, have a significant influence on how reinforcement and punishment affects one. Reinforcement and punishment do therefore not affect everyone in the same ways. As indicated in the previous section, social learning theories are often used to study sexual behaviour.

The cognitive stage theorists, of which Piaget is the most prominent, viewed human development as stages of mental (and not psychological) development. From childhood people progress to more advanced mental stages that enable them to reason, to solve problems and to interact with people in more mature ways. In adolescence people arrive at a stage referred to as formal operational thinking. Those adolescents who think and behave in immature ways are seen to still be in the childhood stage of concrete operational thinking. Adolescence, therefore, is a distinct life stage because young people are arriving at a new cognitive stage that enables them to behave more maturely (Nielsen, 1996; Trad, 1994). Kohlberg (as cited in Gilligan, 1982) was a follower of Piaget and identified six stages in moral development. According to his theory people progress slowly from conventional reasoning to post-conventional reasoning during adolescence. In the conventional reasoning stage people still conform to the rules and ethics that authority figures impose. Adolescents therefore judge themselves and other people according to society's conventions and their own parents' set of rules and beliefs. The consequence is that adolescents are usually not tolerant of beliefs and views that differ from their own. As people move to post-conventional reasoning, they become more open-minded, tolerant and adhere more to universal values (Nielsen, 1996).

Probably the most influential theories on adolescence have been developed within psychoanalysis. In these theories sexual development can be considered to be central (Apter, 1990). Classic psychoanalytical theories view human development in distinct stages during which certain psychological and sexual issues need to be resolved if children are to become well-adjusted adolescents and adults. These theories centre on the issue of separation and individuation. Adolescence is viewed as a crucial time for separating from one's family to build close relationships with peers and to learn to function in the adult world. Eric Erikson (as cited in Grotevant & Cooper, 1986), one of the most

well-known theorists on adolescence, described adolescence as a time in which the crisis of identity versus role confusion is central. The adolescent's identity formation centres around the following: establishment of gender roles, relationships, marriage, religion, politics, a value system, autonomy from parents, social responsibility and work roles (Louw et al., 1997). Erikson (as cited in Grotevant & Cooper, 1986) believed that adolescents should be allowed to indulge in a certain degree of experimentation in their educational and social environments. He called this a "psychological moratorium", a time when adolescents can try out different roles, identities, personalities, and ways of behaving. Experimenting with roles is an important prelude to establishing a coherent sense of identity. Without a period of moratorium, the adolescent's identity development will be delayed. Within this framework sex can be seen as part of sexual identity experimentation. Sex can be a way to develop and confirm one's autonomy and separate from one's family (Thompson, 1992).

These very influential theories about adolescent development share two important assumptions: one, that development is a process of individuation and two, that development is a universal process. This, in turn, implies that adolescent sexual development has to do with identity, individuation, individual experimentation, and individual moral development. It also suggests that the development of sexuality is a universal phenomenon, not taking into account the importance of gender, race, class and culture in any developmental process.

### 2.1.2 Challenging traditional adolescent development theories

According to Nielsen (1996) there is no theory that consistently explains all types of adolescent behaviour. She suggested that one should view each theory as having something to contribute and that biological and environmental factors continually interact with one another during all stages of human development. One must also keep in mind that much of the theory and research on adolescence has until recently, focused on the development of American, white, male, middle-class adolescents. Adolescent psychology theory and knowledge is therefore largely the psychology of white, male adolescents. In addition to the overrepresentation of male participants in the studies on adolescent development, college students are also frequently over-represented in many studies (Musick, 1993; Nielsen, 1996). The combination of these factors, questions the usefulness of existing literature for understanding working-class non-white adolescent

girls. Furthermore, most of the research that has been done on disadvantaged young women has focused on problem behaviours such as teenage pregnancy, school dropout and substance abuse. In these studies the social conditions of the young people were overemphasised with little attention being given to developmental and psychological issues (Musick, 1993). In the next sections, two of the main points of critique against dominant theories of development will be discussed.

(i) Critique against the individuation and separation focus of traditional adolescent development theories

Feminist object relations theorists like Chodorow and Gilligan (as cited in Apter, 1990; Unger & Crawford, 1996) have been instrumental in highlighting the gender-blindness of traditional development theories. They have challenged androcentric views of human development by focusing on women's experiences. Chodorow (as cited in Apter, 1990) challenged the relevance of individuation and separation for women as a necessary developmental stage to acquire maturity. According to Chodorow (as cited in Unger & Crawford, 1996) girls grow up with a sense of similarity and continuity with their mothers and a sense of connection to others in general. Boys, in contrast, must define themselves as different from their mother. It is important for them to know the difference between masculine and feminine. Individuation and separation from the mother is therefore much more of a male phenomenon than a female phenomenon (Apter, 1990). Instead of the rigid ego boundaries that males have to develop, girls develop permeable ego boundaries. Female identity is primarily a relational identity (as cited in Schreurs, 1993). According to Chodorow female adolescence can therefore be viewed as a time of connecting with others.

The mother-daughter relationship is central in the work of Chodorow. Traditional psychoanalytic approaches state that the father is primary in confirming and acknowledging the value of the daughter's femininity. These approaches assume that both mother and daughter are unable to value the female body. Flaake (1993) articulated it as follows: "Femininity, therefore, is not based on one's own sense of self worth, in which the mother shares her pride about the body and its pleasure, but rather its dependence on men for acknowledgement and value; the task falls on the father to acknowledge his daughter's femininity" (p. 8).



Gilligan (1982), using the work of Chodorow, also claimed that traditional developmental theories are gender-blind and thus do not account for the unique developmental processes that girls and women go through. In her well-known critique of the work of Kohlberg, she pointed out that his theory is based on his study of eighty-four boys whose development he studied over a twenty-year span. Gilligan (1982) stated: "Although Kohlberg claims universality for his stage sequence, those groups not included in his original sample rarely reach his higher stages" (p.18). In Gilligan's study of twenty-nine pregnant women between the ages of fifteen and thirty-three who were considering abortion, she found that women see moral dilemmas in terms of conflicting responsibilities. The women's moral judgement progressed from an initial concern with "self-survival" to a focus on "goodness" and eventually to a focus on "caring for others". She concluded that the type of morality that Kohlberg studied in his male participants was an ethic of rights, while she discovered an ethic of care and responsibility in her study on women. The implication of this is that Kohlberg's stages of moral development do not apply equally to women and men. Gilligan (1982), however, did not differentiate how this ethic manifests in adolescence. She referred to women in general.

Jordan (1993) described how a new relational theory of self has developed based on the work of feminist theorists like Miller, Gilligan and Chodorow. This theory emphasises the importance of relationship and connection in the development of women. Jordan (1993) stated that "this goes beyond saying that women value relationships, we are suggesting that the deepest sense of one's being is continuously formed in connection with others and is inextricably tied to relational movement" (p. 138). The specific implications of this theory for adolescent women and adolescent female sexuality have not been specifically explored. This theory does, however, suggest that connection, relationship and caring are probably important factors in female adolescent sexuality. In this framework it can be anticipated that sex for adolescent girls will be a way to relate to others, to connect to others and to care for others.

(ii) Critique against the universalistic assumption of traditional adolescent development theories

There is a growing acknowledgement of the diversity of human experience and that this diversity is partly determined by race, gender, class, sexual orientation and culture. It is

impossible, however, to isolate the effect of each of these systems, because they are intertwined and mutually dependent. The existing scholarship does not propose a single unifying theory of the dynamics of these processes, but emphasises that these social constructs must always be viewed in their context in the real lives of real people. It also stressed that the historical and social contexts of these dimensions, as well as their macro social structural character and their basis in power relations must be recognised (Weber, 1998). Especially in South Africa, it is impossible to distinguish between the effects of race, gender, culture and class, since political and economical discrimination have been based on primarily on race and secondarily on culture and gender.

The heterosexual context is another neglected context when it comes to understanding female adolescent development and sexuality. Women are socialised to define their sexual relationships in terms of men's needs. They have little knowledge about male and female desires and how to raise questions about pleasure and safety on the way to sexual intercourse. While their willingness and ability to control the ways in which they negotiate sexual boundaries are subject to a variety of pressures, the main pressures on young women come from the men they are with and the meaning and importance they attribute to men's sexual needs and behaviour. The pressure they encounter from men can vary from mild insistence to giving way to intercourse, or to intercourse on his terms, to physical assault (Holland, Ramazonoglu, Sharpe & Thomson, 1992; Laws & Schwartz, 1977).

In conclusion, a review of the literature suggests that no specific theories on the development of female sexuality exist. The dominant theories about the developmental stage of adolescence have been criticised for their focus on individuation and separation, as well as their universalistic assumptions. Feminist psychologists have recently posited new developmental theories that are specifically applicable to women and are more concerned with connection and relationship than with individuation and separation. In the absence of specific theories of the development of sexuality in adolescent girls, one needs to investigate the possibility of making these more general developmental theories applicable to the development of sexuality. In the next section, the empirical literature on the sexuality of adolescent girls will be discussed in order to determine the extent to which such a more relational model of sexuality is borne out by the literature.

## 2.2 Psychological research on adolescent female sexuality

In this section psychological research focusing on the meaning of sex for young girls will be presented.

### 2.2.1 Adolescent female sexuality and the ideal of love and romance

Thompson's (1992) study of sexuality is one of the few studies in which female adolescent sexuality and the meaning of sex for young girls was explored. She found that romance is a central concept in adolescent girls' understanding of their sexuality. According to Simon, Eder and Evans (1992) adolescence is a life stage during which young females acquire cultural knowledge about romantic love. Girls also develop feeling and expression norms to deal with their own concerns about romantic love. The norms of heterosexuality, exclusivity and monogamy are highly developed and are generally accepted (Simon et al., 1992).

Sex and romance are the organising principles in many teenage girls' lives (Thompson, 1992). Young girls believe that they always should be in a romantic relationship with a male in order to validate their attractiveness and worth to self and to others (Simon et al., 1992). Romance or love is often used as a euphemism for sex or as an introduction for a discussion of sex (Thompson, 1992). The one rule determining sexual intercourse for girls is the existence of love. Whether it is a case of girls really believing or experiencing that love comes before sex or whether they adhere to the convention that nice girls are supposed to love before they can desire sexually, is difficult to determine. When girls talk about feeling love it is often impossible to differentiate between sexual desire and love. It seems that the existence of love permits sexual excitement and desire and also protects a girl's sexual reputation (Lees, 1986).

Thompson (1990) argued that romance for adolescent girls is the search for someone who will validate them by loving them or having sex with them. The grail of this search is "true, monogamous, permanent, one-man, one-woman couple love" (Thompson, 1990, p.355). Thompson stated, however, that in these modern times the connection between sex and lifelong commitment has been broken and sex is no longer the way women can persuade men to commit themselves to a relationship. It has therefore become necessary to reconstruct the relation between permanence and liberty, adventure and

security. Sex, romance and intimacy must be deconstructed to fit the new changes and the bargain between men and women must be renegotiated. Faced with this difficult task many girls find themselves drawn to the old ideals of true and eternal love, motherhood and virginity (Thompson, 1992, 1994). Thompson argued that teenage girls still try to make the old bargain of sex for love in a new social climate. They need guidelines on what new bargains can be made. They need to know more about pleasure and they need to understand male sexual decision-making better. The importance of romance for teenage girls need to be acknowledged and harnessed, instead of ridiculing or dismissing it. Feminism can not make romance easy and painless, but it can expand teenage girls' opportunities for knowledge, pleasure and work.

According to Griffin (as cited in Simon et al., 1992), non-white females may be less concerned with romance. One reason for this may be that they have been less dependent than white females on marriage for financial support and social status. Kalof's (1995) findings that African-American females demonstrate more independence attributes than their white counterparts may strengthen this argument.

The concept of romance seems to be a central feature in western adolescent girls' understanding of their sexuality. In the romantic ideal female adolescence is constructed as a heterosexual experience that will transform girls, give meaning to their lives and give them status through their attachment to men. It is clear then that sex is about having a man and having an intimate relationship and not about one's own sexual needs and experiences. Such findings can be interpreted as supporting the theories of Chodorow and Gilligan who argued that connection and relationship is of primary importance in the development of young women.

### 2.2.2 Adolescent female sexuality, desire and pleasure

In her study of adolescent girls, Thompson (1992, 1994) found that girls do not or cannot base their sex narratives on their own sexual pleasure. Their narratives indicate few sexual partners, a limited repertoire of sexual activities and relatively little pleasure. This can be attributed to several reasons: inexperience, the girl's expectation that her partner will know how to pleasure her, and having intercourse before arousal. Girls may have sex to take on the challenge of sex. The absence of desire need not be developmental, but rather a lack of foreplay and a belief that a girl should not desire

sexually. Another reason could also be that there is no place for a girl's desire or pleasure if the bargain is that she allows her male partner intercourse without having pleasure, but then he must repay her with commitment and intimacy. If a girl's pleasure equals a boy's, she cannot expect an added compensation as well (Thompson, 1992).

Tolman and Szalacha (1999) argued that psychology has not contributed to an understanding of adolescent girls' sexual feelings because the focus was usually on sexual behaviour. Tolman and Szalacha found that approximately two-thirds of their sample of thirty 15- to 19-year old girls reported that they felt sexual desire. These girls described their experience of sexual desire in bodily terms, instead of the expected relational terms. The girls tended, however, to question the morality or correctness of their sexual feelings and to respond to those feelings. Tolman and Szalacha identified a difference between the urban and suburban girls' description of their responses to sexual desire. The urban girls described themselves as agents "in the service of protection", while the suburban girls describe themselves as agents "in the service of pleasure" (p.15). While the urban girls felt physically more vulnerable and were more intent on protecting their bodies; the suburban girls voiced a contradiction between their bodily experiences and the ideal of female sexuality that they had internalised. According to Tolman and Szalacha this is partly an effect of social location. The urban girls were more exposed to danger and were more aware of their physical vulnerability, while the suburban girls lived safe, contained lives and have the space to engage with their sexuality on a more psychological level. Tolman and Szalacha argued that this demonstrates that social location influences young women's experience of their own bodies. They also found that the suburban girls in their study without a personal history of sexual violation integrated emotions and body when talking about sexual desire, while the urban girls and those suburban girls who reported sexual violation disconnected their bodies from their sexual experience. They related how the mind should control the body. Lastly, Tolman and Szalacha identified a group of sexually violated urban girls who actively resisted disconnecting their bodies from their sexual experience and who were intent on owning the bodily experience of sexual pleasure.

In my opinion, Tolman and Szalacha's research does not provide support either for sex as separation and individuation or for sex as a way to care and connect. Since Tolman and Szalacha's (1999) focused in their article only on girls' articulation of sexual desire and pleasure, it cannot be determined how the girls constructed meaning of sex and

sexual intercourse. Their research does, however, indicate that their respondents demonstrated a sense of sexual agency, but that the prominence of that sense of agency was influenced by social location.

In conclusion, it seems then that although girls experience sexual desire and pleasure, many of them find it difficult to articulate and own sexual desire and pleasure. The reason why this is the case, seems to be a central issue and will also form a focus of this study's qualitative analysis. According to the literature the following possible reasons should be considered. One possible reason is girls' failure to differentiate between love and sexual excitement. A second factor is that it is socially sanctioned for girls to talk about love, but not about sex and sexual desire (Lees, 1986). Female desire is very rarely the topic of discussion in sex education classes. This silence about female sexual desire robs young women of the space to validate and understand their sexual desires and in doing so prevents them from managing their sexuality responsibly (Fine, 1988). Thirdly, female sexual experience is constructed in terms of male action and girls have no language in which to formulate their sexual experience. And even if girls were daring enough to express their sexual experience it will threaten their social standing and reputation. This threat makes it necessary for a girl to suppress sexual desire and experience if she wants to protect her sexual reputation (Lees, 1986).

### 2.2.3 Adolescent female sexuality, race, class, and culture

Although some literature on race, culture and female adolescent sexuality in America was found (see Espin, 1992; Wyatt, 1997), no literature could be found on the sexuality of South African, female, coloured, working-class adolescents. As is the case with black and Hispanic American women, one can assume that South Africa's historical influences have affected cultural processes and class and race differentiation in coloured communities. The exact nature of this effect is not known. It seems reasonable to say, though, that coloured women in the Western Cape share a history of racial separation as well as political, economical and gender oppression.

Some researchers (Kalof, 1995; Way, 1995) found that girls of colour are often less dependent and more outspoken than their white, middle-class counterparts. They hypothesised that these girls' experience of marginalisation may force them to realise that it is necessary to speak out in order to survive. White, middle-class girls may

remain silent, because they are granted certain opportunities and may lose them if they speak out. This outspokenness can, however, not be generalised to all contexts and relationships. Girls across race, class and culture tend to be silenced in their relationships with men (Way, 1995).

According to Lees (1986) there are not significant class differences in the way girls describe their relations with boys and the way they categorise other girls in terms of their sexual reputation. The double standard for boys and girls are powerful in all socio-economic classes. One can conclude that although there are some similarities between girls of different races and social classes regarding sexuality, that race and social class do impact on female adolescent sexuality.

#### 2.2.4 Conclusion

It is clear that data about the meaning and experience of sexuality for young girls are extremely limited, especially when compared to the many quantitative studies on sexual behaviours. It is not only limited in the number of studies, but also limited to white, western girls. Sexuality (as defined in chapter 2) is not researched by psychologists, i.e. adolescent girls of different racial, cultural and socio-economic groups are not asked about their experience of sex. We therefore do not know what the meaning is that sex has for them. This limitation again highlights the importance of the current study.

### 3. Critical evaluation of the available literature

After reviewing the literature, one can only concur with other authors (e.g. Brooks & Furstenberg, 1989) about the many limitations in the literature on female adolescent sexual behaviour and sexuality. Firstly, the focus on survey research, has given us a lot of statistics about selected sexual behaviours, but left us with little understanding of the dynamics of female adolescent sexuality. Secondly, most sex research has looked at sexual behaviour without providing or attempting to formulate a theory about female adolescent sexuality. Thirdly, since different studies vary regarding the populations and age groups included, it is difficult to come to any conclusions regarding adolescent sexual behaviour in general. Fourthly, available studies indicate that there are variations of sexual behaviour across race and culture that make universal conclusions about female adolescent sexuality illogical. Fifthly, the absence of data on the South African population's

sexuality in general is alarming. Given the extent of adolescent reproductive health problems in South Africa, as well as the limitations in sexuality research, it seems imperative that more descriptive studies of the sexuality of specific groups of adolescents should be conducted.



## CHAPTER 4

### SOCIAL CONSTRUCTIONISM: A THEORETICAL FRAMEWORK FOR THIS STUDY

In Chapter two, *sexuality* was defined as:

a subjective experience (both embodied and psychological) associated with sexual arousal that is always historically specific and context-bound. This experience can be emotive, cognitive or behavioural, but it is in this multi-faceted and multi-determined experience that the meaning of sex is constructed.

It is clear that this definition is very strongly informed by social constructionism. In this chapter the basic tenets and the most important critiques of social constructionism will be discussed. The relevance of this particular perspective to the study of sex and sexuality will be explored.

#### 1. Social constructionism as a theoretical framework for human sexuality

##### 1.1 Defining social constructionism

Social constructionism is not a homogenous and singular theoretical framework (Durrheim, 1997; Vance, 1989). It refers to different perspectives that have been influenced by and in its turn also influenced many disciplines. Durrheim (1997) argued that "social constructionism may best be defined in terms of its resistance to the institutionalised dominance of empiricism as the guiding philosophy of the human sciences" (p175-176). Social constructionism can in the first place be understood as a critique. It is critical of traditional psychology in three important ways. Firstly, it is anti-empiricist. It opposes the idea of a single truth and a paramount theory incorporating the ultimate truth. According to social constructionism every theory is a way of making meaning and destroying one theory would mean silencing a way of meaning making. There can even be a place for empiricist research within a social constructionist framework, as long as such research does not claim a universal truth. This critique corresponds to the first of three major social constructionist orientations to psychological inquiry that Gergen (1997) has identified, namely the orientation to denaturalise, reflect and democratise. This orientation demands of psychological research to

abandon its "arrogant" claims of truth, universality and objectivity. It encourages researchers to broaden the range of interpretation available to the psychological discipline. It also gives all possible role-players within the discipline an equal status and right to psychological inquiry and demands that researchers remain critical regarding the ethical and ideological implications of their practices. Secondly, social constructionism is against pathologising people. It encourages the search for ways to facilitate people's psychological well-being, instead of focusing on psychopathologies. Gergen (1997) refers to this as the revitalisation and enrichment orientation. According to this orientation psychology has been characterised these last decades by an increasing focus on deficits. Supporters of this orientation argue that the discipline needs to develop ways to guide people to well-being, instead of focusing on deficits. This orientation also argues for the validation of less dominant voices (like the humanist and phenomenological traditions). These traditions can add to our understanding of human experience and how to enrich and improve human experience. Thirdly, social constructionism is anti-individualist. Social constructionists focus on microsocial processes in order to understand human behaviour. This critique corresponds with Gergen's (1997) third social constructionist orientation that entails the social reconstruction of the mind. This orientation encourages psychologists to reconceptualise the individual socially and aims to reconstitute the psychological as a domain of the social. This is not a new endeavour in psychology, and social constructionism's attempts can be seen as an extension of already existing attempts (Gergen 1997). This last orientation seems promising for developing a social constructionist psychological theory of human sexuality. This orientation, however, is a recent one and fully developed theories about human behaviour have not yet been proposed.

Although social constructionism has offered a powerful critique of traditional psychology, it can be defined more positively:

social construction participate in meaning making and to see meaning making as a participatory process from which emerge psychological subjects and subjectivities. As social construction's emphasis is placed on the ways we negotiate the meanings of our lives, so its practices have for the most part stressed language as history's and culture's agent in fashioning psychological subjects. ... social construction's psychological subject is always at once one that is open to the cultural and historical

terms of negotiation and one that throws asunder traditional psychology's preference for an unchanging generic subject (Bayer, 1998, p.4).

In this quotation it is clear that although the essence of social constructionism has originated and been influenced significantly by its resistance to empiricism, it offers more than simply opposition to and criticism of empiricism. It is firstly described as an active and subjective involvement with how people make meaning of their lives and secondly, as an orientation that validates and appreciates the many ways that different people make meaning of their lives in their various contexts.

Social constructionism can be characterised by the following basic assumptions:

1. Objective truth and knowledge do not exist. Social constructionism, therefore, demands of us to challenge the assumed objective basis of conventional knowledge (Gergen, 1985, 1998; Durrheim, 1997; Tiefer, 1995). According to Durrheim (1997) social constructionism recognises that truths exist, but it states that they are 'always perspectival interpretations which can only emerge against the backdrop of socially shared understanding' (p.177).
2. The degree to which a given form of understanding is maintained across time is not dependent on the empirical validity of the relevant perspectives, but dependent on social mechanisms. This means that so-called truths are constantly changing depending on social processes (Gergen 1985).
3. Human beings' experience of the world is ordered. Our world is seen as consisting of discrete events and specific persons engaging in specific actions in a particular order (DeLamater & Hyde, 1998).
4. Language provides a tool to make sense of the world. We use it to classify events and persons to order them and to interpret new experiences (DeLamater & Hyde, 1998).
5. We share the reality of everyday life with others who perceive it in more or less the same way. Language helps us to share our experience and to make others understand our experience. Reality is therefore a product of social interaction (DeLamater & Hyde, 1998;

Gergen 1985).

6. Shared typifications of reality become institutionalised and it becomes habit to perceive and do things in a certain way. When a perception or practice becomes a habit, people expect it to happen in the same way and social control mechanisms are developed to maintain it (DeLamater & Hyde, 1998).
7. Knowledge may become institutionalised at certain social levels. This knowledge becomes almost exclusive to and is maintained by a specific group. In this way institutionalised knowledge can be defined as power (DeLamater & Hyde, 1998).
8. The term "power" is very important in social constructionism. It refers to the importance of non-discursive aspects of human relationships. It is argued that discourse is embedded in relations of power. Power is located in two non-discursive sites: the human body and the structures of society. The body's functioning, pleasure and pain is a tangible presence that cannot be reduced to discursive constructions. Regarding social structures, it is argued that current patterns of interaction are dependent on power structures originating in the past and maintained by many institutionalised practices and conventions (Danziger, 1997).

## 1.2 A social constructionist view of human sexuality

In the same way that social constructionism in general, is partly clarified by explaining its opposition to empiricism; the social constructionist view of human sexuality is clarified by explaining how it differs from the essentialist understanding of human sexuality (Caplan, 1987; DeLamater & Hyde, 1998; Holland et al., 1990; Kippax, Crawford, Waldby & Benton, 1990; Miles, 1992; Strebel, 1993; Vance, 1992; Weeks, 1986). Essentialism refers to the belief that certain phenomena are natural, inevitable, universal and biologically determined (DeLamater & Hyde, 1998)). The essentialist view of human sexuality is that it is biologically determined and therefore unalterable. Male sexuality is seen as a heterosexual phenomenon, uncontrollable and a powerful natural force that is intent on release. Female sexuality is often seen as passive, restrained, focused on love, intent on pleasing a male partner and revolving around reproduction (Holland et al., 1990). Foucault (1978) was one of the strongest voices against the viewing of human sexuality in essentialist terms. His analysis of the historical

context of human sexuality was an important contributor to the social constructionist understanding of sexuality. According to him sexuality:

must not be described as a stubborn drive, by nature alien and of necessity disobedient to a power which exhausts itself trying to subdue it and often fails to control it entirely. It appears rather as an especially dense transfer point for relations of power between men and women, young people and old people, parents and offspring, teachers and students, priests and laity, an administration and a population (Foucault, 1978, p. 103.).

Foucault's conceptualisation of sexuality moved away from the western, traditional perception of sexuality as an individual, sinful force that must be controlled. He viewed sexuality as a phenomenon constructed through power imbalances between different social groupings and in different social contexts. He suggested that sexuality is shaped and controlled by and for the benefit of the more powerful groupings in society.

There is convincing evidence that sex, far from being natural, varies significantly at different historical periods and also varies from culture to culture (Foucault, 1978; Lees, 1986; Vance, 1992). People are not born sexual beings. People learn how to be sexual and they get their cues from their social context (Gagnon, 1973). Sexuality is an intersection of the political, social, economic, historical, personal, and experiential; linking behaviour and thought, fantasy and action. Each of these areas must be acknowledged and analysed and it must be understood how these areas interact. If these different areas are taken into consideration there will be more caution when trying to make generalisations about human sexuality, and also even about one seemingly homogenous group like coloured, rural girls. Women's sexual thoughts, experiences and behaviours vary according to age, class, ethnicity, physical ability, sexual orientation, sexual preference, religion and region (Vance, 1992). Vance (1992) warned, however, that avoidance of generalisation is just as unhelpful as overgeneralization about women's sexual experience. According to her, taking into consideration the existing and expanding theories and information can only develop theory. This means that the use of theory is not impossible or undesirable within the social constructionist framework. Theory can be used as a departure point to make meaning of people's experience. Theoretical

concepts can therefore provide an initial base on which a researcher needs to build and expand (Charmaz, 1990).

Weeks (1986) summarised the following assumptions of a social constructionist understanding of human sexuality: Firstly, sex is not a natural energy force that must be socially controlled. Secondly, there is variability between different societies' beliefs and behaviours regarding sexuality. Sexuality therefore has many histories. Thirdly, sexuality is something that is produced by society in complex ways. Weeks (1986) argued that sexuality is not the most natural element in social life and not the most resistant to cultural moulding, but is very much susceptible to social forces. Islamic cultures, for example, attempt to integrate the religious and the sexual. They perceive sexuality to be a gift. The Christian western world in contrast, has turned sex into a moral battleground between good and evil. They created a split between the superior, spiritual mind and the weak, sinful body. Each culture regulates with whom (e.g. gender, age, race or class of sexual partners) their members may have sex and how (e.g. which orifices may be entered, what bodily parts may be touched, when bodies can be touched) they may have sex. These rules can be formal or informal rules and they are not applied in the same way to all members of a society. In any particular society, rules may vary according to gender, age and class. The forces that shape human sexuality vary from society to society in the same way that dress or cuisine can vary. Cultures do not only regulate sexuality by condoning some and condemning other sexual acts, but it shapes the way people understand and define sexuality. Terms like anal sex, fellatio and masturbation are terms that have been used for a long time, but it has different meanings for people with different sexual identities and from different sexual communities. People make sense of their sexuality and sexual behaviour using the current accepted codes of meaning (Vance, 1992).

### 1.2.1 Social constructionism, sexuality and the body

Social constructionism recognises the importance of the physical basis of human sexuality, but emphasises that it does not determine human sexuality. This contrasts with biological essentialist notions of sexuality that hold that sexuality is determined by hormones. Social constructionists argue that if the body did determine sexuality, there would not be such a diversity of human sexuality across different cultures (Vance, 1992; Weeks, 1986). Sexual

behaviour is based on human biological potential and it needs certain internal and external body parts, but sexual behaviour can only be fully understood if an understanding is gained of the complex rules by which different cultures regulate sexual behaviour (Caplan, 1987; Foucault, 1987; Unger & Crawford, 1996). Morrow (1995) argued, however, that one consequence of this view of sexuality is that the role of the body in relation to sexuality is neglected to the point where it seems to have no role at all or is treated as a natural substrate. Social constructionists have, however, not paid much attention to the incorporation of the body in their view of human sexuality.

### 1.2.2 Social constructionism and language

According to social constructionism people's existence is comprised of symbols that have shared meaning and that are usually conveyed by language. People's lives become meaningful through their symbolic communication. People learn values, thoughts and emotions via symbolic communication with other people. The idea that people create and transform their physical reality through symbolic communication, implies not only that the physical sensations of sexual experience are interpreted by people through their symbolic systems as a sexual phenomenon. It also implies that sexual symbolism creates sexual experience. Some authors (Gecas & Libby, 1976; Longmore, 1998) stated that it is symbols, and not physiology, that evoke sexual desire. Language conveys attitudes as well as meanings, especially in the sexual domain.

A distinction is made between three kinds of sexual language. Firstly, there is a spoken vernacular that is used and accepted in some circles of society and viewed as unacceptable in other circles. Secondly, there are terms used by professional people that are often foreign to lay people. Thirdly, there are the "agreed-upon words and phrases that are often studiously vague and non-sexual in their primary senses, and are capable of being used with a minimum of embarrassment; yet are frequently misleading in their implications and liable to confuse thought on sexual matters" (Bailey, quoted in Gecas & Libby, 1978, p. 35). According to Gecas & Libby (1978) one can expect the connotations associated with sexual terms to vary by gender, social class, and other social characteristics because of differences in exposure and experiences in sexual relations by people occupying different positions in the social structure. In all three kinds of languages sexuality is constructed in very particular ways which

are very much bound to the language used. For instance, in lay terms, sex may be seen as dirty (swear words), in professional terms as clinical/ medical or thirdly, as something that should be a secret and not talked about directly. In the current study the focus will be on the first and last kinds of sexual language.

### 1.2.3 Social constructionism, sexuality and power

Social constructionism acknowledges that power is a central dynamic in heterosexual relations. It also acknowledges that the relative power of men and women is determined by social institutions. The institutionalised power structure is seen as a given that pervades the daily lives of individual women. One's relative power is defined by one's position in the structure or hierarchy of a group or culture. Structural power determines personal experience. There seems little doubt that social structure is a real and compelling base of sexual power (Weis, 1998). Bohan (1993) argued that social constructionism reveals the real issues of power for women, because it shifts the focus away from the individual to the context of the individual. It makes possible new interventions to achieve power equality, because the focus is on the context rather than on individual women. The issue is therefore: which contextual changes will facilitate the empowerment of women, rather than what women should do to get power.

Weis (1998) argued, however, that the reduction of the concept of power to its structural bases oversimplifies the complexity of power in a relationship. Although power has a social structure component, it also has interpersonal components. According to Weis (1998) there is growing consensus that power can be defined as the net ability to cause intended outcomes in a relationship, particularly to influence another person's behaviour toward that outcome. In relationships people have different sources of power and use different power strategies. Social structure factors like social position and access to opportunities play an important role in shaping power, but interpersonal issues like personal expertise and competence also contribute significantly to this shaping process. Weis (1998) argued that the ways in which women and men exercise power in sexual relationships must be examined.

According to social constructionism power balances come into play in all contexts of human functioning, intrapersonally, interpersonally and on macro structural levels. Social



constructionists need to take all these levels into account. In this study an attempt will be made to take into account the interpersonal level as well as macro structure levels like socio-economic class, culture and race.

## 2. A critical look at social constructionism

A coherent critique of social constructionism is difficult, because it seems that different critics interpret social constructionism in different ways. In this section the disadvantages and advantages of social constructionism will be discussed.

### 2.1 Disadvantages of social constructionism

Some critics (for example Wick, 1996) argued that social constructionism proposes that all versions of reality are potentially equally valid and yet they reject the scientific view of reality. Gergen (1997) (probably the most quoted proponent of social constructionism) argued, however, that the social constructionist view does not condemn empirical science. It simply contests its claims to an absolute truth. Gergen (1997) further argued that it is even possible to justify and motivate empirical research from a social constructionist viewpoint.

The relativism of social constructionism and its accompanying lack of pragmatic value have drawn much criticism (Bohan, 1993; Hartsock, 1990; Osbeck, 1993; Shotter, 1992; Stenner & Eccleston, 1994). According to Hartsock (1990), postmodernist theories only manage to criticise modernist theories without providing alternatives. She stated:

For us who want to understand the world systematically in order to change it, postmodern theories at their best give little guidance. Those of us who are not part of the ruling race, class, or gender, not a part of the minority which controls our world, need to know how it works. Why are we – in all our variousness – systematically excluded and marginalized? What systematic changes would be required to create a more just society? At worst, postmodernist theories can recapitulate the effects of Enlightenment theories which deny the right to participate in defining the terms of interaction. Thus, I contend, in broad terms, that postmodernism represents a dangerous approach for any marginalized group to adopt." (p.159).

According to Hartsock (1990) postmodernism makes theory, and therefore action based on theory, impossible. Bohan (1993) agreed that since social constructionism validates the notion of different truths, it is impossible to find justification for political action based on one version of the truth (like feminism). The social constructionist counter-argument is that the absence of absolute truths does not mean an absence of value and moral criteria. All versions of the truth must be evaluated in terms of its benefits for humankind (Bohan, 1993; Gergen, 1985). Gergen (1985) acknowledged that the constructionist orientation may appear relativistic because it does not provide rules or method. According to Gergen (1985) this does not imply that everything is acceptable. Social constructionist oriented research still needs to be intelligible to the larger scientific community and will therefore always be governed by certain rules. He argued, however, that these rules must be viewed as products of a certain history and culture and can therefore be challenged and changed.

According to Greenwood (1992) social constructionism contends that psychological theories about human behaviour do not provide an accurate reflection of human behaviour, but an interpretation or construction of that behaviour. Social constructionism posits that theory cannot describe, but performs other social functions like warning, excusing, endorsing. Greenwood (1992) advocated for the instatement of scientific realism because it:

provides a richer conception of psychological theory than traditional empiricism, and enables the theoretical psychologist to acknowledge the respects in which human actions and psychological states may be said to be social in nature, without abandoning the traditional scientific virtues of linguistic and epistemological objectivity that have been rejected by social constructionist and relativist theorists (p. 131).

Greenwood (1992) reasoned that psychological theory can also fulfil a descriptive function and that this function does not exclude the other functions of theory identified by social constructionists. Realists agree that theories often do not reflect reality accurately. They argue that although the "semantics of such descriptions are determined by the theoretical model (...) theoretical descriptions can be properly characterised as accurate or inaccurate" (Greenwood, 1992, p.138). For the realist the accuracy of a theory is dependent on the theory's ability to satisfy its truth conditions, even though these truth conditions are socially

defined. According to Greenwood (1992) the "only means of determining this is by reference to observational predictions derived from the theoretical description, in conjunction with causal hypotheses and other auxiliary assumptions" (p.138). This seems to imply that the traditional empirical values regarding a good theory is acceptable as long as theorists admit that their "truth conditions" are socially constructed. If this understanding is correct then realism does not really add to either positivism or social constructionism or negate either of them. In my opinion it is the same view that social constructionists like Gergen (1997) hold.

## 2.2 Advantages of social constructionism

Despite the important ways in which social constructionism has been criticised, it does seem to be particularly pertinent to research on sexuality. Many authors emphasise the impossibility of a single theory of sexuality since they acknowledge human pluralism and context when studying human sexuality. They contend that the historical and social contexts in which people are sexual, influence their sexuality and sexual behaviour and lead to many different sexualities (Caplan, 1987; Foucault, 1978; Fullilove et al., 1990; Tiefer, 1995; Unger & Crawford, 1996; Vance, 1992; Weber, 1998; Worth 1989).

According to Tiefer (1995), sex researchers' work is often viewed as circumspect and she believed that the appeals for rigorous scientific research by sex researchers are an attempt to gain respectability and acceptance from other scientists. Tiefer (1995) argued that the quality of sex research is compromised in this quest, since the empiricist vision does not allow for the diversity of sexuality and the diversity of methods that can be used to examine people's sexual experiences and the social contexts that constructs sexuality. Social constructionism is advocated to be the theoretical perspective that accommodates and enhances the diversity of human sexuality (Lees, 1987; Tiefer, 1995; Vance, 1992; Weeks, 1986; Worth, 1990; Wyatt, 1997).

Much of the criticism against social constructionism stems from those who view social constructionism as a theory (Greer, 1997). They, therefore, expect of it to explain phenomena and to make predictions. Social constructionism, however, is not a theory and cannot be proven or disproven. It is probably better seen as providing an understanding about the uses and abuses of theory. In this way it offers a new way of thinking about knowledge and its

important contribution is its appeal for tolerance and its acceptance of difference. Translated to the study of human sexuality, social constructionism warns against the reductionism of the mainstream theories of human sexual behaviour, but also accommodates these theories as providing one perspective on human sexuality. As noted in chapters two and three many disciplines (anthropology, sociology, psychiatry, as well as ethnographic, feminist and gay studies) have contributed to sex research and several theories can contribute to an understanding of human sexuality. In social constructionism the contribution of these various disciplines and theories can be acknowledged.

Furthermore, social constructionism advocates for a focus on people's experience and understanding of their own sexuality. It therefore broadens the scope of the study of human sexuality from a focus on sexual behaviours to how people understand and experience those behaviours.

### 3. The implications of a social constructionist framework for this study

According to Tiefer (1995) social constructionism has four tasks, namely deconstructing existing texts; describing the experiential and behavioural range of constructions; describing individual and social change in constructions; and manipulating social constructions and thereby creating change. Tiefer (1995) claimed that traditional sexual researchers produce a specific construction of sexuality that does not reflect the complexity of sexuality in real people's experience. She asserted that the methods of sexual study should reflect the complexity of the concept of sexuality. She warned against the danger of oversimplifying sexuality to make it fit within a "scientific" design. Theories and concepts must be pursued that explain how sexuality is constructed differently in different historical and cultural settings. Research should be focused on how people make sense of their world and experiences. To this end researchers should use multiple methods and to see them all as complementary. Individual constructions of sexuality have to do with a complex interaction between individual and social influences that cannot be studied with a single method. The focus of research should therefore be to understand how individuals and groups construct and experience sexuality in different contexts and not to attempt to determine what is true about sexuality for most people. Interpretative, qualitative methods predominate in this field. It is argued that research is needed to examine the psychological experience of sex. If constructionists can

manage to reframe sexuality as constructed in interaction as a result of expectations and negotiations, psychology can be at the forefront of the study of human sexuality (Tiefer, 1995).

This study will begin by describing the sexual behaviour of one group of girls. It will then explore how these girls make meaning of this behaviour by looking at their own words. The focus will thus be on understanding how young girls construct and experience their sexual experiences. There will be no assumptions about a real or universal construction and understanding. It is assumed that there will be differences and variations and that all have equal value. The assumption simply is "that single concepts do not reflect unitary experience" (Tiefer, 1995, p.61). In this study quantitative and qualitative methods will be combined in the attempt to describe the behavioural and experiential range of young girls' sexual constructions. These methods will be clarified in the next chapter.

## CHAPTER 5

### METHODS

In this chapter the methods that were used to obtain and analyse the data will be outlined.

#### 1. Study goal

This study aimed to describe the sexual behaviour and sexuality of coloured female adolescents living in a community in the Western Cape.

#### 1.2 Operationalisation of goal

1.2.1 to determine the range of sexual behaviours that female adolescents engage in;

1.2.2 to determine the prevalence of high-risk sexual behaviour among this group of female adolescents; and

1.2.3 to explore sexually active female adolescents' experience of sexuality.

#### 2. Research design

In the previous chapter it was indicated that the social constructionist framework compels one to use a combination of methods. Several authors (Caplan, 1987; Fullilove et al., 1990; Holland et al., 1990; Huygens, Kajura, Seeley & Barton, 1996) argued that quantitative rigor cannot encompass the richness of human sexuality and does not consider its social, economic, political and symbolic dimensions. The context in which sexual acts are taking place is often ignored, including the cultural differences between investigators' and their respondents' understanding of the research topics (Caplan, 1987; Fullilove et al., 1990; Holland et al., 1990; Huygens et al., 1996). In-depth, qualitative or social methods of research on the other hand have also proven problematic. In the concern with qualitative values, not enough attention was given to quantitative issues such as numbers of contacts or consistency of condom use that could have been relevant to understand the spread of AIDS (Huygens et al., 1996). A mixture of both qualitative and

quantitative measures seems appropriate for the investigation of sexual behaviour and sexuality. A questionnaire allows the respondent the freedom to anonymously complete a form and the interview provides the subtlety and contextual understanding which is missed in this exercise. The match or mismatch between data received by way of the two methods facilitates understanding (Dockrell & Joffe, 1992; Eyre, 1997; Hyde & DeLamater, 1997).

Therefore, for the current study on sexual behaviour, a quantitative research method was combined with a qualitative research method. Quantitative and qualitative approaches are often viewed as separate paradigms of research. The debate on the relative value, appropriateness, and possible integration of these two approaches are part of larger concerns within the social sciences about what constitutes good research in a postmodern world (Burman 1997; Rabinowitz & Weseen, 1997; Tolman & Szalacha, 1999). One view in the qualitative/quantitative debate is that the integration of quantitative and qualitative paradigms is impossible since they reflect irreconcilable worldviews. The second view is that the two paradigms can and should be combined because each provide a useful understanding of a phenomenon and can contribute to a better understanding of a phenomenon. The third view is that each paradigm should be recognised as a form of understanding that is unique and situated in a particular context and that the point is not to reconcile the two paradigms (Smaling, 1994; Tolman & Szalacha, 1999). For pragmatic and also theoretical reasons, qualitative and quantitative have been combined more and more over the past few years. I support this view and adhere to the second view identified above.

According to Tolman and Szalacha (1999) there are several possibilities for combining quantitative and qualitative approaches. Firstly, in a concurrent approach quantitative and qualitative investigations are conducted at the same time. It is difficult however, to integrate the findings of two almost separate studies. Each study has different questions, use different methods, and lead to different interpretations. Secondly, a sequential approach may be followed where one method is implemented after the other. In most cases an exploratory qualitative study is followed by a quantitative study. Thirdly, various methods can be combined simultaneously. The paradigms from which methods stem are irrelevant. The only important issue is which method serves the research best. Fourthly, an integrated approach can be used. Both quantitative and qualitative approaches are applied throughout the entire research process (Tolman & Szalacha, 1999). This study reflects a sequential approach with a quantitative survey followed by in-depth interviewing. The

reason for this was that quantitative surveying would provide a broader sexual behavioural context for this community of young girls. The qualitative method was used to focus on the sexually active subgroup identified via the questionnaire data.

### 3. Method 1: Questionnaires

Structured questionnaires were used to address research aims 1.2.1 - 1.2.2.

#### 3.1 Questionnaire respondents

The questionnaire respondents all attended one secondary school in the Stellenbosch area. This school is situated in a coloured community. This school was selected because available statistics indicated that the highest frequency of teenage pregnancies in the Stellenbosch district occurred in this community during 1997.

All the girls attending the school were targeted. No sampling was therefore used. According to the school statistics, 626 girls attended the school during the year in which the study was done. Five hundred and fifty eight adolescent girls completed the questionnaire. A total of 68 girls were absent on the different days the questionnaire was implemented in the different grades. No data is available on the characteristics of the girls who were absent. All of the 580 completed questionnaires were used in the data analysis. The biographical data of these respondents are reflected in the following tables.



Table 1: Age Distribution: Main group of respondents (N = 558)

Age	Frequency	Percent
13	83	14,9
14	106	19,0
15	111	19,9
16	119	21,3
17	84	15,1
18	33	5,9
19	7	1,3
20	3	0,5
No response	12	2,2
Total	558	100,0

Table 1 indicates that most of the respondents were between the ages of 13 and 17. The average age was 15,29.

Table 2: Fathers' employment: Main group of respondents (N = 558)

	Frequency	Percent
Unemployed	26	4,7
Unschooling work	200	35,8
Schooling work	123	22,0
Tertiary education	34	6,1
No response	175	31,4
Total	558	100,0

Table 2 indicates that most of the respondents' fathers did unschooled and schooled work. The respondents, therefore, generally came from a working class socio-economic background. The high percentage (31,4%) of no responses can be explained by two factors. Firstly, the respondents had to write down the nature of fathers employment. It is likely that some respondents considered this to be too much trouble, especially since the rest of the questionnaire consisted of multiple choice answers that could simply be marked. Secondly, 38,5% of the girls indicated that their parents lived apart. This implies that many girls did not live with their fathers. They might not have known their fathers' employment and were therefore unable to provide the information.

Table 3: Mothers' employment: Main group of respondents (N = 558)

	Frequency	Percent
Unemployed	20	3,6
Unschooled work	242	43,4
Schooled work	63	11,3
Tertiary education	24	4,3
Housewife	132	23,7
No response	77	13,8
Total	473	100,0

Table 3 indicates that most (43,4%) of the respondents' mothers did unschooled work. This is followed by 23,7% of the mothers who were housewives. This data reflect two socio-economic poles, namely a majority of mothers who have to work but whose educational status is quite low and those mothers who can financially afford to stay at home. It is possible, however, that those respondents who indicated that their mothers are housewives, do not necessarily reflect whether they were housewives by choice or by lack of alternative employment. As in the case of the fathers' employment, the 13,8% incomplete data can indicate that the respondents could have found it too much trouble to write down the nature of their mothers' employment.

The data regarding parents' employment indicate that although this community can be classified as largely a working class community, it is not a socio-economic homogenous community. One explanation for this is that the apartheid system forced people of a particular race to live in one area and that people of the same race with differentiated socio-economic status ended up living in the same community.

Table 4: Sharing a bed: Main group of respondents (N = 558)

	Frequency	Percent
Alone	380	68,1
Mother	10	1,8
Both parents	1	0,2
Brothers	16	2,9
Sisters	64	11,5
Whole family	5	0,9
Other family	38	6,8
Family & other family members	2	0,4
Brothers & sisters	1	0,2
No response	35	7,4
Total	558	100,0

Whereas almost 70% of the respondents slept in their beds alone, nearly 30% of the respondents shared a bed with another person. This may indicate poor and crowded housing circumstances for a large number of the respondents.

Table 5: Bathroom in house: Main group of respondents (N = 558)

	Frequency	Percent
Yes	446	79,9
No	100	17,9
No response	10	1,8
Total	558	100,0

Almost 80% of the respondents had a bathroom in the house, whereas nearly 20% did not have a bathroom. Again, this could indicate poor living circumstances for some of the respondents.

Table 6: Religious affiliation: Main group of respondents (N = 558)

	Frequency	Percent
Old and new Apostolic	128	23,2
Dutch Reformed	53	9,5
United Reformed Church	71	15,0
Methodist	37	7,8
Rhine	32	6,8
Roman Catholic	23	4,9
Other affiliations	167	28,5
No affiliation indicated	24	4,3
Total	558	100,0

Table 6 indicates that 23,2% of the respondents were affiliated to the Apostolic churches and 15,0% to the United Reformed Church. Many different churches made up the

remaining affiliations. Not one of the church groupings seems to be dominant in this community. Only 4,3% of the respondents indicated no religious affiliation. This suggests that religion or belonging to a religious affiliation plays a prominent role in this community.

Table 7: Attendance of religious activities: Main group of respondents (N = 558)

	Frequency	Percent
Sundays & other weekdays	55	9,9
Every Sunday/Saturday	215	38,5
Often	138	24,7
2-3 times/month	58	10,4
Special occasions	10	1,8
Seldom	47	8,4
No response	32	5,7
Total	558	100,0

Table 7 indicates that most of the respondents regularly attended religious activities. The fact that more than 80% of the respondents reported that they attend church two or more times a month may indicate again that religion or the attendance of religious activities plays an important role in the community.

Table 8: Failed a grade: Main group of respondents (N = 558)

	Frequency	Percent
Yes	204	36,6
No	338	60,6
No response	16	2,9
Total	558	100,0

According to Table 8, nearly 40% of the respondents had at least once failed a grade during their school career. This may be attributed to an inadequate education system imposed by the apartheid system, which allocated the most resources to the education of white children, the second most resources to coloured children and the least resources to black children. Another explanation that may be considered is that educational achievement does not receive high priority in this community and that the failing of a grade may be considered the norm. Parents may have lower expectations of their children's academic performance.

### 3.2 Questionnaire

I developed the current questionnaire specifically for this study after (i) consulting the relevant literature and (ii) conducting extensive trials in similar communities. Since 1994, I was involved in the design, implementation and evaluation of sex education programmes in Stellenbosch schools in my capacity as Community Psychology lecturer. In order to evaluate programme effectiveness, a sex questionnaire was administered each year as a pre-test and post-test in three local secondary schools in different coloured communities. During completion of the questionnaire the programme leader noted which items were problematic for the respondents. After completion of the questionnaire the group leaders also asked for feedback about items that the respondents found difficult to answer or did not understand. During the last four years my students and I refined the questionnaire by changing items to incorporate the feedback we received from programme leaders and the programme attendees.

At first we used available knowledge, attitude and behaviour scales. The feedback indicated that the answering formats of these questionnaires often confused respondents. The terminology used in the questionnaires was not clarified on the questionnaires itself and often the respondents did not understand the terms used. Also, the available sex questionnaires for adolescents asked about masturbation, sexual intercourse and contraception, but not about other sexual acts. The behaviour section of the Sex Knowledge and Attitude Test for Adolescents (SKAT-A) designed by Lief, Fullard and Devlin (1990) was the exception in the sense that it inquired about kissing, petting, dating, sexual fantasising, reading of pornographic material, oral and anal sex. These items were included in the current questionnaire. It was, however, translated to Afrikaans and the

sentence structures were simplified. Permission was obtained to use the original questionnaire for research purposes. Items that were added were open-ended questions that inquired about respondents' terminology for sex organs and for certain sexual acts.

The questionnaire (see Appendix A) consisted of two sections. Section one focused on obtaining biographical data like age, grade, living location, living conditions, socio-economic status, religious affiliation and substance use behaviour. Additional grouping variables such as employment and living conditions were included since it seems important in sex research to identify specific subgroups that are most at risk (Wyatt, 1994). The questions in section two focused on sexual behaviour. In this section questions regarding sexual terminology were also included. The formats of questions in this section included yes/no questions, checklists and some open-ended questions.

### 3.3 Validity and reliability

Since it is a newly developed questionnaire there are no reliability and validity assessments available for the questionnaire used in this study. Although the designers of the SKAT-A have researched the reliability and validity of the knowledge and attitude sections of the SKAT-A, no information about the validity and reliability of the behaviour section could be found.

According to Catania, Gibson, Chitwood and Coates (1990) sex research in general lacks a solid validity index of self-reported sexual behaviour. Efforts to establish the validity and reliability of self-report measures of sexual behaviours among minorities are especially deserving of more serious attention from sexuality and AIDS researchers (Fullilove et al., 1990). Large measurement error undermines the validity of self-reported sexual behaviour. Because sex is typically a highly private activity, people sometimes feel intensely embarrassed or threatened when asked to reveal what they do, think, and feel during their sexual encounters. Consequently, surveys of sexual behaviour have usually been susceptible to criticisms of participation bias (Catania et al., 1990; Dockrell & Joffe, 1992). It becomes very important, therefore, to minimise measurement error (Andersen & Broffitt, 1988; Catania et al., 1990).

There is a paucity of research on the techniques used to collect information about sexual behaviour. The lack of methodological acumen is, in part, due to the fact that sex research

has been undervalued and under-funded. Consequently, AIDS-relevant sex research suffers from many of the same unresolved problems of participation bias and measurement error that have confronted research on human sexuality over the past 40 years. According to Catania et al. (1990) there are four general indices of measurement error in assessments of sexual behaviour (over- and underreporting, item refusal, and test-retest-reliability) and these are influenced by respondent, instrument, interviewer, and mode-of-data-collection variables. At present, there are insufficient data to determine which techniques minimise measurement error for a given sub-population (Catania et al., 1990).

In the following sections the four general indices of measurement error will be presented briefly. The implications of each for the current study, will also be discussed.

### 3.3.1 Over- and underreporting

Catania et al. (1990) could not find any studies that directly addressed the topic of over-reporting in the area of sexual behaviour assessment. The operating assumption is that if bias does occur in studies of sexual behaviour, it is more likely to be in a downward direction. This assumption is based on the idea that people in the United States view sexual activity as a private behaviour that one should either not be doing or not be doing much of. Without an accurate validity index, investigators will, however, continue to have difficulty determining when respondents are over or underreporting their sexual behaviour. In the current study, the only indication that could be used to gain an idea of over- and underreporting in this study was the occurrence of discrepancies between the interview respondents' interview data and their questionnaire data. The only discrepancy that was identified, was the underreporting of oral sex. The reason for this could be the negative associations that respondents attach to this behaviour. As with other sex research, however, the extent of over or underreporting could not be established in the current study without an accurate validity index.

### 3.3.2 Refusal rates

Refusal rates are the most frequently reported index of measurement error in sexuality surveys. Catania et al. (1990) reported refusal rates on self-administered questionnaires for adult samples but not for adolescent samples. The refusal rates on questionnaires in



adult samples range from 6% to 13% for items assessing the frequency of vaginal intercourse. For masturbation items, the rate varied between 6.7% to 19% and the average rate for number of sexual partners in the past year, was approximately 6%. In the current study the refusal rates for each item are indicated in the tables under the heading *no response*. The average refusal rate was approximately 10% that compares well with the refusal rates of between 6% and 19% in adult samples reported by Catania et al. (1990). Also, no one refused to complete the questionnaire and all of the questionnaires were completed in such a way that it could be used in the data analysis.

### 3.3.3 Test-retest reliability

Test-retest reliability of incidence and frequency measures has been assessed for adolescents. Test-retest correlations for incidence of intercourse and masturbation were found to be moderately high. Results for sexually active Caucasian adolescent women suggest that sexually active adolescent women can provide highly reliable estimates of the frequency of vaginal intercourse and condom use for retrospective periods of 2 months. Moreover, relative to most adults, adolescents probably have less sexual experience and fewer sexual encounters in a given period of time. Thus, the higher test-retest coefficients for adolescents relative to adults may reflect their having less information and fewer contaminating events to recall (Catania et al., 1990). For the questionnaire used in this study, there is no test-retest reliability information available.

### 3.3.4 Respondent influences on measurement errors

Respondent variables concern properties of the person that influence the task of giving information. These variables include: elements of recall (e.g. vividness and complexity of behaviour; emotions associated with sexual events); self-representation bias (e.g. the degree to which the content of questions elicit fear or approval seeking); motivational issues; and the ability to comprehend what is being asked in an interview (Catania et al., 1990). These variables will be discussed in the next sections.

#### 3.3.4.1 Elements of recall

*Vividness and personal salience:* Much of a person's sexual experience may begin to blur with time. The personal salience of a sexual encounter might be expected to have a

profound influence on recall of sexual experiences and the salience of any particular encounter may decrease considerably when the complexity of those encounters increases. That is, a person may have greater difficulty recalling occurrences of specific sexual acts if he or she has a large number of sexual partners and a large and varied sexual-behaviour repertoire (Catania et al., 1990; Dockrell & Joffe, 1992). In the current study, the respondents were young, their sexual experiences recent, their sexual repertoire limited and they indicated a limited number of partners. They, therefore, ought to have had less difficulty in recalling specific sexual acts.

*Behavioural complexity:* Recall ability may vary across sexual behaviours. An example is that less frequent acts may be estimated more accurately because they stand out as unique against the background of one's modal sexual behaviour (Catania et al., 1990; Dockrell & Joffe, 1992). In this study it was found that sexual intercourse occurred infrequently. One can therefore argue that the respondents should have been able to estimate these behaviours more accurately.

*Pattern complexity:* Studies are needed to examine how particular patterns of sexual activity influence recall ability. An example is that the monogamous person with a routine pattern of sexual activity may produce highly reliable behavioural estimates because estimates of past intervals are a simple multiplicative of some recent interval. People with more complex patterns (for example bisexual individuals engaging in different sexual behaviours with male and female partners) are likely to have more difficulty making behavioural estimates (Catania et al., 1990; Dockrell & Joffe, 1992). Test-retest data underscore the fact that adolescents and heterosexual adults report less complex sexual patterns than do gay men and therefore evidently more reliable reports (Catania et al., 1990). In the current study it was indicated that the respondents were monogamous with infrequent acts of sexual intercourse. Their patterns of sexual activity were therefore simplex and should have been easier to recall accurately.

*Emotional issues:* Strong emotions at the time of a particular encounter may enhance the salience of that event. Pleasurable and negative emotions associated with one's sexual encounters may, however, differentially influence recall. Negative or positive emotions may bias reports by colouring the person's recall of specific sexual episodes (Catania et al., 1990). In this study the interview data indicate that strong emotions were associated with the respondents' sexual encounters. First intercourse was often associated with negative

emotions. It is not certain, however, if and how this influenced the respondents' recall of events.

In conclusion, it is not known what role all of the above respondent variables have played in the current study. This is one of the reasons why the research design also contained a qualitative component.

#### 3.3.4.2 Self-presentation bias

This reflects the underlying values that a culture or specific subcultures place on revealing sexual experiences to others. Because people wish to present themselves in a positive light, self-presentation bias may lead to over- or underreporting of a particular sexual behaviour, depending on whether that behaviour has a positive or negative social value (Catania et al., 1990; Dockrell & Joffe, 1992). According to Catania et al. (1990) self-presentation bias is a critical concern, yet it is poorly understood with respect to self-reports of specific sexual activities across sex, age, sexual orientation, and cultural subgroups at risk for AIDS. It is not known which behaviour is most sensitive to presentation bias, although it has been found that heterosexual women had little difficulty reporting participation in vaginal intercourse but were hesitant to admit to anal intercourse in personal interviews. It has also been found that heterosexual respondents were more likely to refuse to answer questions about masturbation than items about coitus. It also seems that ethnic differences and sexual orientation may influence sexual self-disclosure, but the exact nature of this influence is not known. No data exists on how the coloured community views the disclosing of sexual information. The interview data in this study indicate that many respondents found it very difficult to talk about their sexual behaviour. This could, however, indicate that they would actually find it easier to simply mark an answer on a questionnaire than articulating their sexual feelings and behaviour in a face to face interview.

#### 3.3.4.3 Motivation

A person's degree of motivation to perform the role of respondent may be an important source of measurement error. Highly motivated respondents may try harder to understand and answer questions, whereas less motivated participants may skip items or give less thoughtful answers. It is not known if the relevant motives can be modified to obtain the

most advantageous conditions for collecting sexual information. No clarity exists whether factors like financial compensation for study participation, length of interview of questionnaire and order of questions increase or reduce measurement error. These have not been explored in an area of research that is likely to elicit the extremes of respondent motivation (Catania et al., 1990). In this study an attempt was made to improve respondents' motivation by clearly explaining the objectives of the research. The questionnaires prompted a high level of interest from the respondents. The feedback from the questionnaire administrators indicated that the respondents were very curious about the items and were motivated to complete the questionnaires. Again, it can be added that the refusal rate for different items averaged around 10% which compares well with the refusal rates of between 6% and 19% reported by Catania et al. (1990) for adult samples.

### 3.3.5 Instrument variables

Instrument variables include the terminology used in a questionnaire, how questions are worded, and how questions are structured. For all these variables it seems important to understand the context surrounding the sexual questions for the respondents. This means that the researcher must have an understanding of how respondents will perceive specific items. If the researcher knows, for example, that anal sex is perceived as perverse behaviour in a specific community, it is important that the researcher assures the respondents that they will not be judged for reporting "deviant" behaviour (Catania et al., 1990). In the current study, in an attempt to address this problem, the respondents were assured that the researcher did not consider specific sexual behaviour as deviant and others as not deviant. Also, they were assured about the anonymity and confidentiality of their responses.

#### 3.3.5.1 Terminology

Sexual language is diverse and always changing. An extensive mapping of sexual terminology across sub-populations is needed (Eyre, 1997). Although past research has indicated that familiar wording may decrease error, the decision to use familiar sexual terms is not clear-cut. Some respondents report feeling more comfortable with clinical terms for sexual behaviour, because they find familiar words too embarrassing. Investigators should conduct pilot studies to determine respondents' understanding and perception of sexual terms to be used (Catania et al., 1990). In this study clinical

terminology was used, because the questionnaire trials indicated that the respondents were very uncomfortable with and embarrassed about the vernacular words in print and in the interviews. Each time a clinical term was used in the questionnaire it was defined in simple language to facilitate understanding.

One can only conclude by reiterating that the reliability and validity of this study's questionnaire data is not known. The unavailability of a well-researched and appropriate sex behaviour questionnaire for the relevant community was an important factor, as well as the unavailability of a solid validity index for self-reported sexual behaviour. Everything possible was done (as indicated in the previous section) to ensure that the content of the questionnaire as well as the procedure surrounding the completion of the questionnaire would enhance valid self-reporting.

### 3.4 Procedure

It was arranged with the school that the different grade learners would complete the questionnaires when they had time available in their school schedule. Over a period of one week, times were arranged for each of the grade groups. The respondents completed the questionnaires in smaller single gender groups of approximately 25 in different classrooms in the school. The questionnaire administrators were third year and honours level psychology students who volunteered to help with the study. They had been trained by me to administer the questionnaire.

The procedure was as follows: Firstly, the administrator explained the objective of the research as set out on the first page of the questionnaire (see Appendix B). Secondly, the concepts of informed consent and anonymity were explained to the respondents. They were asked to read the consent form attached to the questionnaire (see Appendix B). It was made clear to them that they could choose not to complete the questionnaire without any negative consequences for them. They were then asked to sign the consent form if they chose to complete the questionnaire. No one refused to complete the questionnaire and no blank questionnaires were handed back. This could be interpreted as the respondents' unfamiliarity with exercising the right to refusal. In their homes and school they are used to comply with the requests of authoritarian figures. On the other hand it could also mean that they were interested in the subject of sexuality and were curious to see what the questionnaire was about. Thirdly, the respondents were assured of the

confidentiality of information. No names were written on the questionnaires. They were assured that only the researcher would see their questionnaires and that the consent forms (on which their names were written and therefore the only way to identify a specific respondent) attached to the questionnaires would be removed before the questionnaires were processed and stored in a safe place. They were also assured that the name of their community and school would not be made known in any documentation on the research. Fourthly, students were at this time asked to participate in the second stage of the study. They were told why follow-up interviews would be conducted with some of them and were asked to volunteer for this stage of the study in writing on their questionnaires. They were told that all interviewees would receive a remuneration of R20,00 for participation. They were also asked to indicate on the questionnaire how they preferred to be contacted to make arrangements for the interviews. Finally, the answering options of each of the questionnaire's sections were explained to the respondents before they completed that section. Clinical terms used in the questionnaire were also explained in simple language. The respondents were encouraged to ask if they did not understand. Some questions were asked. These questions were mostly about how some of the multi-choice questions had to be answered and how to deal with questions that did not apply to them.

### 3.5 Data analysis

The SPSS data analysis programme was used to analyse the data and to obtain frequencies and percentages. The level of analysis was mostly descriptive. In order to clarify whether significant differences existed between (i) the larger group of respondents and the sexually active group and (ii) the sexually active group and the interview respondents a two sample test of proportions using the StataQuest 4.0 programme was applied. A t-test using the StataQuest 4.0 programme was applied to determine significant differences between the above mentioned groups regarding ages of first dating, first menstruating, and first sex.

## 4. Method 2: Open-ended interviews

### 4.1 Grounded theory

The grounded theory method was used in this study. According to Annels (1997b) grounded theory is especially suited to encompass social process, social structure and

social interactions. It helps to account for social structural influences on the experiences of respondents. Based on several urgings in the literature that these factors should be taken into account when female adolescent sexuality is studied, grounded theory seemed to be indicated. In addition, Charmaz' (1990) adaptation of the method within a social constructionist perspective, fitted my personal philosophical perspectives as well as the theoretical underpinning and intended product of this inquiry. This, complemented by the clear guidelines provided by the method (in contrast with the vague guidelines provided by many other qualitative methods) compelled me to use grounded theory.

There are different variations of grounded theory applications and there are also variations at different times in the same grounded theorist's application of grounded theory (Charmaz, 1990). An example of this is that the original proponents of the grounded theory method, Glaser and Strauss, are now in disagreement about many components of grounded theory. In this study I used Charmaz' (1990) social constructionist perspective of grounded theory. This method of analysis will be briefly discussed here as it has implications for selection of respondents, data collection, the format of interviews, the selection of respondents, transcription of interviews and data analysis. In the following section the general principles and characteristics of traditional grounded theory will be briefly explained. This will be followed by a more detailed description and application of Charmaz' (1990) social constructionist perspective of grounded theory.

#### 4.1.1 Aims of traditional grounded theory

In grounded theory method, theoretical categories are derived from the data and relationships between key categories are then analysed. This means that the researcher develops theory through systematic data collection and data analysis. This differs from the traditional empirical approach where theory is developed in deductive ways from an existing grand theory without the generation of data. In grounded theory method, the researcher first attends to the lived experience from the data and this data then informs the researcher's further data collection and analysis (Charmaz, 1990; 1995; Glaser & Strauss, 1967; Strauss & Corbin, 1990). The grounded theory method aims "to build theory that is faithful to and illuminates the area under study" (Strauss & Corbin, 1990, p. 24).

#### 4.1.2 Departure point of grounded theory

Grounded theory research starts out with broad research questions. These questions can originate from literature, personal or professional experience. The questions should be flexible to allow the phenomenon to be studied in depth. In grounded theory, research questions are often focused on action and process. If research questions prove to be inappropriate during the data collection process, new questions are developed. According to Strauss and Corbin (1990) the original research question is a broad directive that leads the researcher to a certain phenomenon and certain people. As the research process progresses, however, the question will become more refined and specified. This contrasts with traditional empirical research where the researcher starts out with a set of specific hypotheses based on existing theories and where the researcher attempts to find verifications for the theoretical hypotheses. Grounded theorists do not confine the research process to predetermined hypotheses (Charmaz, 1990; 1995; Strauss & Corbin, 1990).

#### 4.1.3 Data collection and -analysis

In the grounded theory method, data collection and data analysis are not two separate and distinct phases of the research process. Instead of first collecting data and then analysing, grounded theorists use the emerging theoretical concepts and categories to shape the data collection while it is in progress. These concepts and categories are usually generated from the researcher's own discipline. Through a process of constant comparison, each set of data is compared to other sets of data in order to conceptualise what the different sets of data have in common. Similar cases with different outcomes are also compared to analyse the key difference (Glaser & Strauss, 1967; Strauss & Corbin, 1990). The common tendencies between different sets of data are organised into codes and categories. These emerging categories are used to shape the analytic processes of coding, memo-making, integrating and writing the developing theory. If recurrent themes are found in the data, it must be followed up and this can direct the research process in unforeseen directions. During "theoretical sampling" the researcher will collect new data to check and extend emerging categories (Charmaz, 1990; Rennie, 1998). Charmaz (1995) advised the researcher to delay theoretical sampling because it helps the researcher to gain an in-depth understanding of the issues and themes in the collected data. Grounded theorists first make a substantive analysis of one area and then proceed to theoretical sampling in other areas. They then use this to develop and refine their original analysis.



Charmaz (1990) used the example of the concept "identity hierarchy" in ill people and how one could explore whether this also applies to people who lose their jobs or people who immigrate.

In conclusion, traditional grounded theory results in the generation of theoretical categories. It does not produce statistically verified results, which require random sampling of a specific population. Grounded theory aims to develop a theory that will synthesise, explain and interpret the data. The purpose of grounded theory is to specify conditions that precede behaviour and the consequences of that behaviour. In the words of Charmaz (1990): "The rigor of the grounded theory method depends upon developing the range of relevant conceptual categories, saturating (i.e. filling, supporting, and providing repeated evidence for) those categories, and explaining the data" (p. 1163).

#### 4.2 Social constructionist grounded theory

One of the major criticisms directed at grounded theory, is its positivistic tendency. According to Glaser and Strauss' (as cited in Charmaz, 1990) early descriptions of grounded theory, grounded theory offers a method which will allow concepts, hypotheses and issues to emerge from the data. This implies that the method can be divorced from the researcher, that the researcher does not shape and define the method. According to Charmaz (1990), Glaser and Strauss "come close to positing an external reality, unaltered by the observer's presence" (p. 1164). These authors' recent writings, however, highlight that the researcher does shape and determine the categories and concepts that are used in the implementation of the method (Charmaz, 1990). Annels (1997b) found evidence in Strauss and Corbin's writings that they lean towards the constructivist paradigm of inquiry. According to Rennie (1998), neither of the two, however, admits or commits to a postmodernist position in the positivist-postmodernist debate.

Charmaz (1990) proposed a social constructionist informed grounded theory. According to this perspective the researcher is seen as co-constructing the responses of the respondents. The researcher actively creates the research questions and shapes the research process and the interpretations of the data. The researcher's discipline, own experiences, values and priorities determine research questions and also determine which categories and themes in the data will be focused on. The researcher's discipline provides concepts for the categories that will be identified in the data. It is important, however, that

these concepts stay sensitising concepts that will help the researcher to initially categorise the data. These concepts thus must provide an initial base on which the researcher needs to build and expand. The researcher must be acutely aware of the categories that she brings to the research. She must also be careful not to simply categorise the data into pre-existing concepts. A social constructionist perspective will lead the researcher to create categories of the respondents' beliefs and actions and to try and stay as close as possible to how the respondents make meaning of their lived experience. In this process new meanings will be added to familiar concepts in a specific discipline. The social constructionist wants to know how and why people experience, think feel and behave the way they do (Charmaz, 1990).

Charmaz (1990; 1995) proposed that the social constructionist researcher using grounded theory must stay true to three components of grounded theory. Firstly, they must use the data as a departure point. Secondly, their developing theory must be based on their interpretations of the data. Thirdly, they must compare their theory with existing literature and theory. Charmaz (1990) suggested several steps to use grounded theory within a social constructionist perspective. In the following sections, these steps and how it has been implemented in this study will be described. It must be noted that this description complies with the guidelines recommended to qualitative researchers and grounded theory researchers that they ought to present a clear description of the research process to provide a basis for evaluating the trustworthiness of the research. Although a description of the respondents, interview procedure and interviewers do not form part of Charmaz' (1990) steps, it is included in the following section.

#### 4.2.1 Research questions

Grounded theorists begin with a set of experiences they want to investigate. In this study, the research question was: How do young girls experience and understand their sexuality? The origin of this question is discussed in section 4.4.2.1 and the development and alteration of the interview questions are discussed in section 4.2.4 of this chapter. The broad research question led to the formulation of interview questions that focused on the respondents' experience and understanding of their sexuality.

## 4.2.2 Respondents

When the girls completed the questionnaires during the first phase of the study, they were asked to volunteer for interviews. If they were willing to participate they were asked to give their names and contact details. Inclusion criteria for interviews were that (i) the girls had indicated that they had had sexual intercourse; (ii) they volunteered for interviews and (iii) they provided contact details. (The reasoning behind making sexual intercourse an inclusion criterion was that I assumed that those girls would have a broader experience of sexuality that also included dating, kissing and petting.) The consent forms were attached to the questionnaires. Those respondents who indicated on the questionnaire that they had experience of sexual intercourse and who also indicated on the attached consent form that they would consider granting interviews, were separated from the larger group. Eighty out of the 558 questionnaire respondents indicated that they had sexual intercourse. Thirty-six of these 80 girls, volunteered for interviews. Thirty-two of the 36 girls were contacted. The other four girls' addresses were either incomplete or they had moved. Of the 32 girls who were contacted, twenty-five consented to participate in the interviews. The seven girls who declined participation either said that they had changed their mind about volunteering while others simply did not arrive for their interviews. The biographical data of the interview respondents (Appendix A: items 1, 2, 3, 8, 9, 15, 16, 17, 18, 19, 21, 25, 28, 29, 30, 32, en 33) was compared (i) with the main group of questionnaire respondents and (ii) with the rest of the sexually active girls to determine any significant differences between the subgroups. A two-sample test of proportions using the StataQuest 4.0 programme was implemented. The following differences were found.

### 4.2.2.1 Differences between main group respondents and interview respondents.

The interview respondents were on average approximately one year older ( $M = 16,36$ ,  $SD = 1,186$ ) than the main group respondents ( $M = 15,17$ ,  $SD = 1,56$ ) ( $t(477) = -3,75$ ,  $p = 0,0002$ ). More (92%) of the interview respondents lived in town, compared to 73% of the main group respondents who lived in town ( $z = -2,08$ ,  $p = 0,0374$ ). A larger proportion (36,4%) of the fathers of the main group respondents did unschooled work, in comparison with 8% of the fathers of the interview respondents ( $z = 2,32$ ,  $p = 0,0201$ ). More (52%) of the interview respondents' fathers did schooled work in comparison with 23% of the fathers of the main group respondents ( $z = -2,64$ ,  $p = 0,0084$ ). The interview respondents therefore were of a higher socio-economic grouping than the main group respondents.

More of the interview respondents (68%) smoked, compared to 21% of the main group respondents ( $z = -5.48$ ,  $p = 0,0000$ ). More of the interview respondents (56%) also reported that they used alcohol in comparison with 27% of the main group respondents ( $z = -3,15$ ,  $p = 0,0016$ ). Lastly, more of the interview respondents (68%) reported that they had failed a grade in comparison with 36% of the main group respondents ( $z = -3,11$ ,  $p = 0,0019$ ).

In conclusion, when compared to the main group respondents, the interview respondents were older, living in town, of higher socio-economic status and exhibited more potentially harmful behaviours like smoking, drinking and failing a grade. It seems that these respondents were more inclined to risk-taking behaviours than the main group respondents. These findings concur with the findings in other populations when sexually active respondents were compared with sexually inactive respondents (Nielsen, 1996).

#### 4.2.2.2 Differences between larger sexually active group and interview respondents

Twenty-five of the 80 girls who reported that they were sexually active were eventually interviewed. It is important to reflect the possibility that the interviewed group represents a group of sexually active girls with very specific characteristics. In order to establish whether the interview respondents were different from the other sexually active respondents, the biographical data of these two groups were compared. One significant difference was found. More of the interview respondents (68%) had failed a grade in comparison with 40% of the larger sexually active group that had failed a grade ( $z = -3,09$ ,  $p = 0,0020$ ). This difference is difficult to explain. One could speculate that perhaps it reflects that these girls cared less about their social reputations or as a consequence of having failed a grade have learned to care less about their social image. They, therefore, did not stand to lose much if people found out that they participated in interviews about sexuality and they gained a financial reward for participating in the interviews. The interview data supports the hypothesis that the money reward was an important incentive to participate in the interviews. This finding can also imply that this is a selected group of sexually active girls that feel less in control and therefore have less agency (as described in chapter 7). Other hypotheses are that they may have had more need to talk to someone or were more independent than the non-volunteers.

The age distribution of the 25 interview respondents and the employment status of their parents are presented below.

Table 9: Age distribution: Interview respondents (N = 25)

Age	Frequency	Percent
14	1	4,0
15	5	20,0
16	8	32,0
17	7	28,0
18	3	12,0
19	1	4,0
Total	25	100,0

Table 9 shows that most of the interview respondents were between 15 and 17 years of age.

Table 10: Parents' employment status: Interview respondents (N = 25)

	Fathers (%)	Mothers (%)
Unemployed	4	4
Unschooling work	8	24
Schooling work	52	20
Tertiary education	0	12
Housewife	0	20
No response	36	20
Total	100	100

Table 10 indicates that most of the interview respondents' mothers did either unschooled work, schooled work or were housewives. The interview data established that the eight unschooled mothers worked as chars. The schooled work entailed being shop assistants and doing basic administrative work. Those mothers who received tertiary education worked as teachers and nursing sisters and had college training. Based on the mothers' employment status, it can be claimed that this group presents a heterogeneous socio-economic group. The no response rate of 20% can be explained by the fact that five of the girls did not live with their mothers and may not have had information about their employment.

According to table 10 most of the fathers did schooled work. The schooled work mostly entailed working as artisans. The fact that 36% of the respondents did not respond to this question can be explained by the fact that nine girls did not live with their fathers or did not know their fathers or had no contact with their fathers. They, therefore, could not provide information on their fathers' employment. The unemployment percentage is very low. Based on both parents' employment status it seems that most of these girls are from a working class background. Severe economic deprivation seems to be the exception.

#### 4.2.3 Theoretical sampling

Theoretical sampling refers to collecting more data to clarify one's initial categories and to see how they fit together. This means that one selects certain respondents or material that one thinks will be helpful to clarify one's initial categories (Charmaz, 1990; Corbin & Strauss, 1990). In this study interview respondents could not be selected since a limited number of participants volunteered for interviews. Sampling therefore did not take place. After the initial interviews the interviewers proceeded to interview the remaining volunteers.

#### 4.2.4 Interview questions

Rich, vivid and detailed data have to be collected in order to use grounded theory constructively. The interviewer is not interested in a true version of events, but rather in the themes and issues in a respondent's account of events (Charmaz, 1990; Orona, 1990). In the first five interviews, respondents were asked to narrate their first and last sexual intercourse experience. The interviewer used these narratives as a basis to explore

contraception, sexual pleasure, gender power relations and masturbation. These were guiding interests and functioned as points of departure. According to Charmaz (1990; 1995) the researcher must take care that these interests provide one with points of departure for developing and not limiting one's ideas about the data. Indeed, in this study these guiding interests did not automatically become categories for organising the data.

The interview questions (see Appendix C) were formulated as open-ended as possible. Most of the questions directed at the respondents asked them to describe an event or their feelings and perceptions during an event, instead of asking them directly why they had sex the first time. The reasons for this interview format were firstly to elicit rich and detailed data in the respondent's own voice and not to force the interviews into a preconceived direction. Secondly, I argued that young coloured adolescent girls might perceive a white female academic in an academic building as an intimidating, authoritarian figure that may be morally judgmental. It was conceivable that they might adjust their representations to fit this perception. I thought that narrating a story would be less threatening and also less susceptible to socially correct representations on the respondents' part.

After the first five interviews were listened to, transcribed and coded, the interview questions and format were changed. It was clear that the first questions about what words the respondents used for sex; what they understood the terms to mean and to tell about their most recent sexual intercourse were too direct and threatening. It was decided to rather ask the respondents to narrate the story of their heterosexual history and to see if these questions were answered indirectly during the respondents' narration. We began by asking respondents about the first male they were romantically interested in, what happened with this boy and then followed it through up to their current relationship and sexual activity. This format worked well and provided the interviewer with a basis to ask clarifying questions about contraception, gender relations, sexual pleasure and masturbation. Following grounded theory principles, one aspect of the interview format was changed after the first five interviews. This change was to explore more specifically the girls' sexuality in relation with their mothers.

#### 4.2.5 Procedure

The volunteers for the second stage of the study were recruited during the first stage of the study (see 3.4 above). Once respondents were selected according to the selection criteria

(see 4.2.2 above), volunteers were contacted to be interviewed. The volunteers indicated that they felt more comfortable when they could be part of a group coming for the interviews. It was therefore arranged that at least two girls were picked up at the same time and transported in the same vehicle. Most of the girls were very apprehensive about the interviews and the impression was (as mentioned in 4.2.2) that the R20,00 offered was, in many cases, the main incentive for participation in the interviews. Others indicated that they wanted the opportunity to talk and gain advice about personal issues in their lives.

The respondents were transported from their homes to my office at the University of Stellenbosch to provide a private and confidential environment for the interviews. Most of the interviews took place directly after school. After reviewing the first interviews, the interviewers realised that the respondents were often hungry and thirsty and that food and drinks had to be offered. From then on when they were collected, the respondents were asked if they wanted something to drink and eat. If they indicated yes, they were offered a hamburger and soft drink from a take-away restaurant en route to the interview venue. The interviewers chatted with them informally while they ate. This appeared to make the respondents more comfortable.

The interviews were conducted in small interview rooms. The purpose of the interviews was explained and it was emphasised that the respondents could refuse the interview or refuse to answer any particular question. Respondents were assured of their anonymity. No identification of the subject, except her first name, was made on the audio-tape of the interview. The respondents were also assured that the names of the specific community and school would not be given in any documentation on this research. The interviews were audio-taped. The issue of confidentiality and the interviewer's duty to report abuse of the respondent was discussed. The respondent was asked to read through the consent form (see Appendix D) in her own time to make sure that she understood what she was giving consent for. None of the respondents raised any queries or doubts about the consent forms. My impression was that these girls were so used to authority figures dictating their lives and that they perceived themselves to have so little agency, that the whole process surrounding informed consent was devoid of the intended meaning. They did not have a mindset that they could and should protect themselves. A less morally and ethically conscious researcher may easily abuse this situation. At this stage, the first awareness of the lack of agency in the respondents' lives was raised in the researcher's mind.



The duration of the interviews varied between one hour and two hours. The interviews were audio-taped. After the completion of the interview, contraceptive counselling was given to those respondents who either demonstrated inadequate contraceptive information or practices. The girls were also urged to obtain more extensive contraceptive counselling from a clinic in the centre of town, since they were often afraid to visit the clinic in their own community.

#### 4.2.6 Interviewers

According to Charmaz' (1990) social constructionist informed grounded theory the interviewers are viewed as co-constructors of the respondents' responses. It is therefore important to acknowledge this role and to attempt to elucidate the interviewers' roles.

Reissman (1987) argued that gender congruence between interviewer and interviewee is not sufficient to ensure reliable and valid data. Cultural differences between interviewer and interviewee can result in misunderstandings by the interviewer. In this study I conducted the initial five interviews and 10 of the later interviews. Two research assistants conducted 10 of the interviews. I am a white, middle-class woman in my thirties and the research assistants were two young, female, white, middle-class postgraduate Psychology students. The interviewers were therefore not of the same cultural and socio-economic grouping as the participants in the research. I am, however, a registered clinical psychologist and have been a psychotherapist for eight years. I have also been involved with community work in these communities during the last five years. I am therefore experienced with cross-cultural interviewing and interventions. These qualities/skills meant that I was very aware of the potential problems of cross-cultural research - both during interviewing and during analysis. Literature on effective cross-cultural counselling and psychotherapy indeed indicates that a culturally aware and skilled therapist can overcome some cultural barriers (Hickson & Christie, 1989; Ibrahim, 1985). My personal experience during a pilot study also strongly indicated that cultural congruence does not compensate for lack of interviewer skills and experience. During the research process I consulted with people who are from similar socio-economic and cultural groups as the respondents. These consultations during all the stages of research facilitated ongoing cross-cultural sensitivity.

The research assistants were selected based on their excellent interpersonal skills, open-mindedness, and ease with the subject of sex and sexuality. They were trained in interviewing skills by extensive role-playing and listening to other interviews. Their first interviews were carefully reviewed and they received in-depth feedback. They proved to be effective interviewers who allowed the respondents to talk without attempting to structure the interviews too much.

To prevent misunderstandings in meanings because of cultural differences, all the interviewers adopted the attitude that nothing must be assumed, but that clarification should rather be asked. The interviewers specifically always asked for clarification on unfamiliar words and terms used. The respondents used many vernacular terms for relationship dynamics and sexual behaviour and therefore clarifications were often necessary. This facilitated the flow of the interviews, because it made possible a more equal position between interviewer and interviewee. The interviewee became the "expert".

One might ask, however, if the interview data would have differed significantly if there were cultural congruence between the interviewers and respondents. Unquestionably, the answer is affirmative in the sense that each different set of interviewer and respondent combine in a unique interaction and the respondent's narrative is a product of that unique interaction. In this case the way in which the narratives were told may have been different. I do not think, however, that the gist of the narratives (what they experienced sexually and how they experienced it) would have been different. I think the content and process of the interviews were so novel to the respondents and they struggled so much to find words to convey their meanings that it would have been extremely difficult for them to consciously distort their versions. Nevertheless, one must conclude that these narratives were responses to the questions of white interviewers in an academic setting about "forbidden" experiences. The interview data can therefore only be seen as one version of the respondent's sexual experience as told to a white interviewer. The researcher does not and cannot make claims of accuracy or absolute truth. But this "limitation" is true for all narrative versions, since every narrative is a response to a specific listener and audience and every narrative therefore is adjusted to suit the audience (Bruner, 1987; Richardson, 1990; Riessman, 1993). This issue is clarified further in 4.4.1 in this chapter.

#### 4.2.7 Transcription of interviews

The general guideline in grounded theory method is that the researcher should transcribe all the interview data during the early stages of the research process. Later on when one is clearer about a specific focus, only those parts of an interview that relate to one's evolving theory can be transcribed (Strauss & Corbin, 1990). Orona (1990) and Charmaz (1990) advised that the researcher herself should conduct the interviews as well as transcribe the interviews in order to engage with the data from the beginning. In the current study, each interviewer transcribed verbatim the interviews that she conducted. This was the most practical route, since the interviewers were in the position to elucidate non-verbal communication like silences, tone of voice or laughter. In addition, the interviewers were able to shed light on inaudible parts or words.

#### 4.2.8 Coding and categorising data

Several grounded theorists highlight the importance of line by line coding. This entails reading the transcribed interviews word for word and giving each line an appropriate code (Strauss & Corbin, 1990; Charmaz, 1990; Orona, 1990). In this study line-by-line coding was done for the first ten interviews. As recommended by Charmaz (1990), processes, actions and consequences rather than topics were coded. The following codes were eventually focused on:

- girls' experience of sex;
- boyfriends directing sexual intercourse;
- boyfriends dictating contraception;
- mothers warning daughters about sex;
- mothers and daughters pretending sexual innocence;
- presence and absence of sexual pleasure; and
- perceptions and use of contraceptives.

These initial codes shaped the subsequent interviews. In the following interviews these themes were explored in more detail to see whether they were appropriate. These codes were also used when the second stage interviews were analysed by employing focused coding.

Focused coding is more selective, directed and conceptual than open coding. It means that the researcher has decided which of the initial codes are more appropriate to capture the data (Charmaz, 1990). The useful codes that were identified after the focused coding phase were:

- girls' experience of sex;
- secrets and silences about sex between mothers and daughters;
- mothers' moral discourse about sex;
- girls needing boyfriends;
- girls reacting to boyfriend's sexual needs;
- boyfriends determining contraceptive behaviour;
- limited sexual pleasure; and
- lack of language to describe sexual experience.

These codes were compared with each other and the common thread between them led me to the category "sexual agency". In the final ten interviews these categories were explored and tested to determine whether they were appropriate concepts. Raising a term to a concept means that the term must be defined and analysed. A conceptual category is more abstract than a code and forms part of the researcher's larger theoretical framework. The researcher must do the following when raising a term to a conceptual category: specify its properties; describe the conditions under which it arises; explain how it changes; describe its consequences and specify its relationship to the other conceptual categories (Charmaz, 1990; 1995).

#### 4.2.9 Memo-writing

Memo-writing can help the researcher to elaborate processes, assumptions and actions that are included in her codes. It entails looking carefully at categories and identifying underlying components. It should help one to flesh out and explore categories (Charmaz, 1990; 1995; Orona, 1990). It can also serve as a sounding board that anchors one from the start of the analysis process. In this study, memo-writing was done after the initial coding of the first interviews and continued till the final dissertation was written. It served as a mechanism to contain my ideas about the emerging categories.

#### 4.2.10 The core category

The central phenomenon of the study is represented in the core category. The core category may emerge from the already identified categories or a more abstract term may explain the main phenomena. The other categories will be conditions, actions/interactional strategies or consequences of the core category (Corbin & Strauss, 1990). In this analysis sexual agency or lack thereof, and need for connection emerged as the core categories. All the other identified categories are sub-components of these core categories.

#### 4.2.11 Writing up the analysis

Charmaz (1990; 1995) advised that the researcher should provide enough raw data in the text to illustrate the connection between the data and the analysis. More attention, however, should be given to the concepts that the researcher identified in the data. In the written analysis the researcher should make her theoretical relationships explicit. The verbatim material is only used when it highlights these theoretical relationships. Charmaz (1990) preferred to provide many quotes from interviews to “keep the human story in the forefront of the reader’s mind” (p.47). After the development of one’s conceptual analysis of the data, the researcher should consult the relevant literature and compare how the analysis fits in with it. In the grounded theory analysis that follows in the next chapter, the focus will be on the concept of sexual agency and how the smaller categories are related to this concept. Verbatim material will be used to illustrate points made. Relevant literature will also be referred to and the analysis will be compared with it.

#### 4.3 Critique of grounded theory:

As indicated in 4.2 the most important point of criticism from a postmodernist perspective against grounded theory is that the method has positivist and neo-positivist leanings (Annels, 1997a; Charmaz, 1990; Lonkila, 1996). Postmodernism rejects traditional approaches to theory and theory-building, which grounded theory seems to enhance. Strauss and Corbin (as cited in Annels, 1997a) insisted, however, that the conceptual relationships proposed within a grounded theory must be seen as a discursive form. Theories developed from the grounded theory method present an understanding that is very specific and very limited and cannot be generalised. Postmodernists agree with this view of theory as localised and limited constructions (Annels, 1997b). Charmaz’ (1990)

adaptation of the grounded theory method within a social constructionist perspective addresses this point of criticism satisfactorily.

A second point of criticism that also relates to the issue of theory, is the assumption that the purpose of grounded theory is to provide a theory that explains data. Charmaz (1990) posited that most grounded theory work does not constitute theory. According to Charmaz (1990) most grounded theory researchers have developed conceptual analyses of lived experiences instead of creating substantive theory. She concluded: "Thus, these grounded theorists have given greater emphasis to developing analytic categories that synthesise and explicate processes in the worlds they study rather than to constructing tightly framed theories that generate hypotheses and make explicit predictions" (p.48). She argued, however, that grounded theory methods do provide the tools for theory development and offer psychologists the means for revisioning psychological theory. A possible reason for this deficiency in many published grounded theory research, lies in the fact that grounded theory entails a very lengthy process. The ideal of theoretical or interpretative saturation ensures that the length of the process of data collection cannot be predicted beforehand. It may also take many months to refine the theory around the core category (Annels, 1997b). Since many researchers work with time constraints, it is possible that studies are published before the point of interpretative saturation. In that respect many studies may reflect only the first part of the theory developing process. The current study did attempt to develop theory and was not limited to the development of analytic concepts.

#### 4.4 Assessing qualitative research

Proponents of quantitative research often question the validity and reliability of qualitative research findings. Mishler (1986) stated that there are other ways than so-called scientific objective methods to approach the issues of validity and reliability.

##### 4.4.1 The issue of reliability: Is the analysis an "accurate" version of respondents' experiences?

Traditionally, reliability is defined as the extent to which a measuring instrument obtains the same approximate results when implemented repeatedly under similar conditions (Banister, Burman, Parker, Taylor & Tindall, 1995). According to Banister et al. (1995) the concept of reliability is not appropriate in qualitative research since qualitative research is

based on the assumption that knowledge is constructed and is a representation rather than a reproduction. In qualitative research, replication of findings is focused on reinterpreting findings from different viewpoints or exploring the same issues in different contexts, rather than requiring consistency of accounts.

Reliability as it is understood in the traditional sense is also not a criterion that one can apply to interview data (Bruner, 1987; Richardson, 1990). Riessman (1993) argued that the qualitative analyst recognises that she has to rely on representations of respondents' experiences (e.g. talk and interaction), because she does not have direct access to these experiences. She cannot give voice to the respondents. She can only hear, record and interpret respondents' representations. According to Riessman (1993) there are at least five levels of representation in the analysis process:

- level 1 = attending to experience
- level 2 = telling about experience
- level 3 = transcribing experience
- level 4 = analysing experience
- level 5 = reading experience

At each of these levels the representation of the experience is altered. Firstly, the person experiencing a certain experience does not attend to, reflect on or remember the whole experience. Secondly, when a person tells about an experience that experience is altered simply by translating it into the limited representational capacity of words and by telling it to a specific audience who will influence the teller's representation of the experience. Respondents will not always tell everything, but will often exclude parts that contrast with the kind of person they want to present to the interviewer. A respondent's narrative of one event may also differ from one time to another or from one telling context to another. Thirdly, when a narrative is transcribed into written text, another selection is made of what is represented and what not – this time by the researcher. Fourthly, the analyst selects those aspects of the narrative that will be interpreted and adds her own interpretations. Fifthly, the reader reading the final written report constructs her own meaning of that report. Each representation of an experience is therefore a limited portrayal of that experience. Every time an experience is translated into language, a new interpretation and text is created. Meaning is ambiguous because it is a result of an interactional process between people: self, narrator, listener, transcriber, analyst and reader. Meaning is not

fixed, but changeable and dependent on the context. In the end the researcher creates her own narrative about her respondents' narratives. All versions of an experience are therefore a partial, selective and imperfect portrayal of the original experience. There can therefore be no true representation of experiences. All representations are dependent on the language, culture and broader social context of the researcher. This means that all social scientific knowledge is socially constructed.

#### 4.4.2 Validity versus processes of validation

Mishler (1986, 1990) referred to processes of validation rather than validity and associates the concept of validity with trustworthiness and not truth. This means that the question of validity does not refer to whether the findings of a study reflect the real, static, unchanging objective reality out there, but how clear, credible and trustworthy the findings of a particular study are. This can be achieved (i) by detailing and documenting the research process so that the process can be scrutinised by other researchers; (ii) to check theoretical assumptions by explicating the relationship of findings to the data; (iii) by linking the findings to other work of a similar nature; (iv) reflexivity; and (v) triangulation (Riessman, 1993; Strebel, 1993).

According to Strauss and Corbin (1990), grounded theory research does not rely so much on the researcher's intuition and skill as is the case in many other qualitative methods, but provides specific guidelines which will guide the researcher to helpful conceptualisations of the generated data. The quality of the theory is dependent on the process of development, instead of the traditional empirical criterion that the quality of a theory is dependent on its ability to explain new data (Strauss & Corbin, 1990). Corbin and Strauss (1990) stated that the grounded theory researcher must provide enough information about each of the phases of research described above so that the adequacy of the research can be judged. They argue that "if key components of the research process are clearly laid out and if sufficient cues are provided, then the theory or theoretical formulations can be assessed in terms of degrees of plausibility. We can judge under what conditions the theory might fit with 'reality', convey understanding and prove useful in practical and theoretical terms" (p.20).

In the current study, I adhered to these trustworthiness guidelines by detailing the research process in this chapter. In chapter 7, I also attempted to explicate the relationship of my



interpretations to the data and linked my findings to other relevant findings and literature. The other methods of validation that were employed, namely reflexivity and triangulation, will be discussed below.

#### 4.4.2.1 Reflexivity

Reflexivity refers to the acknowledgement of the central position of the researcher in the construction of knowledge. It acknowledges that all findings are constructions and are open to change and multiple interpretations. The concept *personal reflexivity* demands that the researcher acknowledges and reveals who she is and how her personal interests and values influenced the research process from beginning to end. *Functional reflexivity* demands that the researcher continually evaluates the research process to reveal how she directed and shaped the research process (Banister et al., 1995). I will attempt to satisfy these demands in the following section.

I am a 35-year old, white, Afrikaans-speaking, middle-class, single mother university lecturer and also have a part-time clinical psychology practice. I grew up on a farm near a medium-sized town in the Swartland, Western Cape. I had a Calvinistic religious and Christian-national school education. Self-responsibility and hard work were instilled as important values. As a child I accepted as "natural" the division that the apartheid policy imposed. I did not know any black people and the coloured people I knew were labourers on our farm. I attended two Afrikaans universities in the 1980's. The training epistemology was positivist and the staff mostly male. In my formal training I was never exposed to any postmodernist or feminist thought. The only academic training in sexuality that I received was a course on behavioural approaches to the treatment of sexual disorders. It was only approximately two years ago that I began to explore the postmodernist and feminist literature on sex and sexuality.

As a young student I was fascinated with the secrecy, privacy and novelty surrounding the idea of sex therapy (probably a legacy of my Calvinistic upbringing!). I thought it would be very glamorous to be a sex therapist. However, I never actively pursued this interest. I trained as a family and couple therapist using a systems and interactional model. Over the past few years my part-time practice evolved in such a way that I mostly treated adult women between the ages of 25 and 40. Typically, they present with problems in their intimate relationships. In this process I became aware of the significance of a woman's

definition of her own femininity and sexuality and how this impacts on intimate relationships. During this time I also became responsible for the under- and postgraduate courses in Community Psychology. At first the practical work in these courses entailed large need assessment surveys in the primary and secondary schools in the disadvantaged Stellenbosch-areas. Sex education programmes were requested repeatedly from teachers and learners alike. I responded to this request by organising students to implement and assess available sex education programmes as part of their practical work. The evaluation indicated that although the learners enjoyed the programmes and their knowledge and attitudes improved significantly, their behaviour did not change. I realised then that an understanding of the sexuality of young people in the coloured community was necessary if one was to provide effective sex education programmes. I chose to focus on young women, since it combined with my interest in female sexuality and its impact on female development that have already formed in my part-time practice.

The social constructionist approach posits that all of these personal factors (and all the others that I have not mentioned) play an important role in my contribution as a co-creator of the interviews and as interpreter of the interviews. I cannot deny that the personal psychodynamic factor that has played an important role in the research process and the eventual interpretation of the data, is my personal emphasis on and belief in the importance of taking responsibility for one's own life. It is therefore not a surprise to me that I ended up with sexual agency as a core category and it would have been interesting to see what a different researcher would have concluded with the same study. To explore and unravel the other factors that may have been pertinent in my role as co-creator would probably demand another dissertation of its own. The overview above will therefore have to suffice. Although I will comment on this from time to time, the reader should make her/his own conclusions about my role as co-creator.

#### 4.4.2.2 Triangulation

Triangulation refers to the use of various vantage points in the research process. It allows for flexibility and a diversity of experience. Triangulation may include employing a combination of methods, investigators and theories (Banister et al., 1995).

(i) Method triangulation

Method triangulation refers to the use of different methods to collect information. Since each method has limitations, a combination of appropriate methods may address the limitation of any one method. As already explained earlier in section 2 of this chapter, this study combined a quantitative and qualitative method.

(ii) Investigator triangulation

Investigator triangulation entails the use of more than one investigator. It is preferable that they come from different disciplines or perspectives or adopt different roles. The idea is to obtain multiple viewpoints to enrich the developing theory (Banister et al., 1995). In the current study, I discussed the interview material with my supervisor who is also a clinical psychologist. She was trained as a psychodynamic therapist, with her theoretical focus being feminist object-relations. Also, although I did not have the time to feed back my analysis to the respondents, I did discuss my results and analysis with two adult members of the researched community to obtain their interpretation of some aspects of the interview material.

(iii) Theoretical triangulation

Theoretical triangulation refers to the utilisation of multiple theoretical explanations in a research project (Banister et al., 1995). Social constructionism also advocates the use of multi-theories. In this study, different theories were used. In chapter 3, different theories for understanding female adolescent sexuality were discussed and in chapter 7, it is shown that these theories contributed to my understanding of the current study's data.

In conclusion, it is clear that a qualitative study cannot present the reader with guarantees for traditional validity of results in the same way that a quantitative study can. Other processes of validation can, however, be employed as indicated above. Furthermore, the researcher can only elucidate her research process and leave it up to the informed reader to deliver judgement on the trustworthiness of the research.

## 5. Ethical responsibilities

Ethical issues are pertinent in sex research for many reasons. People may feel that their privacy is invaded. People may also think that they can be confronted about or punished for "wrong" behaviour. The University of Stellenbosch's ethical guidelines require that where people or their behaviour is the focus of research, "their right to decent treatment should be respected and in particular their right to privacy, their right to confidentiality of personal information, their right to informed consent and their right to the minimisation of risks to which people could be exposed in the research process" (University of Stellenbosch, 1998). Informed consent was obtained from respondents (see Appendix B and D). In these informed consent forms the following issues were highlighted:

- the goal of the research;
- explanation of the two stages of research and what each stage will entail for the respondent;
- confidentiality and specific measures to ensure confidentiality during all stages of the research (from data collection to dissemination of information);
- limits to confidentiality and the duty to report;
- respondent's right to discontinue participation at any stage of the research for any reason;
- the availability of resources (telephone numbers of counselling services) should respondents become aware of personal problems during any stage of the research; and
- credentials of the researcher/interviewer.

Although the South African Constitution does not require parental permission for conducting this kind of research with minors, ways of informing parents about the research will be discussed with teachers involved in the sex education programmes.

It is conceivable that asking people about their sexual behaviour may make them aware of personal problems in this regard, for example past rape, sexual abuse or relationship problems. Contact telephone numbers of counselling services were therefore given to all the respondents to account for this possibility. During the interviewing phase, one of the respondents reported emotional discomfort with a recent abortion. She was referred to the local abortion counselling facility. Two other interview respondents wanted help with family

problems. They were referred to the counselling services available at the local hospital. Approximately six months after the completion of the quantitative data gathering phase, one of the questionnaire respondents telephoned me to request an appointment with me. The appointment revealed that the girl was very worried about an overdue menstruation period. I accompanied her to a local pharmacy for a pregnancy test (the local municipal health centre was out of pregnancy test kits and could not assist). The nursing sister confirmed that she was pregnant. I made an appointment for the girl with the social worker responsible for abortion counselling at the local hospital so that she could receive counselling on her available options.

Before this study was conducted, the Ethics Committee of the University of Stellenbosch had to approve the study. A family law expert, Dr. Sonja Human, was also consulted about possible legal and constitutional problems.

It must also be stressed that it is hoped that this research will be of benefit to the community, since further reproductive health programmes can be designed based on this information. It can therefore be argued that the benefits of the research outweigh the possible discomfort experienced by young girls when asked about their sexuality. My personal experience was that although initially apprehensive, the respondents welcomed the opportunity to talk about their sexuality. In their lives, they lack the opportunity and interactional space to talk about this aspect of their lives. In many of the interviews we conducted, we felt compelled to advise the respondents to take more effective contraceptive measures and to confront the popular belief that withdrawal before ejaculation is a reliable contraceptive method. For most of the girls, it was the first time in their lives that they received such direct and informative contraceptive counselling. In this regard, the interviewers felt that the study contributed meaningfully to the 25 interview respondents' lives.

In this chapter the research method was explained. In the next chapter the quantitative data will be presented.

## CHAPTER 6

### QUANTITATIVE RESULTS

In this chapter the questionnaire results will be presented and discussed. These results are organised under the following headings: range of sexual behaviour; communication about sex; sexual coercion and abuse; and high-risk behaviour.

#### 1. Range of sexual behaviours

Table 11: Age at first date: Main group of respondents ( $N = 558$ )

Age	Frequency	Percent
6	2	0,4
8	2	0,4
9	2	0,4
10	5	1,1
11	11	2,0
12	67	12,0
13	99	17,7
14	98	17,6
15	75	13,4
16	37	6,6
17	9	1,6
18	3	0,5
No response	147	26,3
Total	558	100,0

Table 11 indicates that first dating usually occurred between 12 and 15 years of age. The average age for first dating was 13,7. This finding concurs with the average age of 13 and 14 years that have been reported for American adolescent girls by Hyde and DeLamater (1997) and De Anda (1983). A relatively high number of girls (26,3%) did not answer this question. This high number may include girls who have never dated. It is also possible that dating is not a familiar concept.

Table 12: Age of menarche: Main group of respondents ( $N = 558$ )

Years	Frequency	Percent
9	3	0,5
10	11	2,0
11	38	6,8
12	119	21,3
13	110	19,7
14	64	11,5
15	24	4,3
16	13	2,3
17	1	0,2
No response	175	31,4
Total	558	100,0

Table 12 indicates that most of the respondents experienced menarche at the age of 12 (21,3%), 13 (19,7%) and 14 (11,5%). The average age of menarche was 12,79. This finding does not concur with the finding that the average age of menarche for South African girls is between the age of 13 and 15, but corresponds with the average age of menarche of American and European girls which is between 12 and 13. This lower average age can be attributed to better socio-economic conditions in this community (Thom et al, 1998). Thirty-one percent of the respondents did not answer this question. This can partly be explained by the fact that some of the 13-year-olds in this study had not

started menstruation at the time of the study. The other possibility is that some of the respondents did not understand what the term menstruation meant. This was the one term that was not explained on the questionnaire. It was assumed that it would be understood. The interview data indicated however that this term was not understood or used when referring to menstruation.

Table 13: Kissing and petting: Main group of respondents ( $N = 558$ )

	Kissing	Petting
Never	21,8%	33,2%
Less than once a month	17,7%	15,4%
Once a month	9,7%	7,3%
Every week	24,2%	17,2%
Every day	20,4%	18,5%
No response	6,6%	8,4%
Total	100,0%	100,0%

Table 14: Percentage of girls in each age group who have never kissed and petted: Main group of respondents ( $N = 558$ )

Age	Never kissed	Never Petted
13	33,7%	49,4%
14	28,3%	38,7%
15	25,2%	32,4%
16	14,3%	26,1%
17	13,1%	26,2%
18	9,1%	33,3%
19	14,3%	14,3%



According to Table 13, 21,3% of the respondents have never kissed and approximately 45% kissed regularly; 33,2% have never petted and 36% have petted regularly. It seems that most girls have experience of kissing and petting. Table 14 indicates that age played a role in kissing and petting. The younger the girl, the greater the percentage of girls who have never kissed or petted. The percentages for the 18-year olds (N=22) and the 19-year-olds (N=6) are not trustworthy because of the limited number of respondents in each age group. The data in the two tables concur with American data that indicates that by the age of 15, many American girls have experience of kissing and french-kissing (Jakobsen et al., 1997). No South African data on adolescent kissing and petting behaviour could be found to use as a basis for comparison.

Table 15: Masturbation: Main group of respondents (N = 558)

	Frequency	Percent
Never	484	86,7
Less than once a month	11	2,0
Once per month	1	0,2
Every week	3	0,5
Every day	3	0,5
No response	56	10,0
Total	558	100,0

Table 15 indicates that most of the respondents reported that they have never masturbated. This may indicate that it is socially taboo for girls to masturbate or for girls to acknowledge that they masturbate. This result concurs with Wyatt's (1997) finding that 83% of African-American adolescent females reported that they do not masturbate. Since masturbation is seen by some authors (Fine, 1988; Tolman, 1997; Unger & Crawford, 1996) as a means for a girl to learn about her body and to develop her sexual agency, the implication is that these respondents are probably not very knowledgeable about their own

bodies and their sexuality. It is also of course possible that more of the respondents did masturbate, but did not acknowledge it because of the taboos against masturbation (see Chapter 7).

Table 16: Sexual intercourse: Main group of respondents ( $N = 558$ )

	Frequency	Percent
Yes	80	14,3
No	456	81,7
No response	22	3,9
Total	558	100,0

According to Table 16, 14% of this group of girls had experience of sexual intercourse. According to Romig and Bakken (1990), 18% of American females have had sexual intercourse by the age of 15 and almost 66% by the age of 19. In South Africa significant differences exist between different population groups regarding adolescent sexual intercourse and percentages vary between 18,4% to 76% in rural areas (Thom et al., 1998). In a study in the Cape Peninsula, Flisher et al. (1993) found that 3,9% of the Afrikaans speaking, 12,7% of English-speaking and 60,8% of Xhosa speaking girls reported that they had had sexual intercourse. In comparison, the current study's respondents reported a meaningfully higher frequency of sexual intercourse than the Afrikaans speaking; a slightly higher frequency than the English speaking; much lower frequency than the Xhosa speaking Cape Peninsula respondents of Flisher et al. (1993); and a slightly lower frequency than the American girls.

Table 17: Age at first sexual intercourse: Sexually active group (N = 80)

Years	Frequency	Percent
12	3	3,8
13	5	6,3
14	13	16,3
15	28	35,0
16	17	21,3
17	7	8,8
18	4	5,0
No response	3	3,8
Total	80	100,0

According to Table 17 most of the sexually active respondents had their first coitus experience at 15 (35%); 16 (21,3%) and 14 (16,3%). The average age at first coitus was 15,19. According to Hyde and DeLamater (1997) there is little variation between different countries in the average age of first intercourse and it is usually 16 or 17. In America it is about 16 for African American females and 17 or 18 for Hispanic and White females (Nielsen, 1996). In South Africa the average age for first coitus is estimated to be between 14 and 16 (MacLeod, 1999). The average age for first coitus of 15,19 found in this study is slightly younger than the average age for most countries, but concurs with the average age for South African female adolescents.

Table 18: Homosexual experience: Main group of respondents (N = 558)

	Frequency	Percent
Yes	15	2,7
No	487	87,3
No response	56	10,1
Total	558	100,0

Table 18 indicates that only 2,7% of the girls reported that they had had a homosexual experience. This corresponds with other authors' (Unger & Crawford, 1996; Wyatt, 1997) findings that adolescent girls rarely report that they have had homosexual experiences.

*Conclusion:* The sexual behaviours described above correspond with available data on other adolescent populations. It is only age of first sexual intercourse that is lower than reported international studies, but it corresponds with findings of South African studies. This population, therefore, does not seem unique regarding the different aspects of sexual behaviours that were measured.

## 2. Communication about sex

Table 19: Sources of sex education: Main group of respondents (N = 558)

	Frequency	Percent
Friends	203	36,4
Brother/sister	55	9,9
Books/Magazines	152	27,2
Television	163	29,2
School	193	34,6
Mother	235	42,1
Father	56	10,0
Other Family	89	15,9

Table 19 indicates that the respondents reported that they received sex education mostly from mothers (42,1%); friends (36,4%); school (34,6%); television (29,2%); and books/magazines (27,2%). These findings differ from findings in other countries in which parents are consistently rated second or third to friends and media when it came to imparting sex information (Davis & Harris, 1982). One explanation for this difference is that the respondents understood the question "Who taught you about sex" to include warnings and moralisation about sex. This concurs with Sanders and Mullis' (in White & DeBlassie, 1992) finding that parents are often rated highest in terms of influence of sexual opinions and beliefs, but lower than friends, school and books as sources of sexual information. The interview data in this study confirm that mothers' contribution to sex education mostly consists of warnings and moralisation about sex and entails little factual information. Table 20's results also confirm that many of the respondents never discussed sex with parents. It must also be noted that fathers play a negligent role in the sex education of their daughters. This finding concurs with the findings of studies conducted in other countries (King & Lorusso, 1997).

Table 20: Discussed sex with parents, friends and boyfriends: Main group of respondents ( $N = 558$ )

	Parents (%)	Friends (%)	Boyfriends (%)
Never	48,0	22,8	50,5
Less than once a month	17,0	18,1	14,2
Once per month	10,6	13,4	10,2
Every week	6,6	15,1	7,0
Every day	10,6	23,3	9,0
No response	7,2	7,3	9,1
Total	100,0	100,0	100,0

Table 20 indicates that approximately half of the respondents never discussed sex with parents (48%) and boyfriends (50,5%), while only 22,8% never discussed sex with friends. Friends therefore seem to be the primary source of communication about sex. This finding concurs with American and European findings that friends are the primary source of communication about sex and that adolescents tend to turn to best friends for meaningful communication about sexuality (Davis & Harris, 1982; Wyatt, 1997; Zani, 1991).

Table 21: Discussed contraception with parents, friends and boyfriends: Main group of respondents ( $N = 558$ )

	Parents (%)	Friends (%)	Boyfriends (%)
Never	64,5	47,1	65,9
Less than once a month	8,4	13,4	8,8
Once per month	7,2	7,3	5,9
Every week	4,8	9,5	3,6
Every day	5,7	13,6	5,9
No response	9,3	9,0	9,9
Total	100,0	100,0	100,0

Table 21 indicates that 64,5% of the respondents have never discussed contraception with parents, 47% have never discussed contraception with friends and 65,9% have never discussed contraception with boyfriends. Overall it seems that contraception is not a much-discussed subject. When contraception is discussed, friends are the primary resource. Approximately 43% of the respondents have discussed contraception with friends, in comparison with 34,1% who have discussed it with boyfriends, and 26% who have discussed it with parents. Again this finding concurs with other international and South African research that parents play a secondary role to friends and boyfriends when it comes to interactive communication and discussion of sex and contraceptives (Davis & Harris, 1982; Macleod, 1999; Usher, 1999).

*Conclusion:* Again, the behaviours of these respondents regarding communication about sex are similar to behaviours of other adolescent populations, except for the finding that adolescents perceived mothers to be a primary source of sex education. The interview data indicated, however, that mothers' sex education mostly entail warnings and moralisation about sex and little factual information.

### 3. Sexual coercion and abuse

Table 22: Incidence of sexual abuse: Main group of respondents (N = 558)

	Experienced pressure to have sex (%)	Had sex after pressure (%)	Raped by man (%)	Sexually molested by man (%)
Yes	19,5	2,7	1,6	4,3
No	75,3	17,9	90,7	87,5
Not applicable	0,0	71,9	0,0	0,0
No response	5,2	7,5	7,7	8,1

Table 23: Coercive sex: Sexually active group (N = 80)

	Experienced pressure to have sex (%)	Had sex after pressure (%)
Yes	27,5	17,5
No	70,0	15,0
No response	2,5	7,5

Table 22 indicates that the incidence of sexual abuse was low in the group of sexually active girls. Although 19,5% reported that they had experienced pressure to have sex, only 2,7% had sex as a result of the perceived pressure. According to Table 23, 27,5% of the sexually experienced girls experienced pressure to have sex and 17,5% had sex as a result of this perceived pressure. These figures correspond with other South African figures of 28,4% (Macleod, 1999). It must be noted here that feedback after the first trial run with the questionnaire, as well as the interview data showed that the word "forced" is understood in a very specific way in this community. It does not necessarily imply the use of physical force or the threat of physical force. Insistent verbal requests for sex, for example, are perceived by the girls as being "forced" to have sex. Only 1,6% of the respondents reported rape and 4,3% reported sexual molestation. The figures for sexual molestation are meaningfully lower than those that range between 19% and 31% in American studies (Laumann et al., 1994; Rickel & Hendren, 1993) and those that vary between 30,9% and 34,8% in South African studies (Collings, 1997). One possible explanation is that these respondents were not so sensitised for the concept of sexual molestation and may not have perceived certain behaviours as sexual molestation. Another possibility is that sexual molestation is simply not very prevalent in this community.

#### 4. High-risk behaviour

Adolescent risk behaviours are defined as behaviours that can, directly or indirectly, compromise the well-being, the health and even the life course of young people (Jessor, 1998). For the purposes of this study, high-risk behaviour includes high-risk sexual



behaviours like non-use of contraceptives and casual sex or sex with multiple partners, as well as general high-risk behaviours like using substances and failing school grades.

#### 4.1 High-risk sexual behaviour among the sexually active respondents ( $N=80$ )

Table 24: Contraceptive use: Sexually active respondents ( $N=80$ )

	Frequency	Percent
Never	25	31,3
Sometimes	11	13,8
Most of the time	9	11,3
Always	24	30,0
No response	11	13,8
Total	80	100,0

According to Table 24, 31,3% of the sexually active respondents reported never using contraception, 13,8% reported sometimes using contraception and 11,3% reported using contraception most of the time. Thirty percent of the respondents reported that they always use contraception. The percentage of respondents who reported always using contraceptives is lower than the percentages of between 39% and 41,3% reported for American female adolescents (De Anda, 1983; Jorgenson, 1993; Mosher & McNally, 1991). The percentage of 41,3% respondents who reported that they always use contraception or use contraception most of the time, is higher than the varying percentages of between 14,8% and 27% reported for regular use of contraceptives among South African adolescent females (Macleod, 1999; Olivier, 1996). This study's respondents, in comparison, therefore make more use of contraception than their South African equivalents. One must, however, take into account that the interview data indicates that the respondents considered withdrawal to be a reliable contraceptive method. The 30% who reported consistent contraceptive use could therefore include those who use withdrawal as a contraceptive method. The percentage of respondents who consistently use a reliable contraceptive method may therefore be lower than 30%.

Table 25: Contraception used past month: Sexually active respondents ( $N = 80$ )

	Frequency	Percent
Withdrawal	2	2,6
Injection	9	11,3
Rhythm	1	1,3
Pill	6	7,5
Condoms	21	26,3
None	16	20,1
No response	25	31,3
Total	80	100,0

Table 25 indicates that most of the sexually active respondents (31,3%) did not answer this question. One possible explanation is that some of these respondents did not have sex during the past month and interpreted the question as irrelevant for them. Of those sexually active respondents who answered the question most (26,3%) indicated that condoms were used; 20,1% indicated that no form of contraception was used; and 11,3% indicated the use of Depo-Provera injections. The predominant use of condoms among the respondents corresponds with the finding that 40% of American girls rely on male methods and therefore also rely on their male partners to provide contraception (Brooks-Gunn & Furstenberg, 1989). In America, however, oral contraceptives are the most popular form of contraception. South African statistics (Community Agency for Social Inquiry (CASE), 1994) indicate that Depo-Provera is the most popular contraceptive method among coloured South African women. The finding in this study that condoms were the most prevalent form of contraception may be attributed to the youthfulness of the respondents. According to Brooks-Gunn and Furstenberg (1989) younger women tend to rely on male contraceptives.

Table 26: Incidence of pregnancy: Sexually active respondents (N = 80)

	Frequency	Percent
Yes	10	12,6
No	63	78,8
No response	7	8,8
Total	80	100,0

Table 27: Number of pregnancies: Sexually active group (N = 80)

	Frequency	Percent
1	8	72,7
2	3	27,3
Total	11	100,0

Table 26 indicates that only 12,6% of the sexually active respondents reported that they have had a pregnancy, while nearly 80% have never been pregnant. One must keep in mind, though, that these figures probably do not accurately reflect the incidence of teenage pregnancies in this community. Adolescent girls who fall pregnant are often girls who left school after grade 7 or 8 before conceiving. Other pregnant adolescents leave school when they fall pregnant. Since this study only included school going girls it does not reflect the incidence of teenage pregnancy among non-school going girls. According to Table 27 only three respondents reported that they have been pregnant twice. No South African statistics regarding the number of repeat pregnancies among coloured adolescents could be found to compare this study's finding.

Table 28: Consequences of pregnancy: Sexually active respondents (N = 80)

	Frequency	Percent
Kept baby	3	27,25
Abortion	5	45,50
Miscarriage	3	27,25
Total	11	100,00

Table 28 indicates that most (45,5%) of the pregnant respondents had an abortion, while 27,25% kept their babies and 27,25% had miscarriages. This finding suggests that abortion is considered an option for unwanted pregnancy in this community. This tendency is also reflected in the provincial statistics. The statistics regarding termination of pregnancy for the Western Cape (February 1997 to December 1997) indicate that nearly 4000 women had abortions. Twenty-two percent of these women were 18 years of age and under the age of 18 (Reproductive Rights Alliance, 1998).

Table 29: Frequency of sex and male partners: Sexually active respondents ( $N = 80$ )

	Number of sexual intercourse past year (%)	Number of sexual intercourse past 3 months (%)	Number of male partners past year (%)	Number of male partners past 3 months (%)
0	11,3	27,5	12,5	35,0
1	11,3	12,5	52,5	35,0
2	15,0	7,5	12,5	3,8
3	6,3	6,3	5,0	2,5
4	8,8	6,3	3,8	
5	5,0	5,0	1,3	
6	5,0	2,5	1,3	
7	1,3	0,0		
8	0,0	1,3		
9	1,3	0,0		
10	2,5	0,0		
11	18,8	12,5		
11+	0,0	1,3		
No response	13,8	17,5	11,3	13,8
Total	100,0	100,0	100,0	100,0

Table 29 indicates that during the past year most of the sexually active respondents (18,8%) had sexual intercourse approximately 11 times. During the past year, 15,0% had sex twice, 11,3% did not have sex at all and 11,3% had sex only once. In the past three months most of the respondents (27,5%) did not have sex, 12,5% had sex once and 12,5% had sex eleven times. Regarding the number of male sex partners the past year, most of the respondents (52,5%) had only one partner, 12,5% had no partner and 12,5% had two partners. During the past three months, most of the respondents (35,5%) had no partner and 35,5% had one partner. This data corresponds with American and Australian data that adolescents are not generally sexually promiscuous and that sexual intercourse

is often an isolated or infrequent event for many adolescents. Santelli and Beilenson (1992), for example, reported that although nearly 45% of white American adolescent women are sexually experienced, only 28% had sex in the past month and only 14,9% consistently had sex over the past year. In this study nearly 40% of the respondents reported that they did not have sex or only had sex once and twice during the past year, while 40% indicated that they did not have sex or only had sex once during the past three months. Regarding the number of sexual partners, American data indicates that 50% of all American teenagers wait 18 months before they have sex with another person (White & DeBlassie, 1992). Eighty-two percent of Australian adolescent females either had not had intercourse or had it with only one partner in a six month period (Collins, 1990). This study indicates that 65% of the respondents either did not have a sex partner or only had one partner during the past year and 70% did not have a sex partner or only had one partner during the past three months. No South African data could be found to compare to the findings of this study.

Table 30: Other potentially high-risk sexual behaviours: Sexually active respondents (N = 80)

	Frequency	Percent
Anal sex	12	15,0
Oral sex	11	13,8
Sex in group	1	1,3
Sex with more than one man	4	5,0
Other	1	1,3
None	51	63,8
No response	2	3,6
Total	80	100,0

Table 30 indicates that most (63,8%) of the sexually active respondents reported that they did not engage in the listed high-risk sexual behaviours. Anal sex (15,0%) and oral sex (13,8%) were reported to be the most frequently occurring potentially high risk sexual behaviours. Figures for other adolescent populations could not be found to compare to the findings of this study. The prevalence of anal sex in this group can be questioned. The interview data indicate that the respondents interpreted the term anal sex to also include

unsuccessful attempts from the male partner to penetrate anally. The interview respondents considered anal sex and fellatio to be highly undesirable behaviour.

#### 4.2 Other high-risk health behaviours among the sexually active respondents

Table 31: Smoking: Sexually active respondents ( $N = 80$ )

	Frequency	Percent
Yes	48	60,0
No	30	37,5
No response	2	2,5
Total	80	100,0

Table 32: Cigarettes per day: Sexually active respondents ( $N = 80$ )

	Frequency	Percent
2	5	10,2
3	13	26,5
4	0	
5	11	22,4
6	6	12,2
7	2	4,1
8	1	2,0
9	0	
10	8	16,3
12	1	4,1
Total	48	100,0

Table 31 indicates that 60% of the sexually active respondents reported that they smoked cigarettes. According to Table 32, most of them smoked three (26,5%) and five (22,4%) cigarettes per day. A significant difference was found between the sexually non-active and the sexually active group regarding the incidence of cigarette smoking. A larger proportion of sexually active girls (60%) reported smoking in comparison with 26% of the non-sexually active group who reported smoking ( $z = 7,29$ ;  $p = 0,0000$ ).

Table 33: Use alcohol: Sexually active respondents ( $N = 80$ )

	Frequency	Percent
Yes	51	63,8
No	28	35,0
No response	1	1,3
Total	80	100,0

Table 34: Frequency of alcohol use: Sexually active respondents ( $N = 80$ )

	Frequency	Percent
Very little	11	20,0
Special occasions	14	28,0
Social events	12	24,0
Weekends	13	26,0
Regular week/weekends	1	2,0
Total	50	100,0

Table 33 indicates that nearly 64% of the sexually active group reported alcohol use. Table 34 indicates, however, that frequent alcohol use is limited to 28% of the sexually active respondents. A significant difference was found between the non-sexually active group and the sexually active group regarding alcohol use. A larger proportion of the sexually



active group (64%) used alcohol in comparison with 27% of the non-sexually active group ( $z = 6,46$ ;  $p = 0,0000$ ).

Table 35: Use of other substance: Sexually active group ( $N = 80$ )

	Frequency	Percent
Yes	4	5,1
No	73	91,3
No response	3	3,8
Total	80	100,0

Table 35 indicates that the respondents reported that the use of other substances is almost non-existent.

Substance abuse is highly correlated with sexual intercourse in adolescence (Breakwell, 1996; De Gaston et al., 1995). Alcohol use is frequently identified as a potential cause of sexual risk taking (Cooper, Pierce & Huselid, 1994). Although this study enquired about the respondents' use of substances, it did not explore how substance use was associated with the respondents' sexual activity. It does seem, however, that the use of cigarettes and alcohol was common in this group. It also seems to be more common than in the group of sexually inactive respondents. When the frequency of substance use in this group is compared with those that Flisher et al. (as cited in Louw et al., 1996) reported for adolescents in the Cape Peninsula, the group of sexually active respondents used cigarettes and alcohol more frequently. The percentage of tobacco smoking of 60% in this group was higher than the figures of between 9,0% and 20,7% for adolescents in the Cape Peninsula reported by Flisher et al. (as cited in Louw et al., 1997). The percentage of alcohol use of 64% was also higher than the frequency of 32,5% for grade 8 girls and 61,0% for grade 12 girls reported by Flisher et al. These findings, together with the finding that the group of sexually active girls had a higher frequency of failing a grade than the group of sexually inactive girls, lend support to the findings of other researchers that early sexual activity are often associated with other non-sexual problem behaviours (Cooper et al., 1994; Jakobsen et al., 1997).

*Conclusion:* Although the interviewed group certainly did not report more casual sex or having sex with multiple partners more than comparison groups, their ineffective use of contraceptives make them a high-risk sexual behaviour group. They also exhibit other risk behaviours like failing grades and using tobacco and alcohol.

## 5. Conclusion

The quantitative data analysis indicates that the large group of research respondents' range of sexual behaviour; their communication about sex; the incidence of sexual abuse and coercion; as well as the incidence of high-risk behaviours do not differ meaningfully from other adolescent populations. Only two differences have been found. Firstly, that the age at first intercourse is younger than the age reported for American and European adolescents, although this study's finding corresponds with the findings of other South African studies. Secondly, in contradiction with other studies that found that adolescents reported friends to be the primary source of information about sex, this study's respondents reported that mothers were the most important source of sexual information. This finding must, however, be qualified with the qualitative finding that the mothers' "information" about sex usually consist of warnings and moralisation about sex. It seems then that quantitative data do not provide enough information about sexuality and sexual behaviour to determine the dimensionality of difference and agreement between different groups of people.

This is exactly the limitation of limiting sexuality data to the quantitative measurement of behaviours. It does not reflect how people experience and understand their sexuality and therefore it does not reflect how their thoughts and feelings about sexuality may differ from other populations. In the next chapter a qualitative analysis will be presented of how 25 sexually active girls experienced and understood their sexuality. It is hoped that this qualitative analysis will complement the quantitative data by giving an understanding of how and why some of the identified sexual behaviours manifested.

## CHAPTER 7

### GROUNDED THEORY ANALYSIS

In this grounded theory analysis I attempted to gain an understanding of how a specific group of adolescent girls construct meaning of sexuality and the experience of sexual intercourse. As the analysis progressed and several subcategories were identified, the concepts lack of sexual agency and connection seemed to link all the different subcategories. Lack of sexual agency and connection, therefore, became the core categories. According to the grounded theory method, the researcher must specify the categories' properties, the conditions under which they arise, how they change, their consequences and finally specify their relationship to other conceptual categories. The researcher should also consult relevant literature and compare how one's analysis fits in with it (Charmaz, 1990). In the following section the different subcategories that underlie the core category of sexual agency are presented.

It is necessary to make a few comments regarding the use of excerpts and quotes from the interviews. Such excerpts and quotes will be presented to illustrate theoretical assertions. In these excerpts and quotes the interviewer and respondent will be indicated with the letters *I* and *R*. It must be kept in mind that the researcher had to translate the quotes to English and in the process much of the meaning of the colloquial Afrikaans words was lost. Quotes and citations were kept as brief as possible, but it was necessary to make obvious the context within which participants made statements and therefore citations are often long. Lastly, the reader needs to be reminded that 25 interviews of between 90 and 120 minutes duration generated an immense amount of data. The intention of a grounded analysis is not to reflect all of what has been said by the respondents, but to present a theoretical argument that synthesises, explains and interprets the data.

Various themes emerged during the grounded theory analysis. This chapter will start by focusing on the theme of how girls experienced sexual intercourse.

## 1. Girls' experience of sex

When the girls were asked to narrate their first experience of sexual intercourse, their accounts were vivid and specific.

## Respondent 4:

- R: OK. It was in our house. My mom and the others were out. It was only my cousin and me. We went to my room to talk, he and I. And then he asked me if I wanted to do it. He wanted to know with certainty. And I told him and then we. Then he just said ok he was going to try. And then he tried and it was in my room. We locked the door. And then we just had sex. And afterwards I, then I cried on his shoulder, because I told him I did not really want to have sex. I regretted it.  
...
- I: Besides the guilt feelings what was that first time like for you?
- R: Very sore, very sore.
- I: How was it sore?
- R: When he put in his penis, then it was very sore.
- I: Do you remember if your vagina felt wet before he put his penis in?
- R: Yes, I do remember. I don't think so.

## Respondent 6:

- I: Tell me about the first time that you had sex?
- R: Hmm, how can I put it. The first time it was a bit sore, because I was still a full virgin, yes. And after that the second time it was also a little bit, a little bit sore, but it wasn't that sore like the first time. Hmm, and afterwards I got used to it. That it doesn't hurt any more and yes that's the way we had intercourse with each other.
- I: Tell me a bit more about it. The whole story. What it felt like for you, etc.
- R: The first time, hmm, we, I, it was a Saturday. A Saturday evening. Then we, it just happened. And ... I was wearing a jean and a top and we had intercourse and sex with each other on his bed. And afterwards, afterwards he took me home. Then I felt a bit sore, but that was normal.
- I: What else did you feel? What did you feel beforehand?
- R: Beforehand, hmm, I felt a bit afraid because it was my first time. Then, but it just happened like that. Both of us did not think that it was going to happen, but it just happened. And afterward I felt like, it is done now and I can do nothing about it.

## Respondent 8:

- R: We talked first and after that we kissed.
- I: What did you talk about?
- R: He told me what he wanted to do someday and that.
- I: And?
- R: Then I told him what I wanted to do someday. And then he asked me if I still have another boyfriend.
- I: Hmm
- R: And then I just told him that I didn't have a boyfriend.
- I: And then?

- R: After that he bought cool drinks and biscuits and then we sat and ate and after that he kissed me.
- I: How did the kissing feel for you?
- R: I was very afraid.
- I: Afraid?
- R: Yes.
- I: Why were you afraid?
- R: I don't know. I just was afraid.
- ...
- I: How did he touch you?
- R: Everywhere.
- I: Everywhere?
- R: My breasts and my vagina.
- I: And what did that feel like?
- R: I told him that he must not touch me and then he said I must not worry. Nothing will happen. And after that we had sex. The first time. It happened in his home. In his room. It was evening. It was just the two of us. His parents were not there. He said that I must not be afraid, because he won't tell anybody.
- I: And then?
- R: We just had sex and then I told him it was sore and then he stopped. And then I saw when I went to the toilet, then I saw blood and then he fetched some of his mother's pads. And then he put it on for me. And then I went home. And then I couldn't walk right, because it was too sore.
- I: That must have been bad for you?
- R: Yes. My mother didn't really see, but when she noticed that when I sit I couldn't really sit right she noticed, because I didn't want to eat and I felt sick and I looked sick. Then she took me to the doctor. Then the doctor told her that I'm not pregnant, but I have broken my virgin.

#### Respondent 9:

*The first time I, I felt , I felt what are my parents going to think? What am I going to do if my mother finds out? My sister will not believe it.*

#### Respondent 17:

- I: Tell me about the first time that you had sex.
- R: It was sore.
- I: Yes?
- R: We were alone when it happened. And he asked me to have sex and then I was uncertain. I said no and then he came back and asked again and eventually I said yes.

When reading and rereading the transcribed interviews I was struck by how little of the expected emotional experience of sex featured in their descriptions of their experience of sex. Love and romance were rarely mentioned. Despite the open-ended nature of the questions, the girls concentrated on the physical pain; the emotional experience seemed secondary. This is even more remarkable given the fact that they remembered the details of their first experiences of sex. They remembered the time, the place and the words that were spoken. When emotions were articulated, reference was typically made to what can be regarded as negative emotions: physical pain, fear, resignation, regrets and sadness.

Already in these narratives it sounds as if sex was something that "happened" to them. It had little to do with what they felt, what they wanted or what they needed. They simply had to deal with the emotional and physical consequences thereof. The fact that sex was not seen as an act that follows an emotional experience or a conscious decision fits in with Tolman and Debold's (as cited in Tolman, 1997) observation that adolescent girls learn to look at themselves rather than experiencing themselves. They learn to know themselves from the perspectives of others, especially men, and lose connection with their own feelings and experiences. In these girls' narratives the absence of self or failure to acknowledge their own experience is manifested in three areas: in the lack of agency in the negotiation of sexual interaction; in their need to have a boyfriend; and the fact that the notion of pleasure did not appear in the girls' descriptions of their sexual experiences.

### 1.1 Lack of agency in negotiation of sexual interaction

All the respondents, even the one girl who was raped, articulated very specifically that their male partners asked for sex the first time that they had sex.

#### Respondent 24:

*Then he said to me, if I want sex with him. Then I said to him if he was willing. Then he said yes. Then I asked him if he loved me, then he said yes. Then he asked me if I loved him. Then I said yes I did. And then he asked ... Then it happened like this, then he loosened my belt, then he asked ... then I said to him no I don't want to. Then he said ok if I didn't want to, then I'm not going to threaten or force if you don't want to do such things. Him and me we necked nicely, but ... didn't know how to do those things. For a nice long time, then he asked me again if I was ready for that thing.*

#### Respondent 23:

- R: *That evening we watched tv at their home. Then I sat there, but I was already undressed and in my nightclothes and then he sat there. Then he came to sit next to me and then his folks were also sitting there. Then his mother said that they were off to bed. Later that evening we went to bed. Then he said to me. Then he asked me. Then I told him no. I was not ready for it. Then he asked again and then I told him no.*
- I: *What do you mean when you say he asked you?*
- R: *He asked me. He asked me if he can share sex with me. But I didn't know if I should say yes or no.*
- I: *What do you mean you did not know if you should say yes or no?*
- R: *He just asked me if he can sex with me. Then he said I must give him the answer, yes or no. Then I said to him the thing.*
- I: *Why do you think you were unsure? Why didn't you know what the right thing is?*
- R: *I was very scared.*

- I: What were you scared of?  
 R: Of sex.  
 I: You say that same evening you changed your mind about having sex. What made you change your mind?  
 R: No, that evening then I thought. I was lying awake the whole evening. Then I thought you are not really going to touch me, you are going to lie in your bed. Then the next morning after I've lied awake the whole night...Then the following evening then he came to me again. I was sitting on the bed. Then he asked me if I was still afraid. Then I said no I am not afraid anymore.  
 I: Was that the truth, were you not afraid anymore?  
 R: I just sat there and thought what must I do. Must I keep on saying no?  
 I: And what made you say yes?  
 R: It just came over me.  
 I: How did it come over you to say yes?  
 R: Because some men are just like that ... if they keep on and on and ask you and ask you then after a while they want to hit you ...  
 I: Were you afraid that he would hit you?  
 R: Very afraid.  
 I: Do you think that he's the type of man that would have hit you?  
 R: No, he's not. He's not really like that, but one must not make him angry. Then he will hit you.  
 I: What happened after you said that you were no longer afraid?  
 R: We just went to lie on the bed and then we had sex and when we were finished I washed myself. I put my clothes on and went to sleep.

#### Respondent 17:

He asked and then I was uncertain. Then I said no and then he came back and then he asked me again and then later on I said yes.

#### Respondent 19:

He asked me then I said no. Then he said no I must just relax and lie back. He will do everything and then I laid back and I thought I would see what he does. I was rather scared and wondered what is he doing to me?

#### Respondent 21:

He asked me for sex. Then I told him ... Then I didn't give him an answer. Then he asked me again and then I told him I'm first going to see whether I want to. Then he asked me again and then I told him ok.

In all these excerpts a similar process was reported: First, all the men asked for sex, second, initially all the girls said "no" and third all the girls eventually changed their minds and said "yes". The fact that the males pertinently asked for sex was surprising. Although the male sex role stereotype dictates that males should initiate and pursue sexual intercourse, one expects that this would be a physical initiative and not a formal verbal request for sex. The available literature on adolescent sexuality also leads one to expect romantic and seduction scenarios of first sexual intercourse (Unger & Crawford, 1996). It

would be interesting to know if the asking of consent is also common in other adolescent populations.

What does the male's asking of consent mean? Is it really asking consent or is it a necessary preliminary or ritual that is expected from males but means little? It is difficult to determine what the male partner's intent was with the question. In some cases it seemed that the male was really concerned about his partner's preferences as respondent 4 indicated:

*And he asked me if I wanted to do it. He wanted to know with certainty. And I told him yes and then we ... and then he told me that ok he was going to try. And then we just had sex. And afterwards I cried on his shoulder, because like I told him I didn't really wanted to have sex. I regretted it ... Then he also cried with me. Yes, he cried, because he did ask me. He told me when he started, he wanted to know for sure if I wanted it. And I did tell him that was what I wanted. But then it was all over and we can't do anything about it now ...*

In other cases it seemed to be an empty preliminary that did not allow for a refusal from the girl.

Respondent 19:

*He asked me then I said no. Then he said no I must just relax and lie back. He will do everything and then I laid back and I thought I would see what he does. I was rather scared and wondered what is he doing to me?*

Whatever the intent behind the males asking, the request for sex from the male put the onus on the girl to make a decision. However, it is a complex request as it confronted the girl with the man's preference and need. It was never asked whether the girl herself wanted to have sex or whether it was safe to have sex. She was asked to fulfil her boyfriend's need or desire.

In the excerpts above, the girls told the interviewers that at some stage during the interaction they said "no" to sex. The whole issue of "saying no" is a very prominent one in adolescent female sexuality. Young girls are taught by their mothers and by sex education programmes to say no to sex and to say no to men wanting sex (Fine, 1988; Thompson, 1992). According to Fine (1998) these messages:

*...ultimately deny young women the right to control their own sexuality by providing no access to a legitimate position of sexual subjectivity. Often conflicted about self-*



representation, adolescent females spend enormous amounts of time trying to "save it", "lose it", convince others that they have lost or saved it, or trying to be "discreet" instead of focusing their energies in ways that are sexually autonomous, responsible, and pleasurable (p.37).

The implication of Fine's statement is that young women are so preoccupied with dealing with sexual intercourse in the socially correct way, that it robs them of the opportunity to focus on their own experience and to use that as a basis for decision-making about sex.

Young women are also socialised that in the romantic script it is always the man who initiates and pursues, while the woman passively offers token resistance but finally gives in to his desire. Even when a girl wants to respond positively to a man's sexual initiative, she may still feel obliged to offer token resistance (Unger & Crawford, 1996). According to Muehlenhard and McCoy (as cited in Unger & Crawford, 1996) token resistance may be an adaptive behaviour on women's part. With this adaptive behaviour she safeguards herself against being viewed as "easy" by her partner. It may be that her partner expects her to resist and if she does not, she risks being seen as promiscuous. Resistance may therefore enhance her desirability. Muehlenhard and Hollabough (as cited in Unger & Crawford, 1996), however, warned that saying "no" when they mean "yes" have serious implications for women. It encourages dishonest communication and reproduces restrictive gender stereotypes.

In the case of these respondents, I do not think that their "no" meant "yes" or a coy "maybe". Their "no" rather reflected a general discomfort and uncertainty about what they should do. It suggests that these young women did not perceive themselves as active agents in their sexual lives. They reacted to the male's request with the answer that they thought was the proper one to give. This meant saying "no" first (as mommy's good girls) and then saying "yes" (as the good girlfriend). They did not know how to use their own experiences of pleasure or discomfort or uncertainty as the basis for a response to a request for sex. They perceived men as the sexual agents and in control of sexual events. Often the male partner's consistent requests for sex were perceived as "forcing" against which the girl was defenceless. No attempt was made to actively refuse the request, to renegotiate the request or to say "yes" because they really wanted to have sex.

## Respondent 25:

- R: We started fooling around and then he asked me and then I didn't want to. It was in his room. And then it just happened like that.
- I: Are you saying that he knew you did not want sex?
- R: Yes, but he just carried on.
- I: What happened then?
- R: He took off his clothes and then he took off my clothes, because I didn't want to do it.
- I: What happened then?
- R: I told him I didn't want to and then he forced me and then he took off my clothes. Then I cried.
- I: And you're saying that he forced you? How did he force you?
- R: He said no he wants sex with me and I don't want to have sex with him. And then things happened like that that he took off my clothes.

## Respondent 5:

- I: You said he forces you? How does he force you?
- R: He comes and says to me, he forces me "please, this is the last time" like that. He forces, some days he forces like that and then I must do it.
- I: And what do you think and feel when he does that?
- R: Then I think: Must I do it or mustn't I, but then I think I shouldn't, I don't know. Because he, because how can I put it... He forces me, he forces until I...he forces me until I give it to him. And if it is not this evening, then the following evening then I must give it.
- I: How do you feel then?
- R: Then I think when I go to sleep, then I think, must I do it or must I not do it. Then I think I must do it. I'm just going to do it, because he won't stop forcing and I'm going to get fed up with the force. And then afterwards then I feel when it is finished that I'm not going to do it again...

In the above excerpts it can be seen that the girls perceived verbal insistence as "forcing". It does not seem as if the men portrayed in these excerpts were verbally or physically aggressive. It rather seems that the "forcing" lies in the girl's interpretation of the events and perhaps in her belief that men are powerful and dominant. Holland et al. (1992) argued that one category of pressure is verbal sexual pressure (verbal persuasion and verbal coercion). Persuasion refers to cases where women consent to unwanted sex, because of social pressures or the fear of losing the relationship. The men do not take any overt action to exert pressure for the girl to feel that they should comply. Girls also tend to be reluctant to describe men's behaviour as violent, unless they have been hurt. Verbal coercion from men, therefore, could be experienced as coercive, not based directly on the man's behaviour, but on the woman's assumptions and beliefs about men and the consequences of non-compliance. Women often feel responsible for the man's state of arousal and feel responsible to provide release. Many women also believe that sexual

intercourse is the price of a continued relationship. As such, it is then not what happens in the specific interactions that determines a woman's interpretation of the situation. She interprets what happens on the basis of what she knows about gender relations in the society at large.

The interviews also indicate that some of the girls anticipated that the men would use force or threat to obtain sex. These girls were rather impressed with their boyfriends when they were not forceful or did not apply pressure.

Respondent 2 said:

*At first I said no. But he wasn't angry and he didn't say: "No, don't be like that". He didn't react like that.*

Respondent 14 said:

- R: *We were lying down and kissing and then he asked if I wanted to have sex with him. Then he said if I don't want to, then I don't have to.*
- I: *What did it feel like that he said that.*
- R: *I thought that he would demand it, because boys are like that. They just want one thing. Some of them if you meet them the first evening then they want what they want. He is not like other boys.*

It also seemed to me that some of the men used the absence of force and threat as a seduction technique. Implied, for example, in what respondent 12's partner said to her, is that he could have forced or threatened her, but since he was a nice guy he did not.

*Then he said: ok if you don't want to, then I will not threaten you or force you if you don't want to do these things. Him en me, we necked nicely, but ... I know now how to do those things (respondent refers to petting). For a nice long time, then he asked me now if I am ready yet for that thing. Yes. We were at their house, his mother liked going out. We were at their house. Then it just happened like that. But it was painful for me. I cried - it was very sore.*

The presence of the possibility of male force or threat in both men and women's articulations perhaps indicates that either male sexual force or threat in heterosexual relations may be quite common in this community, or that outdated and unfounded sex role stereotypes are still dominant and to a large extent determine women's responses during sexual interactions. Whatever the case may be, the threat is always implicit.

Most of the girls indicated that their male partner did not only initiate and orchestrate the process of sexual intercourse, they were also the ones who usually took responsibility for contraception or brought up the issue of contraception.

Respondent 21:

*He asked me if I was using anything. Then I told him no. And from that time he always used something. One time we had sex without a condom and his water broke in me. And then he brought me 4 small pills. I don't know what it was. And then he said to me that I must drink it. And I drank it and it made me very nauseous.*

Respondent 17:

R: *Every time he told me even if we did not have sex then he said you must use something. Then I said no I am too shy.*  
 I: *Did he use contraception?*  
 R: *No, he never used condoms.*  
 I: *What was the reason for that?*  
 R: *I don't know. We never talked about it*

Respondent 15:

*Then he first asked if I was on the injection. Then I said no I wasn't. Then he took out a condom and put it on himself. I told him he had a decency to use it because other boy wouldn't have used it. He has the decency to use it.*

Again these quotes illustrate that the girls entrusted their bodies to the care of their male partners. They perceived the men to be in control. They did not demonstrate any awareness that they should and could be responsible for their bodies. The picture of their boyfriends that these girls portrayed, reflect young working class men who allowed their girlfriends spaces to assert their own sexual preferences and who in many cases were aware of and attempted to take responsibility for the reproductive implications of the sexual act. This is in contrast with the stereotypical idea of young men as sexual adventurers and "roving inseminators" who seek out sexual conquests. This concurs with the findings of a 1988 national survey conducted among American adolescent males. These results showed that young American men were surprisingly conservative when it came to sexual behaviour (Holmbeck, Crossman, Wandrei & Gasiewski, 1993). However, despite what men actually do during sexual interaction, some elements of the traditional male sex role continue to persist, also in the minds of women.

Moments of sexual agency were, however, identified in the narratives. Many of the girls were very adamant that they have refused or will refuse fellatio (cunnilingus is allowed), anal sex or a man who cheats on them. In these cases they will shout and curse loudly to voice their opposition. The word they use to articulate their disgust with this type of activity is "morsig" (messy).

Respondent 9:

*I told him he was filthy. (Laughs) Because why he wanted (laughs) me to suck his penis. Then I told him no, I'm not that type. Maybe you should find someone else, but I'm not going to do it. I feel like this - why should I do it? Here your penis goes in my vagina and then I must suck your...it's filthy. I just feel that it's filthy. I just can't. No. It feels disgusting to me. I don't know how other people manage to do it, but I just can't. (Laughs).*

It seems that these moments of sexual agency are very limited. It implies some power to refuse certain sexual acts, but not to negotiate the more important issue of "Do I want to have sex now or not?"

Since the rules about "messy" sexual activities are so consistent in the narratives, they are probably community rules and not individual rules. It is likely that these censures are scripted in the community as valid. In contrast, however, it seems apparent that the community has no socially approved script and therefore no awareness that young girls' own sexual experience, preferences or needs are important and worthy of reflection.

Finally, one must obviously also consider the possibility that the girls' description of themselves as being without sexual volition may be a way to present themselves as innocent and blameless to the interviewers and perhaps even to themselves. Perhaps it is the most comfortable way to construct the meaning of the experiences for themselves. If they do not, they will be confronted with themselves as sexually desiring individuals. This may be difficult to accept, since girls do not receive a socially approved script for such a construction of themselves (Tolman & Szalacha, 1999). Girls are supposed to be sexual recipients, not initiators. If it is the case that these girls were positive sexual agents, but could not allow themselves to articulate it, they still were robbed of sexual agency, because it did not allow them to actively claim their sexuality and take responsibility for it.

## 1.2 The need for a boyfriend

In the respondents' community a relationship is overtly initiated by the man (covertly the girls may manipulate circumstances to facilitate a meeting and an interaction) and negotiated between the couple. The courtship ritual consists of the man asking the girl to have a relationship with him. The word "speen" (wean) is used to signify this event. The girl usually does not consent to a relationship immediately, but says that she needs to consider the request. The idea is that a girl should not be over eager or appear to be easily available. Ideally, she should take some time to consider the proposal and decide what her answer would be.

### Respondent 21:

*He just asked me if I had a boyfriend. I told him no. And then he asked me to go out with him and then I said to him that he must first wait. Then I gave him more or less a month's chance and then I told him yes.*

### Respondent 15:

*We all were friends. Some of the boys were his friends. Then one day it happened that he was also with us and they introduced us. Then we started talking. Then he asked me if I wanted to have a relationship with him. Then the next day it came about again that we saw each other again and then he said that he liked me and that we had to try to have a relationship. I said that I would think about it. The next day he phoned me and asked me my answer. And then I told him yes. And that weekend it happened that we kissed for the first time.*

When a girl considered whether she should have a relationship with a man, a very important consideration for her was that the man appeared to deal with women in a respectful manner and did not abuse alcohol. The words "ordentlik" (decent), "rustig" (calm), "nie onbeskof nie" (not rude) were used to portray these characteristics.

Respondent 3 articulated this in the following way:

### Respondent 3:

*He must look after me. He must take care of me that I don't come to any harm. That is what you should look for in a burke (guy) He must look after you. He mustn't just leave you and then the people say: "See what she looks like, neglected ("afgerammel"), because her burke doesn't look after her". Now, if people look at me they will see, they will perhaps say: "She looks neat, her boyfriend looks after her. He doesn't beat her". You can see when someone, a boyfriend beats a girls or doesn't do right by her.*

When the girl consented to a relationship, it meant that the couple would have a monogamous relationship. Sometimes necking was part of the prelude that lead to a relationship, but most of the time it followed after the relationship negotiation. Physical intimacy initially, therefore, did not seem to be a product of emotional intimacy and getting to know each other as it seems to be in American and European adolescent populations (Thornton, 1990). This is illustrated in the following excerpts:

Respondent 7:

I: Tell me about your first kiss.

R: I went to the shop for my mother. Then a group of men came in. This man came with them. He was visiting from another place. And he called me and I went to him, because I wanted to know why he called me. And he said uhm that I was a beautiful girl and things like that. I thanked him and he wished me a happy Christmas and he walked into the shop with me. When we came out of the shop we went home. And then we kissed there.

Respondent 19:

I: Tell me about your first kiss

R: It happened at X. He sent one of his tjommies to me to tell me that he "smaak" me and I laughed at him. And then my tjommie and I went to him and his tjommie and we went to stand behind a building. We kissed. That afternoon after the athletics we went to X's house. He drank, he and his tjommie and me and my tjommie we just sat there quietly and watched. The next day we went to the house again. And we watched films, but they were in that room and we were in this room. And we got together there and had sex.

The respondents also articulated keeping a man by means of sex. Respondent 6 said the following:

I: Why do you have sex?

R: Because he wants to. He wants to then we have sex.

I: And you? Why do you have sex?

R: I feel that I shouldn't be doing it, but then the thought comes in my mind that I am going to do it. He wants it like that, then he and I can stay together.

I: Why do you think he wants to have sex with you?

R: I don't really know. I would say that perhaps he wants us to stay together. So that he won't be busy with other girls, except with me.

This again indicates that sex was not seen as something that they could want or need for themselves or for their own pleasure. It was viewed as a component of one's relationship with a man. Sex for these girls is constructed in their relationship and interaction with a man. It is not something claimed or owned by the girls prior to heterosexual sex.

Physical intimacy seems to be part of the package of being socially connected to a man, much like sexual intercourse in the past was the ritually expected behaviour on the first wedding night. The implementation of this ritual in those times was not a natural physical or emotional progression in the relationship, rather it signified the start of a relationship. In this ritualised, symbolic understanding of physical intimacy and sex, the personal meaning and feelings about the act is either unacknowledged or secondary. This offers a possible explanation for the absence of the expected emotions when the girls narrated the experience of sexual intercourse.

The necking repertoire that the respondents related, followed a relatively predictable progression. It started out with french-kissing, progressed to touching the girl's breasts above her clothing, touching of breasts under the clothes, and touching the girl's genital. The girl kissed back and held the man. It was not considered proper for a girl to initiate necking or to touch the man's body in different places. Her role was to allow or disallow his touching of her body.

It was surprising how few of the respondents narrated stories of love and romance when they described their relationships with their boyfriends and their experiences of sexual intercourse. I checked the interviews to ascertain whether the interview format hindered their articulation of love and romance. This was not the case as the questions about sex usually started with open-ended questions like "Tell me about your boyfriend", "Tell me about your first kiss" or "Tell me how it came about that you had sex for the first time".

#### Respondent 25:

- I: X, this new boyfriend of yours. How is it going with the two of you?  
 R: No, it's going oraaait.  
 I: Is he a nice boyfriend?  
 R: Yes. He has just finished with school. He works now. He's seventeen.  
 I: Why do you like him? Why do you go out with him?  
 R: No, like me now. Like some people say. They say the women run after those men who work. They say you just want to, you're just running after them for their money. I don't run after someone's money. Now I, he must, he must give me something of his own free will or he must tell me than I can ask for something.  
 I: And does your boyfriend give you things?  
 R: [Nods]  
 I: It looks like he is good to you?  
 R: Yes, often I don't even ask him for things and then he just brings it to me.  
 I: Hmm. And what kinds of things are those?  
 R: Like, things for my hair.



## Respondent 23:

- I: How did it happen that you and your boyfriend got together?
- R: My tjommie and I were walking to school and this girl came along and said that some guy wanted to know my name. I asked her why does he want to know my name. At first I told her that I did not give my name to someone just like that. I first want to know who the person is. And the next evening she brought the person to me and we talked for a bit.
- I: How did you start to go out?
- R: He asked me, because every evening he wrote little letters. Then he gave the letters to the child. Then the child had to bring the letters to me. Then he said in the letters that I must write back. Then I didn't write back and then later I went to the child's house. Then I told her I'm not one that writes letters, I go to the person instead.
- I: And what happened then?
- R: No, he asked me to go out with him. But I told him I first had to think about it.
- I: Why did you tell him that?
- R: No, because I know some of them...
- I: What do you mean?
- R: They are very..., say you go out with them, say they ask you for a "speen" and then that evening say you talk to another guy. Then they want to hit that guy.
- I: So, you're saying that they just want one for themselves. You must not talk to other people.
- R: Yes, you must not talk to other people.

## Respondent 17:

- I: Tell me about your boyfriend.
- R: We lived in X street and he always sat in the street and when I walked by he shouted or whistled at me.
- I: Hmm
- R: Then I said no, you're boring or go away or something like that to show him that I'm not interested in him. But later I could not bear it any longer. Once he called me and we talked and for about two months we just talked and then we started going out.
- I: And what was the relationship like?
- R: Everything was ok. We went out together and so on. But later he became so jealous that I told him that it was not going to work out anymore and my whole life is still lying ahead. I'm too young. But we're still together.

## Respondent 9:

For me ... Hmm, the first time I necked it felt to me that I was afraid. I thought: Oh hell, what if this guy thinks that I can't neck right. So, afterwards I asked him: So, how did I do. And he answered, No, it was OK.

The rather detailed excerpts above seem to indicate that the girls were more concerned about the pragmatic detail of the relationship and the gender rules involved in heterosexual interaction than they were concerned with issues like love and romance. This contrasts with the literature which indicates that sex and romance are the organising principles in the

lives of many adolescent girls (Lees, 1986; Simon et al., 1992; Thompson, 1992). Thompson (1992) stated that the existence of love is the one rule that girls implement to determine the rightness of sexual intercourse. She also argued that romance could help young women to develop autonomy and separation, because romance can make the separation from the parents easier, while it also teaches the girl to connect to people outside of the family. In this study only three girls referred directly or indirectly to love as a predetermining factor for sexual intercourse. The obvious conclusion is that love and romance were not such important determining factors when the girls started to have sex. It seems that the connection with a man or to have a boyfriend was the pivotal factor and having sex was one aspect of having a boyfriend. This also implies that romance did not serve the function of a halfway house on the road to autonomy and separation for these girls. The girls' connection to a man may have helped them to separate from their family, but it did not facilitate autonomy since the girls' narratives indicate that they accepted that men will largely dictate their lives. Their connection with a man therefore meant that one set of parents is replaced with another "parent" who will structure their lives.

Another explanation for the lack of love narratives that can be considered is that it may have more to do with the community's guidelines about all emotional language and specifically the articulation of romantic love or feelings of love. In some Afrikaner communities, for example, it is not considered appropriate to articulate feelings of love. These feelings are often considered to be private. Love is shown rather than talked about. Cross-cultural findings indicate that there are indeed different conceptions of love in two types of cultures, namely individualistic and collectivist cultures. In individualistic cultures passionate love is often the basis for marriage and intimacy is looked for in the relationship with one's partner. Collectivist cultures may put more emphasis on mutual trust and compatibility; and may find intimacy in family relationships rather than in one's partner (Hyde & DeLamater, 1997). In my opinion, the coloured communities of Stellenbosch can generally be described as being more collectivist than individualist. My personal experience is that people demonstrate a sense of community by knowing their neighbours, knowing the rest of the community and participating in community activities. One may argue then that perhaps heterosexual relationships and heterosexual intimate connections in this community are constructed along more pragmatic lines than the constructions of love and romance in other individualistic adolescent communities. Should this be true, it seems reasonable that the respondents would not articulate feelings of love during the

interview, because their community of origin did not provide role models or validation for the articulation of love or romantic feelings between men and women.

### 1.3 Absence of desire and pleasure narratives

The girls did not mention sexual pleasure spontaneously or on their own accord. Even when they were asked explicitly about sexual pleasure, they found it difficult to talk about pleasurable feelings. As illustrated in the next excerpts, they often referred to guilt, shame, embarrassment and ambivalence when asked about their own pleasure.

#### Respondent 2:

- I: It seems as if it is embarrassing for you to say that you felt warm or that you wanted sex.
- R: Yes.
- I: What about it is embarrassing for you?
- R: Because I see it like this. I, I don't know, actually I won't. It is wrong that we...I'm still young and I...Take it like this, the two of us..I can decide "I don't want you anymore", then I can't undo all the things that I have done, those wrong things. Now I may perhaps, a different guy, maybe he doesn't like...Maybe it can happen like this. Maybe I won't tell him that I have done this, but then we marry someday and then we decide we do it on our honeymoon or something like that. Then he finds out that I'm not a...then he's going to hit me. So, it is actually wrong what we are doing now, we mustn't do it. We must first know, see, we must be certain that he's the guy I'm going to marry and I share everything with him. Like that.

#### Respondent 6:

*There is a nice feeling in my body. Uhm, yes, I feel good when we have, when we have sex, then it feels, then it feels good. But afterwards then I feel again, when we are done, then I feel, then I think why have I done it.*

Tolman (1997) also found that her American respondents were very aware of both the pleasure and the danger inherent in their sexual desire. This conflict made it difficult for them to indulge in the pleasurable physical sensations that they experienced. The confusion or confused articulation of their own sexual feelings evidenced in the above excerpts were characteristic of most of the girls in this study. This contrasts with Tolman's (1997) respondents who mostly spoke clearly about the experience of sexual desire. Tolman (1997) ascribed girls' confusion about their sexual desire "as a psychic solution to sexual feelings that arise in a culture that denigrates, suppresses, and heightens the

dangers of girls' sexuality and in which contradictory messages about women's sexuality abound" (p.183).

The girls expressed an acceptance that sex will initially be painful and uncomfortable for females. They did not expect pleasure from their first sexual intercourse experience. Respondent 24 articulated it as follows:

*It felt a bit strange and it hurt. I suppose because I didn't know him that well. But afterwards it was fine. One or other time I had to go through it anyway.*

When the respondents were asked what sex was like for them, they had difficulty finding words. In the words of one respondent: "I don't know what to say, I don't know how to say it". Some respondents found it difficult to articulate their experience of pleasure, while others seemed unable to perceive sex in terms of personal pleasure.

Respondent 2:

- I: What was it like for you when he touched your breasts?  
 R: It was nice.  
 I: And what is "nice" like?  
 R: Uhm, how can I say it, then you go totally into a motion. (giggles shyly).  
 I: And what do you mean with "a motion".  
 R: You don't know where you are.  
 I: Can you explain what it felt like?  
 R: Uhm, how can I put it... a feeling that you can't describe. You feel like doing it again and so, that feeling.  
 I: What does your body feel like then?  
 R: Then you feel so, not scared but you feel, how can I say it. Uhm, you get a whim, you get such a whim, a craving, something like that.

It is clear that respondent 2 was not used to articulating sexual feelings and that she did not have a vocabulary for sexual pleasure.

Respondent 21:

- I: Where do you touch each other?  
 R: He perhaps touches me there down there on my ...so  
 I: And what is your word for "down there"  
 R: They call it "toet".  
 I: And his sex organ?  
 R: We call it "piel" or "voël".  
 I: When you fool around, you said that you kiss and he touches your breasts. Where else?  
 R: Down there  
 I: What does it feel like for you?  
 R: It feels different.

- I: What do you mean when you say "different" ?  
 R: It feels ... it feels as if he wants to do something that is wrong.  
 I: What is that "something that is wrong"  
 R: Sex.

Respondent 21's articulation of her experience of sex was hampered by the available crude community terminology for male and female genitals. Her embarrassment in using these terms was reflected in the fact that she distanced herself from their use: "They" call it "toet" and "We" call it "piel". For her, pleasure was also connected to "wrong" or perhaps she felt that she should say that to the interviewer. That is after all the only acceptable sexual script available to many young girls.

When respondent 24 was asked what part of sex was the best for her, she said:

*Just that he said that I mustn't think that because I had done it with him that he will drop me. He said that he will stand by me. It doesn't matter what happens. And I believed him.*

In her response she did not refer to any physical sensation. Her response was framed in terms of the relationship. Implicit in her response was also the fear that a man will leave a woman after he has "had" her.

When the respondents were explicitly asked about their experience of pleasure, they had few words to convey this. They used general, vague words that often described physical sensations "nice, not nice, a bit like a shiver in my back" ("n bietjie grillerig in my rug"), almost warm down there ('n bietjie warm daar onder), "a bit like lust" ("soort van belustig"). Facial expressions and hand gestures conveyed much of the meanings. These communications were usually accompanied by downcast eyes and shamefaced expressions and long, uncomfortable silences. Nearly all of the girls considered the detail of their sexual experiences to be gruesome ("grillerig") and to be something that one should not talk about. According to Fine (1988) and Tolman (1997) these related factors drive young girls' sexuality underground, unvoiced and unheard and in the process impossible to manage responsibly. A new socially validated script is necessary for young sexually active girls. This script must reflect an acceptance and validation of young girls' sexuality and must provide them with language and spaces to communicate their experiences

The excerpts in this section indicate that the respondents did not own their own pleasure and did not deem their physical sensations valid and important. They have never received

any indication that sexual pleasure is to be sought after and savoured. While some girls were unable to talk about pleasure, those who did, immediately connected this experience with more negative feelings such as shame and guilt. The girls took great pains to make sure that the interviewers did not think that they had sex for pleasure or that they have ever experienced sexual pleasure on their own. They seemed to say that having premarital sex at a young age was wrong, but to have sexual pleasure without a heterosexual interaction was even more wrong.

#### Respondent 2:

*It doesn't work for me like that that I want to have a nice feeling. I never get that feeling of desire. My boyfriend has to make me feel like that, but it doesn't come of itself. Also, I never think: I wish X was here so that I can have sex. I don't think about it like that.*

Related to this denial of sexual pleasure, is also the fact that the girls denied masturbating or even knowing what masturbation was. Respondent 11 said:

- I: Do you know the word "masturbation"  
 R: No.  
 I: Some people call it "skommel" or "draad trek".  
 R: No.  
 I: You do know that women can touch themselves to get an orgasm?  
 R: No.  
 I: Do you do it?  
 R: No, I have done it with X (boyfriend), but not with myself.  
 I: What do you think about the idea of women pleasuring themselves?  
 R: I really don't know what to think of it.

#### Respondent 7 said:

- I: When one touches one's own body and you touch your private parts to pleasure yourself or to get an orgasm, what word do you use for that?  
 R: [Long pause. Looks puzzled.]  
 I: Don't you have a word for it? OK, how often do you touch yourself in that way?  
 R: How do you mean?  
 I: How often do you touch your own genitals to pleasure yourself or to get an orgasm?  
 R: When I take a bath or wash myself.  
 I: No, I mean for your own pleasure  
 R: [Long pause] I don't know what you mean.

#### Respondent 6:

- I: Do you know what masturbation is?  
 R: No.  
 I: It means when one touches your own genitals to get an orgasm.  
 R: To touch yourself ("om vir jousef te bevoel")?  
 I: Yes, what word do you use for it?

- R: You touch yourself. You satisfy yourself.  
 I: OK. How often do you do it?  
 R: No, I have never done it.  
 I: Hmm? You have never touched yourself in that way?  
 R: How no, touch like that like a man touches you?  
 I: Yes.  
 R: No. Never.

Whether the above excerpts simply indicate that it was impossible for the girls to admit to masturbation is not certain. My impression was that many of them were truly not acquainted with the idea or the act. Many of the girls, however, have masturbated a male partner and found that quite acceptable as indicated in the above excerpt from respondent 11's interview. Self-masturbation was strongly viewed as unacceptable behaviour. The reasons given for non-masturbation were that it was "grillerig", "morsig" (messy), that the female sex parts were "too ugly" and that it is proper that a man should please a woman sexually.

#### Respondent 9:

- R: I don't know the word masturbation. Most people call it "rocking" (skommel). I have never done it.  
 I: Why is that?  
 R: No. Why must I. That's why one has a burke (guy).

According to Darling and Hicks (1982) the relatively small number of masturbatory experiences among female adolescents create a non-sexual period in their lives before their genitals become a major source of sexual pleasure. Females often do not begin to masturbate until after they have had intercourse. The almost universal practice of masturbation among males tends to result in the message that sex is acceptable and necessary – a message not conveyed to females. Masturbation also teaches males sexual independence. Females, on the other hand, partially through the lack of masturbatory experience, do not have the same degree of sexual autonomy (Darling & Hicks, 1982).

Several authors have argued that adolescent girls need an erotic education and need to learn to get in touch with their sexual desires in order for them to gain sexual agency (Fine, 1988; Holland et al., 1990; Hollway, 1989; Thompson, 1990; Tolman, 1997). This education should include lessons in how to explore the body, how to masturbate and how to please a partner. Thompson (1990) believed that if sex education curricula advise girls to begin sexual life with masturbation and to defer coitus until they have experienced

genital desire or orgasm, they may succeed in giving girls a positive and empowering message regarding sex. Tolman (1997) argued that if girls cannot acknowledge sexual desire they will find it difficult to know that sexual feelings and responding to those sexual feelings can bring pleasure and agency. Girls need to know that experiencing pleasure through their sexual bodies is not bad or unworthy. Fine (1988) made the following perceptive statement that reflects the necessity of a discourse of desire and pleasure for women:

A genuine discourse of desire would invite adolescents to explore what feels good and bad, desirable and undesirable, grounded in experiences, needs and limits. Such a discourse would release females from a position of receptivity, enable an analysis of the dialectics of victimization and pleasure, and would pose female adolescents as subjects of sexuality, initiators as well as negotiators (p. 33).

#### 1.4 A conclusion

In the preceding sections it was shown that the girls' construction of meaning of their sexual experiences was characterised by a lack of agency in the negotiation of sexual interaction; the need to have a boyfriend; and a lack of pleasure and desire narratives. All three factors compounded to create young women almost devoid of sexual agency. How can this be explained? In the next section I will argue that several powerful agents in the girls' lives contributed to their lack of sexual agency.

## 2. Disempowering agents

In this section the following sexually disempowering agents in the girls lives will be presented: mothers (and the discourse of danger) and men (hidden in the discourses of gender).

### 2.1 Mothers and the discourse of danger

In this section it will be shown that mothers play a very powerful role in how the respondents constructed their sexuality. Firstly, I will discuss how mothers present sex to their daughters as a dangerous activity. Secondly, I will discuss how this message



contributes towards secrets between mothers and daughters. Thirdly, I will discuss how daughters' deception of their mothers maintains mother-daughter connections.

### 2.1.1 Sex is dangerous

The girls spontaneously related their mothers' warnings and communication about sex.

Respondent 2's mother said: *"You must take care that you don't come home pregnant and that you must first finish your academics and things and then... I don't know"*.

Respondent 6's mother checked her once at the age of fifteen to determine whether she was still a virgin: *"One time my mother looked to see if I was still a virgin. She saw that I still was one, because afterwards my mother didn't... She didn't think that I still would have been one... And now I think, what if my mother looks again to see if I'm still one. Then there's going to be trouble"*.

Respondent 7's mother said: *"She told me that I can get a baby and that it isn't nice to sit with a baby. The fathers don't care and they hit the women. Like the milk and those things for the baby and maybe they don't have money and then he hits her because of that, because he doesn't want to work for it and so..."*.

Respondent 10's mother said: *"You can have a boyfriend, but you must never have sex"*.

It is clear that the mothers conveyed the message that sex is dangerous and that they tried to instil fear of sex in their daughters. It is therefore not surprising that the girls were afraid that their mothers might find out about their sexual activity. Respondent 25 articulated this as follows:

*Then she (mother) says to me: If you get a child, then you must know that your father already said you will go out the door and you will not come back. And if you get pregnant, I will sit with the child. And she says she will not look after the child ... But my mom and them don't know about it (having had sex once). I just told one of my friends and she told my little brother - she told my little brother about it. And my little brother bothered me with it the whole time and he made comments about it. And every time he said that he was going to tell my mom about it, but he never got so far. And then later on he told my mom what this friend of mine said. And then my mother saw this friend and then she asked how can she, why does she tell such stories about me if she's my friend. Then she said, no, she just made a joke. I'm afraid that my mom and them will find out, because my father said that if he finds out about it then my bag is*

already packed. Then I was glad that she didn't tell them, because if my parents find out then I must leave the house.

Respondent 2 recalled the following conversation with her mother:

*My mother sometimes talks to me about contraception. In the old days in my mother's times they also thought that they were too young for contraception. In those times many of them fell pregnant at 18. My mother says to me: I don't want you to follow in my footsteps. Then I say: No Mommy, of course I won't.*

All of the above excerpts show that mothers did not explicitly articulate sex as sinful and they did not explain why it is wrong. Sex was simply described as wrong and dangerous. The mothers conveyed to their daughters that their daughters' early sexual activity would be a disappointment to them. The implication of their message was that sexual activity would bring an unbridgeable rift between mother and daughter. In their communication with their daughters about sex they hinted of the great calamities that will befall one as a consequence of having sex. This calamity usually entailed the dire consequences of unplanned children. The mothers assumed that their daughters would instinctively understand the catastrophe of bearing unplanned children at a young age.

Only respondent 11's parents spoke openly to her about sex and contraception. They told her about their own sexual relationship starting at the age of 17. They wanted her to use contraception from the age of 13. What she remembers about those conversations is:

- R: *One time we watched a tv programme and they asked what are those children doing ... Then they said I must look after myself and they told me what was happening so that I could also understand.*
- I: *What did they mean when they said you must look after yourself?*
- R: *I must be aware, because life is dangerous. I walk to my grandmother in the evening.*
- I: *What is it that they want you to do?*
- R: *They don't want me to walk so late in the evening. I must tell them to come and fetch me at my grandmother's.*
- I: *What did they tell you can happen to you if you're not careful*
- R: *They said I can maybe be raped, because many people say they know you and then they want to. But it does not matter if they know you or not, they will still want to rape you.*
- I: *And what did your mom and dad tell you about sex?*
- R: *They said I must not go with more than one person. They say I must stay with one person. Because the boys are very talkative. Because say that this evening I am with one boy and then tomorrow then he tells his friends.*
- I: *What did they tell you specifically about sex?*
- R: *They told me about what it would be like the first time. My mother said, it is very...how can I put it ... not sore. But as the man's when it goes in then it will be a little bit sore or so.*
- I: *What else did they tell you about sex?*

- R: They said that when I ... When I neck with a boyfriend and I maybe neck in a car then I mustn't drive with him all over the place. I mustn't jump into cars and so. Because a time ago there were many cars here and so. Young men with cars. Every young man has a car and so.
- I: What can happen to one when you drive around in cars.
- R: They say some boys just want to do it and then they leave you.
- I: What has your mother told you about contraceptives?
- R: They said that I must maybe go on the pill or something. But then I didn't really know what it was. Then I asked them why must I use it. Then they said maybe for protection. Because you never know when they will attack you and rape you

It is clear from the above excerpt that little of the information given was about the feelings, experiences and pleasures of sexual intercourse. Most of what she has retained about these conversations is about the dangers of sex and the dangers of men. This respondent did not recall being told about pleasure and possible physical and emotional experiences that she might have during sex. Although she was "protected" via a contraceptive pill from the age of 13 and warned against predatory men, her parents did not prepare her for love, sex with a boyfriend and sexual pleasure. This is illustrated below.

Respondent 11:

- R: Then he talked to me and then he asked me if I wanted to do the thing. Then I asked him what thing? Then he told me the thing, if I wanted to have sex with him. Then I asked him whether he wanted to. Then he said yes. Then I asked him if he loved me, then he said yes. Then he asked if I loved him. Then I said yes. And then he asked. I told him that I did not really want to do it, but later on I said that I will because I loved him very much.
- I: And what did it feel like for you?
- R: It almost felt as if I was dirty. Because it was my first time. You don't know if the boy is going to tell or not.

It does not seem as if the girl was prepared for negotiating sex in a safe relationship where her consent for sex was asked. It is also apparent that the discourse of love was used as a bargaining tool for sex. The girls applied the rule of "sex is okay if both partners love each other". Her first sexual experience was tainted, however, with the dangers that her parents highlighted. In the following excerpt it can be seen that her subsequent sexual experiences were not conveyed with words of pleasure or enjoyment and did not indicate an awareness of her own physical experience. It is packaged in the words "love" and "respect". Her experience was a reaction to what she "knows" about male sexuality. Whether her words represent her real experience or whether the words were chosen for the benefit of the interviewer, it still is clear that the girl's own experience and pleasure is not a familiar or validated topic.

## Respondent 11:

- I: The times you had sex after the first time, what was it like for you?  
 R: Sex is ... how can one put it. If sex is only done by two people and if people have respect for each other and so on.  
 I: While you and X are busy having sex what is it like for you then?  
 R: It is not really nice to do it. If you love the person then perhaps you should do it and then it will be like that. If a person ...  
 I: It seems that you're saying that one has sex because you love someone. Does that mean that it is not nice for you? What do you get out of it? Why do you do it?  
 R: Maybe because I love him then.  
 I: And what do you think sex is like for him?  
 R: It is nice for him. He enjoys it.

Ironically, most of the mothers' only communication with their daughters about sex consisted of urging their daughters to tell them when they have sex so that they may provide their daughters with sexual information and contraception.

## Respondent 8:

- I: The first time you kissed. What happened? What was it like for you?  
 R: I was very surprised. I didn't know what would happen and I was afraid that my mother would find out and that she would perhaps scold me or hit me. But she just warned me. She just gave me warnings and told me that when I begin to sex I must tell her. Then she will take me to the clinic to get an injection."

## Respondent 19:

*She just told me that if I do those things I must tell her. I must be honest with her. But she also said that she is not going to put me on the pill, because she doesn't want to give me reason to sex.*

It seemed that the mothers did not initiate conversations with their daughters about sex, the experience of sex and how it can fit into one's life. If they did talk about sex it was about the dangers or about contraceptives. Flaake (1993) argued that mothers often do not positively affirm daughters' first discoveries of their sexual bodies. Mothers prevent their daughters' sexual pleasures and activities and make it impossible for daughters to develop a positive attitude toward their sexuality. In adolescence mothers and daughters seldom discuss all aspects of the daughters' sexual development. Experiences, feelings and desires are not discussed (Flaake, 1993). Mothers are often instrumental in making daughters into objects of desire for men, not for themselves and not for women. Daughters also learn from their mothers that sexual display is necessary to attract a man (Flax, 1993). Flaake (1993) posited, however, that mothers could also be instrumental in

teaching their daughters about the value of their bodies and allow their daughters to experience their bodies as a source of pleasure.

### 2.1.2 Secrets between mothers and daughters

The consequence of firstly the warnings about sex and secondly, the absence of open communication about sex is that the girls kept the secret of their sexual activity from their mothers. Only one of the 25 girls confided in their mother regarding her sexual activity. The other girls all reacted with horror and disbelief when asked about this possibility. They anticipated rejection or punishment if their mothers should find out about their sexual activity. A typical response was: "*I think my mother would have hit me...she would not have believed that I do such things*". Although they could not substantiate this anticipation, they still felt very strongly that confiding in their mothers was not indicated. In fact, their contempt and negativity towards this possibility equaled their disgust and contempt for fellatio, anal sex and masturbation. These were the sexual behaviours that the girls felt were inappropriate.

The absence of open communication about sex contributed to girls not using contraception. They feared that their mothers will either find the contraception, or realise that the daughters do not menstruate anymore (using the injection) or find out that they have been visiting the health clinic. They firmly believed that via these means a mother is sure to find out that a daughter is sexually active. This, they felt, must be prevented at literally all costs, rather than preventing pregnancy or sexually transmitted diseases.

The other consequence of the secrets between mothers and daughters, is that it contributed to the daughters' lack of sexual agency. These young girls were left to their own devices on their way to first sexual intercourse. They received no guidance and had no space where they could reflect on their experiences as they negotiated their way to first sexual intercourse.

In conclusion, it seems that the mothers' intentions to keep their daughters from harm and from pregnancy were defeated by the method they applied. The method firstly entailed the labelling of early sexual activity as very wrong, undesirable or hazardous. Secondly, mothers' implored their daughters to tell them when they have sex before they provide information and contraception. The first part of the method, however, guaranteed the

second part to fail. What daughter will willingly risk her mother's rejection and displeasure by disclosing her sexual activity?

### 2.1.3 Deception maintains connection

All of the respondents thought that their mothers knew that they were sexually active. The girls often relayed conversations in which their mothers voiced suspicions about their sexual activity. However, the daughters denied this vehemently and the mothers seemed to accept the lies and stopped inquiring. Respondent 12 was already pregnant when her mother asked her if it was not time for her to start using contraception. Even then she found it necessary to hide her sexual status and pregnancy.

Respondent 12:

*My mother did tell me about those things. Then I was already pregnant and my mother said I must use the injection. Then I said to her: No, Mommy, I don't have to use contraception.*

Respondent 1 related the following incident:

- R: *My mother found them (contraceptive pills). It was in my cupboard. The day we had our sports event and my pills were in my pocket. I then put it under a pair of pants in my cupboard. I don't know what my mother was looking for and she came upon the pills. But she kept it for a very long time. She kept it in her thoughts and then suddenly one day she asked me: "What are those little pills?". But of course she knew exactly what pills it was. She knows what pills it was, but she asked me what it was. Then I told her; "No, it's not mine". It is another person's who lives down the street. Then she said to me that I mustn't lie. I must tell the truth. Then I said: "But Mommy, it's not mine. It's somebody else's that I keep for her and she doesn't want her mother to find out that she uses it". Then my mother said: "OH".*
- I: *And she believed you?*
- R: *[Nods her head affirmatively.]*

These daughters all wanted their mothers to view them as obedient girls. Being sexually active did not, however, translate into being an obedient girl. The girls were convinced that if they were sexually active and wanted to have their mothers' love and approval, they had to keep their sexual status from their mothers. Respondent 12 articulated it like this:

*My sister already has a child. I was always the one who had to be a better example. I did not want to hurt my mother's heart too much.*

Lying seemed to be the smaller sacrifice or sin in comparison with one's mother knowing about one's sexual status. It seems that these girls did not want to lose the connection with their mothers that they had as "little girls". Gilligan (as cited in Tolman, 1997) argued that many girls experience a crisis of connection during adolescence. They have difficulty to resolve the issue of being themselves while maintaining relationships with others who do not want to know the truth of their experiences. Many girls resolve this issue by not voicing their potentially disruptive thoughts in order to maintain significant relationships.

It seems that these girls' mothers constructed young female sexual activity as unwanted and wrong. One implication of this construction is that some mothers would reject or disconnect from their daughters once their active sexual status become known. In this way, young girls' sexual activity means inevitable disconnection and separation from the mother. Often girls mentioned that a sister had disappointed a mother by having a baby at an earlier stage or had displeased the mother in other ways. It was very important to these girls that they were not viewed in the same way.

Respondent 9:

*I have two sisters and a brother and none of them reached the age of 21 without having a baby. It will be embarrassing to tell my mother. ... I'm the baby in the house. She expects a lot of me.*

Mothers and daughters' silence about the emotions or sensations accompanying the daughter's sexual development; about desires or fantasies or about the desire to explore the changing body or sexual preferences, is not new (Flaake, 1993). Apter (1990) found that the American and British girls in her study also tended to anticipate parental knowledge of adolescent sexual activity as a catastrophe. It is argued that mothers do not welcome their daughters' discoveries of their own bodies and prevent their daughters' bodily pleasures and sexual activities because it confronts them with the upcoming separation from their daughters as well as their own aging process. Their daughters' development can remind the mothers of their own unsatisfied sexuality, her own longing for autonomy and her own problems with femininity. How a mother sees her future life and how she values her own body and sexuality, determine the nature of her relationship with her adolescent daughter (Apter, 1990; Flaake, 1993). The applicability, however, of the psychoanalytical understanding of mothers and daughters to this community is unknown. Apter (1990) argued that the barrier that adolescent girls perceive between their parents

and themselves regarding sexual activity, has to do with the girls' self-definition. It has more to do with their thinking that mothers could not take it because they see themselves in relation to their mother as children, than it has to do with mothers being unable to accept their daughters' sexuality. Apter (1990) also posited that the mother's warnings and her attempts to halt sexual development are not signs of envy, but of fear. She wants to protect her daughter from danger. She uses disapproval to control her daughter, because she knows that her daughter is not fearful of dangers. According to Apter (1990) there is nothing that a mother can do right regarding sexual communication, since the indications are that girls who receive positive messages from their mothers suffer the same amount of confusion as those receiving negative messages. This could mean that the societal messages regarding acceptable female sexuality and behaviour are so potent that a mother's message is insignificant in comparison.

### 2.1.3 A conclusion

In the above section it was argued that mothers can be viewed as powerful agents in their daughters' sexual disempowerment. Mothers' construction of sex as dangerous for young women contributes to the creation of silences and lies about sexuality between mothers and daughters. This, in its turn, leads to daughters being left to navigate their sexual path on their own without adequate knowledge, support and guidance. It may also lead to a general silence about the sexuality of girls. One can, however, also redefine this positively. I was struck by the importance of mothers in the respondents' narratives. Mothers can therefore be seen as a valuable potential resource in the sexual empowerment of women. It will be meaningful to reflect on ways that mothers can contribute to daughters' sexual agency.

## 2.2 Boyfriends hidden in gender discourses

Much about boyfriends and the prevailing gender discourses can be found in the excerpts quoted in sections 1.1 and 1.2. These excerpts will not be duplicated here. In section 1.2 it was demonstrated that the men initiated the start of a relationship and in section 1.1 it was illustrated that men initiated sexual intercourse and asked the girl's consent for sexual intercourse. The girl's role was to react to these initiations in a way that demonstrated that she was not easily available, whilst trying not to offend the man. In section 2.1.1 it was clear that mothers were powerful conveyers of the discourse that sex and men are



dangerous. It is clear that although the power imbalances between men and women and the double standard for men underlie all the narratives, reports of explicit exploitation or violence were minimal in the narratives of the respondents. It seems that both girls and men bought unquestioningly into the prevailing gender discourses and both sexes were responsible for reproducing the stereotypical gender discourses.

### 2.2.1 Men should be sexual initiators

The first important feature of the gender discourse was that men should be the initiators in sexual matters. The girls expected and accepted that the men should take the lead. This is illustrated in the following excerpts.

Respondent 3:

- I: *What do you think are the rules for men and women when they have sex. What are men supposed to do and what are women supposed to do?*  
 R: *Yes, they always say that the boy must make the first move. Now I also just wait for the guy to do something.*

Respondent 4:

- I: *What would you say is it that a man on the one hand and a woman on the other hand should be doing when they have sex?*  
 R: *It is his responsibility to, how can I put it, he mustn't do things that I shouldn't be doing or that I'm not interested in or that I don't know about.*

Respondent 5:

*I think the man should play the main role if I can call it that. I think she must just go along with what he does and make it nice for him.*

According to Campbell (1995), traditional socialisation teach men and women that "real men" initiate sex and are in charge of sex from beginning to end. As a result men and women are taught to believe that men must know everything about sex, that they must always be ready and willing to have sex and that men must be aggressors and active participants in all sexual encounters. Boys learn that sex is something they are expected to do to girls and girls learn that sex is something that is supposed to happen to them. This obviously runs counter to sexual agency for both sexes, because what the individual wants or feels is secondary in this discourse.

### 2.2.2 The double standard

Traditional male and female roles prescribe a double standard for men and woman, namely sexual abstinence for women and sexual permissiveness for men. The interview data indicate that the double standard for men and women were accepted and reproduced in the respondents' community.

Respondent 16:

*...Now he didn't know that I already had sex. And one evening we got together (meaning kissing and petting) and then I said to him: "look here, X, I must tell you that I'm not a virgin anymore". And then his face just changed like that. Now I don't know why his face changed like that, if he perhaps wanted to be the one. But I didn't ask him about it. And then he perhaps took it like this: "Look here, you're not a virgin anymore, now I can get anything that I want". I'm sure that was what he thought.*

Later in the interview respondent 16 said:

*But what I understood was that he and another girl got together. But he said he was drunk and the girl was also drunk. Now he says he doesn't know if he had sex with her or not. Then I said to him: If you did it or not, I don't want to know about your past things. It has nothing to do with me. It's your past. It has nothing to do with me.*

In the above excerpts it is clear that the girl's past sexual behaviour is an important issue, while the man's past sexual behaviour is dismissed as irrelevant. It is not clear if the girl's past sexual behaviour was so important to him, but *she* perceived it as important to him and she interpreted his non-verbal reaction in that way. Even if her dismissal of his past sexual behaviour was based on her feeling that she could not accuse him because she was also guilty, she was still reproducing the traditional double standard by accepting that her past sexual behaviour is undesirable. The further consequence was that she did not question him about his past sexual behaviour to determine whether he was a risk for a sexually transmitted disease.

### 2.2.3 Men's power and women's dependency

The respondents' narratives showed that they perceived men to have more power in relationships than women. This was portrayed in the fear that boyfriends might leave them if they were displeased. Respondent 5 who had a long standing relationship of three years with her boyfriend mentioned the following regarding her oral sex interaction with her boyfriend:

R: If he does it with me and he, ok he uses his tongue to press in the vagina's opening. Many times it feels uncomfortable to me, because his tongue, he uses his tongue, but then he presses too hard and perhaps it is painful or it feels uncomfortable. I'm too afraid to tell him that I don't like it and when he has oral sex with me then I feel I have a duty to also do it with him. I think he expects me to ... I have done it with you and now you must do it with me. Then I do it against my will, just to satisfy him.

I: You said that you're afraid to tell him. Why is that? What do you think will happen?

R: He will, he will not do anything. He will, he will, he always says to me that if there if anything that he does that I don't feel right about or that makes me uncomfortable that I must tell him. But I don't know, I don't know why ... why I can't say it to him. I can say many things to him, but it takes me a while before I have the guts to say it to him. It took me a very long time to say to him: "I feel uncomfortable to touch you because it feels to me that you may think that I want to make love". When I'm uncomfortable to say something to him: He always says: "It doesn't matter, just come out with it".

#### Respondent 11:

I: Do you and X sometimes talk about sex?

R: Yes, we talk.

I: What about?

R: He will perhaps ask me if I enjoyed it or something like that, then I say it was nice.

I: It sounds as if it is not really the truth that you tell him. Do you think that is what he wants to hear?

R: Yes, because a lot of girls are chasing him. Now, I don't want that.

I: What do you mean?

R: That a lot of girls chase him, because the girls...

I: Are you saying that you want to keep him satisfied, because some other girls may take him away from you?

R: Yes.

Both of the above girls had a vague but very powerful conviction that they would lose their boyfriends if their boyfriends perceived the girls' feedback as criticism of their sexual prowess. During the interviews they seemed surprised when they realised that their fear was mainly in their own minds and that their boyfriends neither actually threatened to leave nor left when they spoke their minds. It was almost as if the girls maintained men in their stereotypical gender positions even if the men's behaviour itself did not warrant it. Something else that is clearly illustrated in the two excerpts is that the girls did not perceive it as a right that their sexual discomfort or pleasure must be considered by a man. It is something that the man had the power to bestow or withhold.

The existence of very stereotypical gender roles in adolescent subcultures and the power imbalances implicit in these roles, are also reported in the literature. According to Kalof

(1995) the sexual sphere is still imbued with power and control of men over women, and this power imbalance is particularly acute in youth cultures that are rigidly gender role stereotyped. It is argued that the social and sexual relationships between young females and males are far from equal, despite indications of greater equality in young, heterosexual relationships and that first sexual encounters are more often the result of mutual initiative between partners than were the case in the past. This means that conventional gender identities, sexual tastes and skills are reproduced and not rejected during adolescence. Because of the patriarchal nature of adolescent subcultures, girls are seen as possessions of their boyfriends, always on display, and distanced from having an independent experience or identity of their own. This is illustrated in the next excerpt:

**Respondent 2:**

*There are times when he scolds me. He doesn't understand that I'm still young. I also want to enjoy myself. But he restricts me very much ("hou vir my baie vas"). I don't restrict him. If he says: "I've been there and there", I rather say nothing. But if he asks me where was I today, then perhaps I say I've been with a tjom of mine. Then he asks, yes, what was I looking for there. Then I ask him: "Hey, what is the problem? It's just a friend". It's like this ... he's jealous. I don't know how he is, he just difficult ("anderster").*

Although this respondent showed awareness of the inequality, she was cautious to confront him directly about his possessiveness. When asked if she would obey his wishes, she responded affirmatively.

Social exchange theory and power-dependency theory are two theories that are often used for viewing patterns of behaviour in relationships as closely related to the way in which the partners participate in the larger culture. Power-dependency theory argues that one person's power in a relationship resides in the dependency of another. Cancian (as cited in Kalof, 1995) used exchange theory to further clarify the link between love, dependency, and power. Cancian stated that both sexes tend to believe that men control the important resources in a relationship and that women need those resources more than men. Both sexes tend to ignore or underestimate those resources that women control and men need. Cancian (as cited in Kalof, 1995) further argued:

*Thus, men's dependency on women remains covert and repressed, while women's dependency on men is overt and exaggerated; and it is overt dependency that affects power ... a woman's potential power over a man is*

usually undercut because the services she provides are devalued and his need for them is denied (p. 233).

The girls' narratives confirmed this argument. They indicated no awareness of their boyfriends' emotional needs or their boyfriends' dependence on them, despite the fact that some of them related their boyfriends' sensitivity and caring toward them. Respondent 4 said:

He works at X, but he fetches me from school every day and in the morning he takes me to school. Because he says he wants to see more of me. He wants to spend more time with me.

Hollway (1984a) argued that feminists have challenged the so-called natural sex drive of men, but have replaced it with the power of the penis which "grants men's sexuality a monolithic power over us" (p. 64). This position places women as victims of male sexuality. Hollway (1984a) advocated that women's power in heterosexual relationships need to be recognised. Power can be conceptualised as inherent in all social relations. It is "two-way dynamic, negotiated – reproduced or challenged – in every interaction" (Hollway, 1984a, p.64). Power can be resisted and is itself resistance. This means that women are not simply victims of male sexuality, because power and resistance can be seen in sexual relations. According to Hollway (1984a), they are not direct or overt actions, but are negotiated through the meanings of sex.

Hollway (1984a, 1989) introduced three major discourses of sexuality: "the discourse of sex as a natural drive for men"; the "have/hold discourse"; and the "permissive discourse". Negotiations between men and women take place within these three discourses. Each discourse limits the negotiation in some way. The discourse of sex as a natural drive for men implies unequal power because it specifies different positions for women and men. Women become the objects and men experience themselves as subjects. The woman is silent and there is little possibility for negotiation. The respondents in this study seem to negotiate their early sexual interaction within this discourse. Those respondents who were involved in a long standing committed relationship reported sexual interactions later in their relationships that seemed positioned within the second discourse that Hollway (1984a, 1989) has identified, namely the have/hold discourse. The have/hold discourse gives women some power. The man commits himself to his female partner. In this process he has rights to her, but also has responsibilities towards her. Within the permissive

discourse, the woman has equal access to sexual desire. Theoretically, this discourse also allows the most space for negotiation. Women can actively initiate a sexual relationship based on the idea that women's natural sex drives are the same as men's. In this way women can gather sexual experience and it is as sexually experienced beings that women can best negotiate. In placing herself within this discourse, the woman, however, risks being categorised as a whore.

The girls in this study were very adamant that men should initiate sex and also direct sexual interaction during sex. Articulating their own sexual desires or making specific sexual requests are completely unthinkable or happen in an unarticulated, almost clandestine way. This is highlighted in the following excerpt:

Respondent 9:

*And he will ... I will never touch him first. He will start necking first and hmmm, as I told you, he likes me to bite his ear and to tickle his neck. But he must bring my head down to his neck. I will never do it first.*

*I: Why won't you do it first?*

*R: Why not? It looks too forward. Maybe he doesn't want to. Then I cannot simply touch him...*

It is clear, therefore, that these girls could not conceive of participating in a more "permissive" sexual discourse. Kippax et al. (1990) proposed that the permissive discourse offers more opportunity for the transformation of sexual behaviour. A promiscuous woman may be in a better position to protect herself from HIV infection than the faithful wife and mother. They argued that if women are positioned as objects of desire within the discourses in which their sexuality is portrayed as absent or complementary to men's sexuality, they will not be in a position to negotiate sex. The characteristics of virgin, nurturer, faithful, committed are not the characteristics of the skillful negotiator. The characteristics of lover, desiring, passionate, seductive and inventive are. They also suggested that a fourth sexual discourse that places women's sexuality at the centre, is needed (Kippax et al., 1990). I agree with the idea of developing a fourth discourse, because I doubt the viability of promoting the permissive discourse in the research community. Stereotypical ideas of masculinity and femininity are too deeply entrenched in this community. Such a fourth discourse of sexuality must acknowledge and validate young women's sexuality, particularly the sexual needs, desires and pleasures of young women.

I also want to emphasise the argument put forward by Holland et al. (1990) that in the context of sexual encounters, the empowerment of women does not have to result in women exercising power over men, or behaving like men. Simple role reversals can also be viewed as a form of disempowerment for women. Sexual empowerment is a process in which women struggle to negotiate with men to increase control over their own sexuality. Effective sexual empowerment can entail different options: not engaging in sexual activity, not engaging in sexual activity without informed consent, getting men to consent to safer practices or negotiating sexual practices which are pleasurable to women as well as to men (Holland et al., 1990).

### 2.3 The socio-economic and political context and its impact on individual interactions

In this section two prominent discourses of sexual disempowerment (discourse of danger and gender discourses/discourse of femininity) and two important individual agents of sexual disempowerment (mothers and men) were identified. These discourses and individual agents are, however, imbedded in a community context and socio-economic environment that contribute to, impact on and influence the available sexual discourses and the role definitions of boyfriends/husbands and mothers. As discussed in chapter 5, some of the girls who were interviewed, lived in very poor environments where physical abuse of women, substance abuse, material need and gang violence are part of everyday life. Good descriptions of living conditions among the poorer respondents were found in the interview of respondent 7:

*The money that we get from the welfare doesn't really help us. My mother is a drinker, my father is a drinker, my mother is a smoker, my father is a smoker. The money also goes to the shebeens. We don't get any of the money. When we tell our mother that we need clothes or shoes then she promises us that we can buy it. But when the time comes then nothing happens ... I feel very bad then. I cry or I tell my grandma. But my granny can also do nothing. It goes like that every month. Nobody can do anything. When they get the money they spend it on drink ... My father hits my mother. He hits her with the fist. Once he threw me with a saucer behind the head and he stabbed her with a knife in the head and both of us had to go to the hospital.*

#### Respondent 12 :

*Where I live things are rough. People shoot each other. The Americans - they are rude things. They are rude gangsters. They threaten the girls with guns.*

In the above excerpts it is clear that women are often victimised, hurt and harassed by men. Women are perceived as powerless and also perceive themselves as powerless in

relation to men. The socio-economic environment, therefore, must also be considered as contributing to sexual discourses within which women are disempowered.

Although it is dangerous to generalise, research has showed that people in lower socio-economic and disadvantaged racial and ethnic groupings often have little hope for the future (Brindis, 1993; Chilman, 1980). They view society as hostile and dangerous and themselves as powerless. They tend to react to the situation of the moment and take risks because they find life basically uncontrollable anyway (Brindis, 1993). In South Africa the policy of racial discrimination was superimposed on the effect of socio-economic status. This policy institutionalised lower class status and deprivation for the larger coloured population (Du Pre, 1997). For a long time people had very little control over their own lives. The government dictated where one lived and went to school. The government also dictated that coloured people were second class citizens. It is possible that a reactionary mindset or life philosophy has developed over time among the poorer members of the coloured community. Whether and how this hypothesis bears out in the lower socio-economic, coloured communities in South Africa, and how it impacts on female sexuality is not known.

According to Thompson (1992), the working class adolescent girl depends much on her intimate life, because little is expected from work. There are also the traditional expectations about the stability of intimate life. The prospect of a career or having a working life has not significantly influenced girls' dedication to the quest for romance. Wyatt (1997) believes that poor and uneducated adolescents do not have opportunities for building skills and self-confidence. They do not set themselves goals like completing school or aspiring to university and therefore lack the kind of goals that may help them to defer sexual intercourse. Despite feminism's accent on fulfillment through work, these girls do not expect to find meaning through work. Work or career only has importance as a way of financing love. Girls from a working class background expect to work only to help take care of a family (Thompson, 1992). It seems then that the future perspective of lower socio-economic women, who in western countries often also are women of colour, centre on traditional expectations of marriage and children. They are therefore also likely to construct their sexuality within the parameters of marriage and children.

In the following section the conclusion of the grounded theory analysis will be presented.



### 3. Conclusion: The meaning and experience of sex

The qualitative research goal was to gain an understanding of the meaning and experience of sex for the respondents. It became clear to the researcher that sex as the assertion of agency and sex as a means to connection are important concepts in this understanding.

#### 3.1 Sex as agency

The developmental literature on adolescence suggests that much of adolescent behaviour is about individuation and separation, about trying out different roles, identities, personalities and ways of behaving. One would then also expect sexual behaviour to have this kind of meaning for the adolescent: that the act of sexual intercourse is understood as a way of being her own person, confirming her own agency. In the current study, however, sexual behaviour was seldom understood as moments of agency. A pervasive thread in all the interviews was the girls' lack of sexual agency. The narratives of sexual intercourse suggested that even if the verbal interaction during sexual intercourse explicitly gave the girl the power to exercise her preference, few of the girls actually felt like empowered agents during the act of sexual intercourse. Their feelings of agency were hampered by moral and danger discourses (mainly articulated by their mothers); gender discourses (boyfriends and general society implicitly suggesting that men are supposed to be the sexual agents); and a more general socio-economic and political disempowerment.

According to Harré (as cited in Beyers, 1996), autonomy and reflexivity are the key concepts in understanding of human agency. Reflexivity is the ability to use certain principles to reflect on the suitability of different options. Autonomy refers to the ability to envision a range of actions or options, to choose between different options and to act on that choice. Sexual agency can therefore be defined as the ability to use certain principles to reflect on the suitability of different options regarding sexual behaviour, as well as the ability to envision and choose between different options and to act on that choice. When this definition is applied to the respondents, the lack of sexual agency is even more prominent. It is clear that these girls did not identify a range of possible actions regarding their sexuality, nor did they reflect on the suitability of different options, nor did they manifest the capacity to choose between different options and to act autonomously on that choice.

The concept of agency in the social constructionist approach is much-debated (Fisher, 1999; Gergen, 1995; Gergen, 1999; Shotter, 1995). Howard and Hollander (1997) argued on the one hand that social constructionism with its emphasis on individual agency, minimises the constraints of social structures and the effects of power inequities. According to them one's gender, class position, race and sexuality can limit the range of actions that people can envision and perform. Some people have more choice than others. Howard and Hollander (1997) urged that the reality of institutional and interpersonal constraints must be recognised. Fisher (1997) on the other hand accused social constructionism of just the opposite, namely that they equate human agency with social context and therefore rob the definition of any form of self-determination. He argued that agency has some point of origin in the individual. Gergen (1995) stated that these authors do not understand the social constructionist definition of human agency. According to Gergen (1999) the social constructionist view of human agency is that it is constitutive in nature. Human agency is achieved in relationship with one's context (Gergen, 1999). For the purpose of this study the social constructionist understanding of human agency will be used, namely that human agency is neither an individual characteristic or solely dependent on one's context. It is a product of people in relationship. It has been argued in section 2 of this chapter that several disempowering agents interacted with the respondents in a very specific socio-economic context to create largely sexually disempowered individuals.

The respondents had a very traditional view of masculinity and femininity. In this traditional view men's sexuality is accepted as a strong, natural urge that must be accommodated by females. Men are seen as the sexual agents who should take responsibility for the initiation of sexual interaction and for contraception. These young girls expected sex to be painful and hoped that it would improve as time passes. They had no perspective that pleasure is something that may and can be actively claimed by them. They had limited language to talk about sex and to articulate the stirrings of desire and pleasure that many of them felt. This perceived lack of sexual agency may be related to a more general sense of disempowerment of girls from low-income families.

The consequences of lack of sexual agency were that these young women did not perceive and experience their sexuality as something that they could and should control. They therefore exercised little control over the when, why and how of their sexual interactions. Because they did not perceive themselves as sexual agents there was no

need to reflect on the consequences of sexual interaction. It was something that happened to one.

Lack of sexual agency or sexual disempowerment in women is not a new finding. As early as the 1960s and 1970s researchers have identified the lack of a positive female sexuality as a root cause for female sexual disempowerment (Laws & Schwarts, 1977). Since then other researchers (Holland et al., 1990; Kippax et al., 1990; Tolman, 1997; Vance 1989) have also identified and analysed this phenomenon. All of them concluded that women need to claim their own sexuality and learn to know their own desires, pleasures and experiences. They also concluded that this basis of knowledge and experience is essential if women are to manage their sexuality responsibly. They advocated the development of a new discourse for sexual agency for young women. The message must be brought across that parents and educators should not try to protect young girls' "innocence" till they are confronted with a male's request for sex. This belief that young girls' sexual innocence should be protected leads to young girls without an awareness, knowledge and ownership of their own sexuality. Without these they have few guidelines and skills to know and manage their sexuality responsibly (Tolman, 1997; Tolman & Szalacha, 1999). Girls "should be empowered to know and act on their own desire, a different educational direction than the simplistic strategies for avoiding boys' desire that they are offered" (Tolman, 1997, p. 184).

### 3.2 Sex as connection

In the above section it was argued that the respondents did not experience sex as individuation, separation and agency. The question must then be posed whether sex was experienced as a way to connect to others as is suggested by self-in-relation theorists. My analysis indicates that sex can indeed be viewed as a complex way for these girls to connect with men, while they strive to maintain a connection with their mothers. I will also argue that this wish for connection can be utilised as a source of sexual empowerment.

#### 3.2.1 Sex as connection with mothers

It was shown that the respondents tried to maintain a connection with their mothers by presenting themselves as sexually innocent. In the daughters' persistent investment in connection with their mothers, lies a powerful resource for the psychological and sexual

empowerment of women. It means that the connection with their mothers are important to the daughters. Mothers can be key figures in their daughters' sexual empowerment. If mothers can reconstruct their daughters' sexuality as valid, valuable and in need of guidance and empowerment, sexual activity will perhaps no longer necessitate secrecy and distancing from the mother. Daughters' sexuality and sexual development may even provide a basis for connection and closeness between mothers and daughters. Perhaps then daughters will not find it necessary to deceive their mothers and the mother-daughter relationship can be a space where daughters can share their sexual experiences, reflect on their experiences and receive guidance.

Even though mothers may not always have a close relationship with their daughters, they can provide a safe space for daughters to talk about feelings and experiences around sex and men. In this way they can empower their daughters by giving them space for reflection, giving them words for experiences and facilitating ideas about what is beneficial for the girls. According to Flaake (1993), mothers can confirm their daughters' sexuality. They can allow their daughters a sense of their own body and femininity as an important source of satisfaction. Without their mothers fulfilling this role, girls are either dependent on a friend or they keep it to themselves. Either way, the scope for reflection on their sexuality is very limited. This causes them to be even more dependent on their boyfriends' perception of their sexuality.

The question is, however, whether mothers in this community can provide these spaces. They, also, function in socio-economic and gender contexts where they have been disempowered sexually. They are often uneducated and have grown up in a community where male dominance is the rule. The community does not validate a positive female sexuality that acknowledges women's sexual needs, preferences and pleasure. This means that the mothers are likely to be disempowered themselves and will be unable to provide their daughters with these empowering spaces. Perhaps the only viable solution then is to empower young girls to open up that space for themselves and ultimately to offer that space to their own daughters.

### 3.2.2 Sex as connection with men

With the exception of one respondent, first sexual intercourse formed part of the girls' need to be connected with a man. As shown, this need for connection seemed to be less a romantic need and more a pragmatic progression that connected the girls to community

and peer group expectations. Although most of the girls talked surprisingly little about romance and love, many of the respondents talked about how their male partners demonstrated care for their well-being. Almost all of them indicated that the men presented them with spaces to exercise their preferences regarding sexual interaction. All the girls failed to utilise these spaces to explore their sexual needs, desires and pleasure at a pace that suited them. They were socialised to expect men to make sex "happen". Again, this is a potentially powerful resource in the sexual empowerment of women. The discourse of male sexuality as dominating and uncontrollable should be challenged. Young women should be socialised to see and treat men as partners instead of the dominant sexual agents. Maybe then young women will be able to utilise the spaces that even working-class males seem to present to women. This will enable them to connect with their male partners as friends and equal sexual agents in stead of symbols of constructed masculinity.

### 3.2.3 A new discourse of sexual agency

If working class girls are to develop sexual agency, a new discourse of sexual agency for young women will have to be introduced. A necessary basis for this new discourse, however, is that young girls' sexuality must be validated. It is also important that young women develop alternative resources to a sense of self and empowerment that are not tied to traditional ideas of sex, power, and femininity (Kalof, 1994). According to Holland and Eisenhart (as cited in Kalof, 1994) young American black women have more equalitarian ideas about womanhood, they avoid exploitation and they have a strong sense of independence. Kalof (1994) found that egalitarianism had a substantial negative influence on participation in unwanted sex for the black female adolescents in her study. This desired new discourse of sexual agency will be highlighted in the next and last chapter that consists of final conclusions, recommendations and a critical review of this research.

## CHAPTER 8

### SUMMARY OF FINDINGS, RECOMMENDATIONS AND CRITICAL REVIEW

In this chapter the main findings will be summarised, recommendations for future research, as well as a critical review of the research study will be presented. The recommendations and limitations are not comprehensive and exhaustive, but rather represent the most critical issues for the researcher.

1. Findings
  - 1.1 Quantitative findings
    - 1.1.1 Range of sexual behaviours: The results of this study regarding the age at first date, age of menarche, kissing and petting, masturbation, sexual intercourse and homosexual experience correspond with available data on American and European adolescents. The age at first intercourse is lower than reported in international studies, but correspond with the findings of South African studies.
    - 1.1.2 Communication about sex: The respondents indicated that mothers are the primary source of sex education, but that friends are the primary resource when discussing sex and contraception.
    - 1.1.3 Sexual coercion and abuse: The incidence of sexual abuse, coercive sex and rape was found to be small among this group of respondents.
    - 1.1.4 High-risk sexual behaviour: The sexually active respondents demonstrated high-risk sexual behaviour group when their ineffective contraceptive practices are taken into consideration. However, when the incidence of other high-risk sexual behaviours like anal and oral sex, sex with multiple partners, incidence of pregnancy, and frequency of sexual intercourse are taken into account, they do not represent a high-risk sexual behaviour group.
    - 1.1.5 High-risk health behaviour: In comparison with the non-sexually active group, the sexually active group respondents demonstrated more high-risk health behaviours like smoking cigarettes, using alcohol and failing grades.

1.1.6 Conclusion: The conclusion was reached that the quantitative data provided information about the sexual behaviours of the respondents, but it did not provide an understanding of how adolescent girls experience and construct sexuality.

## 1.2 Qualitative understanding

Limited sexual agency was identified as central in the understanding of this group of sexually active adolescent girls. I showed that these girls do not own their sexuality. I argued that mothers and boyfriends were important individual agents of sexual disempowerment and how the girls' need for connection played an important role in this process of disempowerment. I indicated that this need for connection can be redefined as a resource for sexual empowerment and that both these individual agents and the discourses around these agents can be utilised to enhance a sense of sexual agency in these girls. I also argued that the socio-economic environment must be acknowledged as an important context for the understanding of the limited sexual agency.

## 2. Recommendations

In this section recommendations for future research will be made. Some of the recommendations follow on limitations that are identified in section 3.

### 2.1 A new discourse of sexual agency for young women

The most important recommendation flowing from this study is that a new discourse of sexual agency for young women is necessary. This is certainly not a new recommendation. I am simply adding my voice to researchers like Fine (1988), Hollway (1984), Thompson (1992), Tolman, (1997) and Tolman and Szalacha (1999). It is alarming that despite the fact that researchers have already in the 1980s started to advocate a new discourse of sexual agency for young women, this advocacy had little effect on sex education in South Africa. Currently, as far as I am aware, a new discourse of sexual agency for young women, is not yet actively implemented in sex education programmes in South Africa and the prominent sexually disempowering agents have not been harnessed yet. It is even more alarming considering that much is nowadays made of the need for sex education as part of life skills programmes to address the crisis proportions of HIV/AIDS in our country. Although one can propose several reasons why the demands for a new discourse of sexual agency for young women is not taken up by the relevant state

institutions like the South African Departments of Education and Health, it seems vital that an understanding is gained of this lack of active implementation on the side of government institutions. It would perhaps be constructive to make this the topic of future research. It also seems vital that the advocacy for a new discourse of sexual agency for young women must be strengthened in South Africa. It is not enough that researchers/academics identify the necessity of a new discourse in academic papers and conference papers.

Regarding the content of a new discourse of sexual agency for young women, Thompson (1990) suggested that instead of a "just say no" message, the message to young women should be "just say, not until I know I want you". For this last message girls need a sexual education that validates body exploration, masturbation and orgasm as real and valued experiences in young girls' lives. A new discourse of sexual agency for young women should therefore:

- acknowledge and validate that young women are sexual beings with sexual needs, desires and pleasures;
- acknowledge and validate that sexual development and the exploration of sexual needs, desires and pleasures are a valuable and essential part of normal adolescent female development;
- promote the idea that parents and educators should encourage girls and young women to explore and reflect on sexual needs, experiences, desires and pleasures.
- promote the articulation of and reflection on sexual feelings, desires and pleasures in appropriate interactional spaces; and
- promote the idea that the relationship with mothers should provide a safe space where daughters can articulate and reflect on sexual feelings, desires, pleasures and other sexual experiences.

## 2.2 Psychoanalytical and feminist object-relations theory as theoretical framework for female sexuality

Despite the fact that some researchers like Apter (1990) and Thompson (1990) referred to separation, autonomy and connection as important concepts in understanding young women's sexuality, these concepts were not explored in depth in this study. These concepts have not been employed by other researchers, either, to develop a theoretical framework for adolescent female sexuality. The grounded theory analysis in the current study indicated that these concepts have potential for theorising adolescent female



sexuality. It is recommended that the relevance of these concepts for young South African women in different communities be explored in future research.

### 2.3 More community based sexuality research

Although the conclusions of this study show many similarities with studies done in other adolescent communities across the world, it does not mean that sexuality is a universal phenomenon that is understood in the same way across the world. This study has shown that the respondents exhibited a very limited sense of sexual agency when compared with the findings of other studies. There was no awareness of a positive, pro-active female sexuality. These girls constructed sexuality in terms of traditional gender stereotypes. The respondents also had no awareness that these traditional gender stereotypes could and should be challenged and replaced.

The heterosexual arena in which sexual interactions took place also had a community-specific character. The rituals and terms for heterosexual intimacy are different, for example, to the rituals and terms for heterosexual intimacy in white, professional communities. The terms "burke" for a boyfriend, "speen" signifying having an intimate relationship, "raak bymekaar/bymekaar raak" signifying petting or necking, "water breek" signifying both male and female orgasm, and the many different terms used for the male and female genitals are quite community-specific. I believe that these different terms signify a community-specific understanding of sexuality. I, therefore, concur with the social constructivist viewpoint that language does not only signify meaning, it also becomes meaning. Bruner (1987) for example, states: "For language constructs what it narrates, not only semantically but also pragmatically and stylistically (p. 17). In this way saying "my water het gebreek" construct the orgasm experience and it is a different construction than saying "I had an orgasm". I believe that it is necessary to determine different communities' specific sexuality terminology and that these community-specific terms should be used in research and education efforts. Communities must be allowed to think and reflect about sexuality in their own personalised terms. If they are not allowed to do this, this reflection process becomes alien and external, which defeats the sexual agency purpose.

In conclusion, more of the money (that is currently spent in SA on "safe sex" campaigns) should be utilised to generate quantitative and qualitative data on communities in South

Africa. It is the only way that an adequate understanding of sexuality is going to be gained. This understanding is essential to develop effective reproductive health programmes.

#### 2.4 Combined method research in sexuality should be advocated

It has been shown in this study that quantitative data alone provides little understanding of sexuality in a specific community. It does not tell us why and how sexual behaviour occurs. A combination of quantitative and qualitative methods present a fuller picture of a community's sexuality. Qualitative data also provides information about how and where sex education programmes should be targeted, as well as the appropriate language that should be used in these programmes.

### 3. A critical review of the research

As with any endeavour of this kind, a list of all the study's limitations can be very long. I want to share the following concerns that I have about the study:

- 3.1 Although the combination of quantitative and qualitative data is advantageous in sexuality research, it created dilemmas for the researcher. Besides the mass of data that had to be analysed and condensed, I found it difficult to find a coherent voice for myself because I vacillated between a positivist and a social constructionist voice. As indicated in the dissertation this conflict accurately reflects the status quo in sexuality research today. The fact that I was taught to write in a neutral positivist voice and that I wrote in my second language (one is less venturesome and eloquent in one's second language) aggravated this issue. I often despaired when I read other social constructionists' eloquent and often poetic accounts of their research. Except for opting to only present either the quantitative or the qualitative data alone there was no way that I could resolve this shortcoming. It is inherent in the methodology and the researcher.
- 3.2 The qualitative data that was generated were very rich and detailed. The richness and detail of the data is, I think, not reflected in the dissertation. As a clinical psychologist I am well aware that the data and even just the excerpts presented in the dissertation could have been analysed and presented in much more psychological depth. The only method, however, that provided adequate structured

guidelines to manage and analyse such a large qualitative database, was the grounded theory method. I have already explained in the introduction to chapter 7 that the grounded theory method is more intent on developing and presenting a theoretical understanding than it is focussed on an in-depth representation of the actual data itself. It would be interesting to use more interpretive analytical methods such as narrative analysis or discourse analysis.

- 3.3 I believe that the role of sexual language is very powerful in the construction of meaning of sexual experiences. Both the questionnaires and the interviews presented the researcher with very rich and varied data regarding sexual language in this community. Although this aspect has been referred to in the study, it has not been explored in the depth it warrants. Such an endeavour would have justified a separate thesis.
- 3.4 As indicated earlier, the findings and conclusions of this study have been co-constructed by the researcher. In part, therefore, this research is the construction of a white (thirty-something), female, middle-class academic who was for all purposes an outsider looking in. One will never know if and/or how the findings and conclusions of an insider researcher would have been different.

#### 4. Resolution and statement of intent

If the idea of a new discourse of sexual agency is to be implemented and developed, one needs to act on it oneself. I intend to implement this recommendation in the researched community by initiating participating education programmes that focuses on developing a new discourse of sexual agency for young women in this community. I hope to soon report on the progress of this initiative.

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## APPENDIX A

## VRAELYS

Hierdie vraelys is streng vertroulik. Jy hoef nie jou naam hierop te skryf nie. Niemand sal dus weet dat dit jou antwoorde is nie. Wees dus asseblief heeltemal eerlik.

**BEANTWOORD ASSEBLIEF AL DIE VRAE. BY SOMMIGE VRAE MOET JY 'N KRUISIE (X) IN DIE BLOKKIE MAAK BY DIE ANTWOORD WAT JY KIES. BY ANDER VRAE MOET JY JOU ANTWOORD SELF INSKRYF IN DIE PLEK WAT DAARVOOR GELAAT WORD.**

1. Hoe oud is jy? 13 14 15 16 17 18 19 20 21
2. In watter graad is jy vanjaar? 7 8 9 10 11 12
3. Waar woon jy?      Dorp    Plaas    Ander (verduidelik) \_\_\_\_\_
4. Hoeveel mense bly altesaam in jou huis? 2 3 4 5 6 7 8 9 10 Meer
5. Hoeveel broers en susters het jy? 0 1 2 3 4 5 6 7 8 9 10 Meer
6. Is jou eie ma en pa getroud?      Ja    Nee
7. Bly jou eie ma en pa saam met mekaar in die huis waarin jy woon?      Ja    Nee
8. Watter werk doen jou ma? \_\_\_\_\_  
(Spesifiseer)
9. Watter werk doen jou pa? \_\_\_\_\_  
(Spesifiseer)
10. Werk jy vir betaling buite skoolure?      Ja    Nee
11. Indien jy wel werk, watter tipe werk doen jy? \_\_\_\_\_
12. Hoeveel verdien jy per week? \_\_\_\_\_  
\_\_\_\_\_
13. Hoeveel vertrekke het jou huis? 1 2 3 4 5 6 7 Meer
14. Hoeveel slaapkamers het jou huis? 1 2 3 4 5 Meer
15. Wie slaap saam met jou in een slaapkamer? \_\_\_\_\_
16. Met wie deel jy saans 'n bed? \_\_\_\_\_
17. Is daar 'n badkamer in jou huis?      Ja    Nee

18. Is daar elektrisiteit in jou huis?  Ja  Nee
19. Rook jy?  Ja  Nee
20. Hoeveel sigarette per dag? \_\_\_\_\_
21. Gebruik jy soms alkohol  Ja  Nee
22. Hoe gereeld gebruik jy alkohol? \_\_\_\_\_
23. Watter soort alkohol gebruik jy? \_\_\_\_\_
24. Hoeveel alkohol gebruik jy wanneer jy wel drink? \_\_\_\_\_
25. Gebruik jy ander dwelmmiddels of substansie?  Ja  Nee
26. Hoe dikwels gebruik jy ander dwelmmiddels of substansie? \_\_\_\_\_
27. Watter soort dwelmmiddels of substansie gebruik jy? \_\_\_\_\_
- 
28. Aan watter kerk of geloof behoort jy? \_\_\_\_\_
29. Hoe dikwels woon jy kerkgeleentede by? \_\_\_\_\_
30. Is jy 'n persoon wat elke dag skool bywoon, behalwe wanneer jy siek is?  Ja  Nee
31. Indien jy nie gereeld skool bywoon nie, wat is die redes hiervoor? \_\_\_\_\_
- 
32. Is jou ouers streng met jou oor wanneer jy uitgaan, met wie jy uitgaan en wanneer jy terug moet wees by die huis?  Ja  Nee
33. Het jy al ooit 'n standerd gedruip?  Ja  Nee
34. Wat was jou punt of simbool vir die standerd waarin jy verlede jaar was? \_\_\_\_\_
- 

### VRAELYS OOR SEKSUALITEIT

**Onthou asb. weer dat hierdie vraelys vertroulik is. Jy kan dus regtig heeltemal eerlik wees. Niemand sal weet dat jy die vraelys ingevul het nie.**

(Onthou ook asb. dat wanneer die woord seks gebruik word, beteken dit: wanneer die man se geslagsdeel binne in die vroulike geslagsdeel gesit word.)

35. Watter woord of woorde gebruik jy wanneer jy van seks praat? \_\_\_\_\_  
\_\_\_\_\_
36. Watter woord of woorde gebruik jy wanneer jy van die manlike geslagsdeel praat?  
\_\_\_\_\_
37. Watter woord of woorde gebruik jy wanneer jy van die vroulike geslagsdeel praat?  
\_\_\_\_\_
38. Watter woord of woorde gebruik jy wanneer jy praat van wanneer jy jou eie geslagsdele streef of stimuleer? \_\_\_\_\_
39. Wat verstaan jy onder die woord "verkrag"? \_\_\_\_\_
40. Wat verstaan jy onder die woord "gemolesteer"? \_\_\_\_\_
41. Hoe oud was jy toe jy vir die eerste keer met 'n ou uitgegaan het? \_\_\_\_\_ Jaar oud
42. Wie het jou van seks geleer? (Merk een of meer blokkies)
- |                                      |                          |                     |                          |
|--------------------------------------|--------------------------|---------------------|--------------------------|
| Vriende                              | <input type="checkbox"/> | Ma                  | <input type="checkbox"/> |
| Broer/Suster                         | <input type="checkbox"/> | Pa                  | <input type="checkbox"/> |
| Boeke/Tydskrifte                     | <input type="checkbox"/> | Ander familieledede | <input type="checkbox"/> |
| Televisie "shows"                    | <input type="checkbox"/> | Fliëks              | <input type="checkbox"/> |
| Seksopvoedingsklasse by die skool    | <input type="checkbox"/> | Kerk                | <input type="checkbox"/> |
| Enige ander mense: (skryf hier neer) | _____                    |                     |                          |
43. Hoeveel seksuele ondervinding het jy in vergelyking met die ondervinding wat jou vriende het? (Merk asb net een blokkie)
- Ek het minder ervaring
- Ek het dieselfde hoeveelheid ervaring
- Ek het meer ervaring
44. Hoe vergelyk jou kennis van seks met die kennis van jou vriende? (Merk asb. net een blokkie)
- Ek weet minder van seks.
- Ek weet omtrent dieselfde as hulle.
- Ek weet meer van seks.
45. Het jy al ooit seks met 'n man gehad?
- Nee  Ja
46. Hoe oud was jy toe jy die eerste keer seks met 'n man gehad het?  
(Skryf asb hieronder neer hoe oud jy was.)  
\_\_\_\_\_ Jaar oud

47. Het jy al ooit seksueel verkeer met 'n ander meisie of vrou?

Nee  Ja

48. Het 'n man al ooit druk op jou geplaas/jou geforseer om seks met hom te hê?

Nee  Ja

49. Het jy toe seks met hom gehad?

Nee  Ja  Nie op my van toepassing nie

50. Indien jy by vraag 49 ja geantwoord het, was hierdie man 'n

pa   
 broer   
 boyfriend   
 oupa   
 ander familielid   
 vriend   
 ander (spesifiseer)  \_\_\_\_\_

51. Het jy al ooit seks gehad wat jy nie regtig wou hê nie?

Nee  Ja

52. Is jy al deur 'n man verkrag?

Nee  Ja

53. Indien jy by vraag 52 ja geantwoord het, was hierdie man 'n

pa   
 broer   
 boyfriend   
 oupa   
 ander familielid   
 vriend   
 ander (spesifiseer)  \_\_\_\_\_

54. Is jy al deur 'n man gemolesteer?

Nee  Ja

55. Indien jy by vraag 54 ja geantwoord het, was hierdie man 'n
- pa
  - broer
  - boyfriend
  - oupa
  - ander familielid
  - vriend
  - ander (spesifiseer)  \_\_\_\_\_
56. Indien jy nog nooit seks gehad het nie, hoekom het jy nie?  
(merk een of meer van die volgende)
- Ek wil nie
  - Godsdienstige oortuigings
  - Niemand wil met my seks hê nie
  - Ek is nog nie gereed vir seks nie
  - Ek kan nie kontrasepsie kry nie
  - My ouers wil nie hê dat ek noual seks het nie
  - My vriende wil nie hê dat ek noual seks het nie
  - Ander redes (skryf asb hier neer) \_\_\_\_\_
57. Indien jy reeds seks gehad het, wat het jou laat besluit om die heel **eerste keer** seks te hê?  
(Merk asb een of meer van die volgende.)
- Ek was gereed daarvoor
  - Ek was verlief
  - Al my vriende het al seks gehad
  - Ek was dronk of bedwelm
  - My boyfriend wou seks hê
  - Ek is gedwing om seks te hê
  - Ek wou 'n baba hê
  - Ander redes (Skryf asb hier neer.) \_\_\_\_\_
58. Hoe dikwels gebruik jy kontrasepsie wanneer jy seks het. (Die volgende is almal voorbeelde van voorbehoedmiddels; die pil, kondome, inspuiting, ICD ens.)
- |                                |   |
|--------------------------------|---|
| Nooit <input type="checkbox"/> | Meeste van die tyd <input type="checkbox"/> |
| Soms <input type="checkbox"/>  | Altyd <input type="checkbox"/>              |
59. Indien jy **nie altyd** kontrasepsie gebruik nie, wat is die rede of redes waarom jy dit nie elke keer gebruik wanneer jy seksuele omgang het nie? (Merk asb een of meer van die volgende).
- Dit is nie vir my belangrik nie
  - Ek kan dit nie bekostig nie
  - Ek wil nie hê my ouers moet uitvind dat ek dit gebruik nie
  - Ek weet nie waar om dit te kry nie
  - Ek is te skaam om daarvoor te vra of dit te koop
  - Ek weet nie hoe om daarvoor te praat met my boyfriend nie
  - Ek hou nie daarvan om dit te gebruik nie
  - Dit is teen my godsdienstige oortuigings
  - Soms het ek net nie kontrasepsie by my nie
  - Ek weet nie hoe om kontrasepsie te gebruik nie
  - Ek weet nie watter kontrasepsie om te gebruik nie
  - Ek wil nie die seksuele omgang onderbreek nie

Ander redes (skryf asb hier neer.)

---

60. Indien jy **wel kontrasepsie gebruik** wat is die rede of redes waarom jy kontrasepsie gebruik? (Merk asb. Een of meer van die volgende.)

Ek wil nie swanger raak nie

Ek wil nie 'n seksueel-oordraagbare siekte kry nie

Ek wil nie AIDS/VIGS kry nie

My boyfriend wil hê ek moet dit gebruik

Iemand het my gesê om dit te gebruik

Ander redes (Skryf asb hier neer.)

---

61. Indien jy wel kontrasepsie gebruik, hoe dikwels gebruik jy **kondome** wanneer jy seksuele omgang het?

Nooit  Meeste van die tyd

Soms  Altyd

62. Indien jy kondome gebruik wat is die rede of redes waarom jy kondome gebruik?

Ek wil nie swanger word nie

Ek wil nie 'n seksueel-oordraagbare siekte kry nie

Ek wil nie AIDS/VIGS kry nie

My boyfriend wil hê dat ek dit moet gebruik.

Iemand het vir my gesê om dit te gebruik

Ander redes (Skryf asb hier neer.)

---

63. Indien jy wel kondome gebruik, maar **nie altyd nie**, hoekom gebruik jy nie elke keer kondome wanneer jy seks het nie? (Merk asb. Een of meer van die volgende.)

Dit is nie vir my belangrik nie

Ek gebruik ander goed

Ek kan dit nie bekostig nie

Ek wil nie hê my ouers moet uitvind dat ek dit gebruik nie

Ek weet nie waar om dit te kry nie

Ek is te skaam om daarvoor te vra of dit te koop

Ek weet nie hoe om daarvoor te praat met my boyfriend nie

Ek hou nie daarvan om dit te gebruik nie

Dit is teen my godsdienstige oortuigings

Soms het ek net nie kontrasepsie by my nie

Ek weet nie hoe om kontrasepsie te gebruik nie

Ek weet nie watter kontrasepsie om te gebruik nie

Ek wil nie die seksuele omgang onderbreek nie

Ander redes (skryf asb hier neer.)

---

64. Indien jy **nooit** kondome gebruik nie, wat is die rede of redes hoekom jy nie kondome gebruik wanneer jy seks het nie?
- Dit is nie vir my belangrik nie
- Ek gebruik ander goed
- Ek kan dit nie bekostig nie
- Ek wil nie hê my ouers moet uitvind dat ek dit gebruik nie
- Ek weet nie waar om dit te kry nie
- Ek is te skaam om daarvoor te vra of dit te koop
- Ek weet nie hoe om daarvoor te praat met my boyfriend nie
- Ek hou nie daarvan om dit te gebruik nie
- Dit is teen my godsdienstige oortuigings
- Soms het ek net nie kontrasepsie by my nie
- Ek weet nie hoe om kontrasepsie te gebruik nie
- Ek weet nie watter kontrasepsie om te gebruik nie
- Ek wil nie die seksuele omgang onderbreek nie
- Ander redes (skryf asb hier neer.) \_\_\_\_\_
65. Indien jy kon kies, watter tipe kontrasepsie sou jy wou gebruik of wou hê jou boyfriend moet gebruik?
- I.U.D.  Spons  Die Pil
- Onttrekking  Ritme metode  Kondome
- Skuim/Jellie  Douche  Diafram
- Inspuiting  Ek hou nie daarvan om enige vorm
- van kontrasepsie te gebruik nie
66. Watter van die volgende kontrasepsiemetodes het jy en jou boyfriend **werklik gebruik tydens die afgelope maand?**
- I.U.D.  Spons  Die Pil
- Onttrekking  Ritme metode  Kondome
- Skuim/Jellie  Douche  Diafram
- Inspuiting  Geen
67. Hoe oud was jy toe jy vir die eerste keer gemenstrueer het? \_\_\_\_\_
68. Was jy al ooit swanger?
- Nee  Ja
- Indien jy ja geantwoord het, hoeveel keer was jy al swanger?
- Indien jy ja geantwoord het, wat het met die baba gebeur?  
Het jy die baba:
- Gehou?
- 'n aborsie gehad?
- die baba opgegee vir aanneming?
- 'n miskraam gehad?
- deur familie/vriende laat grootmaak

**Die volgende is 'n nuwe afdeling en het te make met hoe dikwels jy al sekere ondervindinge gehad het.**

**Hoe dikwels het jy elkeen van die volgende ondervindinge gehad tydens die laaste drie maande?** (Merk asb die blokkie wat die meeste op jou van toepassing is.)

69. Uitgegaan op 'n date? (met ander woorde vir ete uitgegaan, gaan dans, braaivleis hou, gaan flik of na 'n partytjie gegaan saam met 'n spesiale seunsvriend/mansvriend).
- |                              |                          |
|------------------------------|--------------------------|
| Nooit                        | <input type="checkbox"/> |
| Minder as een keer per maand | <input type="checkbox"/> |
| een keer 'n maand            | <input type="checkbox"/> |
| elke week                    | <input type="checkbox"/> |
| elke dag                     | <input type="checkbox"/> |
70. Saam met 'n vreemde man/seun huis toe gegaan wat jy op 'n partytjie of by 'n ander bymekaarkomplek ontmoet het?
- |                              |                          |
|------------------------------|--------------------------|
| Nooit                        | <input type="checkbox"/> |
| Minder as een keer per maand | <input type="checkbox"/> |
| een keer 'n maand            | <input type="checkbox"/> |
| elke week                    | <input type="checkbox"/> |
| elke dag                     | <input type="checkbox"/> |
71. Saam met 'n groep vriende (meisies en seuns) uitgegaan op 'n date?
- |                              |                          |
|------------------------------|--------------------------|
| Nooit                        | <input type="checkbox"/> |
| Minder as een keer per maand | <input type="checkbox"/> |
| een keer 'n maand            | <input type="checkbox"/> |
| elke week                    | <input type="checkbox"/> |
| elke dag                     | <input type="checkbox"/> |
72. Gesoen?
- |                              |                          |
|------------------------------|--------------------------|
| Nooit                        | <input type="checkbox"/> |
| Minder as een keer per maand | <input type="checkbox"/> |
| een keer 'n maand            | <input type="checkbox"/> |
| elke week                    | <input type="checkbox"/> |
| elke dag                     | <input type="checkbox"/> |
73. Mekaar streel en vashou?
- |                              |                          |
|------------------------------|--------------------------|
| Nooit                        | <input type="checkbox"/> |
| Minder as een keer per maand | <input type="checkbox"/> |
| een keer 'n maand            | <input type="checkbox"/> |
| elke week                    | <input type="checkbox"/> |
| elke dag                     | <input type="checkbox"/> |



74. Orale seks? (Orale seks beteken dat een seksmaat die geslagsdele van die ander seksmaat met die mond stimuleer.)
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag
75. Seksuele omgang met 'n man
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag
76. Seksuele verkeer met 'n ander meisie of vrou?
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag
77. Alleen gemasturbeer? (Masturbasie beteken wanneer 'n mens self jou eie geslagsdele stimuleer/streel.)
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag
78. 'n Pornografiese film of video gekyk? (Pornografiese films of videos is waarin kaal liggame en sekstonele word gewys word met die doel om mense seksueel op te wek.)
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag
79. 'n Pornografiese tydskrif gelees? (Pornografiese tydskrifte is waarin foto's van kaal liggame en sekstonele gewys en en in woorde beskryf word met die doel om mense seksueel op te wek.)
- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

80. Met jou ouers oor seks gepraat?

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

81. Met jou ouers oor kontrasepsie gepraat? (Kontrasepsie is middels wat mens gebruik om te verhoed dat jy swanger raak of 'n seksueel-oordraagbare siekte kry, bv. Kondome, die pil, die inspuiting)

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

82. Met jou spesiale seunsvriend/mansvriend of boyfriend oor seks gepraat

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

83. Met jou spesiale seunsvriend/mansvriend of boyfriend oor kontrasepsie gepraat?

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

84. Met jou vriende en vriendinne oor seks gepraat?

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

85. Met jou vriende en vriendinne oor kontrasepsie gepraat?

- Nooit
- Minder as een keer per maand
- een keer 'n maand
- elke week
- elke dag

86. Gedwing om seks te hê of seksueel gemolesteer?  
(Ek weet dat dit 'n sensitiewe vraag is, maar hou asb. In gedagte dat jou antwoord vertroulik is en dat niemand sal weet dat dit jou antwoord is nie.)

Nooit   
 Minder as een keer per maand   
 een keer 'n maand   
 elke week   
 elke dag

87. Seksuele fantasieë gehad?

Nooit   
 Minder as een keer per maand   
 een keer 'n maand   
 elke week   
 elke dag

88. Kontrasepsie gebruik

Nooit   
 Minder as een keer per maand   
 een keer 'n maand   
 elke week   
 elke dag

89. Watter van die volgende het jy al self gedoen of aan deelgeneem?: Skryf langs elke blokkie hoeveel kere jy dit al gedoen het of daaraan deelgeneem het?

Anale seks   
 Orale seks   
 Seks in 'n groep   
 Seks met meer as een man tegelyk   
 Seks met 'n vrou

Ander wat nie hier genoem is nie. Beskryf asb. \_\_\_\_\_

**BEANTWOORD ASSEBLIEF DIE VOLGENDE VRAE DEUR 'N KRUISIE TE MAAK IN DIE BLOKKIE LANGS DIE NOMMER WAT OP JOU VAN TOEPASSING IS**

90. Met hoeveel verskillende mans het jy die afgelope jaar seksuele omgang gehad?

0  1  2  3  4  5  6  7  8  9  10  Meer

91. Met hoeveel verskillende mans het jy die afgelope drie maande seksuele omgang gehad?

0  1  2  3  4  5  6  7  8  9  10  Meer

92. Met hoeveel verskillende vrouens het jy die afgeloopde jaar seks gehad?  
 0  1  2  3  4  5  6  7  8  9  10  Meer
93. Met hoeveel verskillende vrouens het jy die afgeloopde drie maande seks gehad?  
 0  1  2  3  4  5  6  7  8  9  10  Meer
94. Hoeveel keer het jy die afgeloopde jaar seksuele omgang gehad?  
 0  1  2  3  4  5  6  7  8  9  10  Meer
95. Hoeveel keer het jy die afgeloopde drie maande seksuele omgang gehad?  
 0  1  2  3  4  5  6  7  8  9  10  Meer
96. Het jy al ooit 'n seksueel-oordraagbare siekte gehad?

Nee  Ja

Indien jy wel al 'n seksueel-oordraagbare siekte gehad het, dui asb hieronder aan watter jy gehad het:

AIDS	<input type="checkbox"/>	Clamydia	<input type="checkbox"/>
Herpes	<input type="checkbox"/>	Gonorrhoea ("the clap")	<input type="checkbox"/>
Luise	<input type="checkbox"/>	Sifilis	<input type="checkbox"/>
Ander	<hr/>		

## APPENDIX B

### Informed consent form for questionnaire respondents

#### Ingeligte toestemmingsvorm

Ek is 'n dosent in Sielkunde aan die Universiteit van Stellenbosch. Jy is miskien bewus daarvan dat ek en my studente verlede jaar van jou vriende of klasmaats opgelei het om seksopvoedingsprogramme in jou skool aan te bied. Terwyl ons besig was om hierdie opleiding aan te bied het ons agtergekom dat ons nie regtig genoeg weet van hoe die jongmense in jou skool hulle seksualiteit verstaan nie. Ons weet ook nie genoeg van hoe julle daarvoor dink en doen nie. Hierdie inligting is vir ons noodsaaklik om seksopleidingsprogramme saam te stel en aan te bied wat vir jou en jou mede-skoliere betekenis sal hê en hopelik 'n verskil in jou lewe sal maak. Ek is ook tans besig om verder te studeer en ek het besluit dat ek die seksualiteit van jong vroue beter wil verstaan sodat ek voorstelle vir beter seksopleidingsprogramme vir jong vroue kan maak. Indien jy besluit om aan hierdie projek deel te neem sal jy my dus ook help om my studies te voltooi.

Ek wil jou vra om deel te wees van hierdie navorsingsprojek waarin ek gaan probeer om jong vrouens se seksualiteit beter te verstaan. Indien jy bereid sal wees om hieraan deel te neem, sal ek van jou vra om op 'n vraelys vrae te beantwoord oor seksualiteit. Hierdie vrae sal gaan oor wat jy dink, voel en doen in jou seksuele lewe. Ek weet dat seksualiteit vir baie mense 'n sensitiewe en private saak is en dat 'n mens nie wil hê dat vreemdelinge hiervan moet weet nie. Jy sal egter nie jou naam op die vraelys skryf nie en ek sal dus nie weet wie jy is nie. Wanneer ek oor hierdie inligting skryf, sal ek ook nie jou skool se naam noem nie.

Op jou vraelys sal daar 'n nommer op 'n plakker wees. Ek sal vir jou vra om hierdie nommer te bewaar. Die rede hiervoor is dat ek moontlik later 'n persoonlike gesprek met jou wil hê. Gedurende hierdie gesprek mag ek jou vra of ek jou vraelys kan gebruik om 'n onderhoud met jou te voer. Indien jy hiertoe instem, kan jy vir my die nommer van jou vraelys gee. Die enigste manier hoe ek dus sal weet watter vraelys deur jou ingevul is, is wanneer jy self besluit om jou nommer vir my te gee.

Die vraelys sal gedurende skooltyd voltooi word. Alle kinders in jou skool wat bereid is om aan die navorsingsprojek deel te neem, sal die vraelys voltooi. Daar sal met jou onderwysers reëlings getref word oor wanneer die vraelys ingevul sal word.

Ek dink dit sal vir jou interessant en leersaam wees om aan hierdie studie deel te neem. Jy mag egter voel dat sommige van die vrae wat ek in die vraelys vra te persoonlik is. Jy moet net onthou dat niemand sal weet dat dit jou inligting is nie. Jy kan ook verder op enige stadium weier om die vraelys te beantwoord of weier om sekere vrae te beantwoord.

Indien sommige van die vrae jou bewus maak van probleme in jou lewe of jy wil graag meer weet oor sekere aspekte, is jy welkom om my by 808 3455 te skakel. Indien ek jou nie self kan help nie, sal ek jou na iemand anders verwys wat kan help.

Wanneer die navorsing voltooi is, sal ek reël dat ek na jou skool toe kom en vir al die meisies in jou standerd terugvoer gee oor wat ons uitgevind het.

Indien jy wil deelneem aan die navorsing, lees asseblief die volgende paragraaf en teken jou handtekening daarby:

Ek verstaan dat ek mag weier om aan hierdie projek deel te neem en dat ek te enige tyd mag weier om daarmee voort te gaan. Ek is ook bewus van die moontlike voordele en nadele wat dit vir my mag inhou. Ek is meegedeel dat die inligting vertroulik sal bly en dat my naam of my skool se naam nooit in dokumente genoem sal word nie. Ek verstaan ook dat ek te enige tyd vrae kan vra en indien ek enige vrae of probleme oor hierdie projek het kan ek die navorser, Elmien Lesch, skakel by 021-8083455. Ek verklaar dat ek hierdie toestemmingsvorm gelees het, dat dit aan my verduidelik is en dat ek dit verstaan. Ek stem hiermee vrywillig in om aan die navorsingsprojek deel te neem.

Naam: \_\_\_\_\_ Handtekening: \_\_\_\_\_

Datum: \_\_\_\_\_

Nadat die meisies in jou klas die vraelyste voltooi is, wil ek graag met omtrent 20 meisies persoonlike onderhoude voer oor hoe hulle weet, dink en voel oor seks. Dit sal my help om jong vrouens se seksualiteit nog beter te verstaan indien ek self met hulle kan praat en nie net hulle antwoorde op 'n vraelys gebruik nie. Indien jy hieronder aandui dat jy hieraan sal wil deelneem, sal ek jou persoonlik kontak. Dit wil sê jou skoolmaats en onderwysers sal nie daarvan weet nie. Die onderhoud sal gevoer word by die Departement Sielkunde by die Universiteit van Stellenbosch. Indien jy nie self vervoer kan kry om daar uit te kom nie, sal ek vir jou vervoer verskaf na die departement toe en weer terug huis toe. Ek sal alleen met jou die gesprek voer. Jou naam sal nie genoem word nie en ek onderneem om dit wat jy in hierdie gesprek gesprek sê, vertroulik te hou. Indien jy bereid sal wees om so 'n gesprek met my te hê, sal ek dit waardeer indien jy dit hieronder aandui.

My naam is \_\_\_\_\_. My ouderdom is \_\_\_\_\_ en ek is in standerd \_\_\_\_\_. Ek stel belang om in 'n persoonlike onderhoud te gesels oor seksualiteit. Ek behou my egter die reg vry om op 'n later stadium te weier om aan so 'n onderhoud deel te neem. Ek verkies om by die volgende telefoonnommer \_\_\_\_\_ of woonadres \_\_\_\_\_ of per brief by my skool \_\_\_\_\_ gekontak word. (Dui asb. aan waar jy verkies dat ek jou moet kontak.) Ek het my eie vervoer Stellenbosch toe: JA/NEE

**APPENDIX C: Tentative questions/cues for interviews**

1. Wat beteken die woord seks vir jou?
2. Watter woord verkies jy om te gebruik wanneer jy praat oor seks?
3. Is dit iets waaroor jy al met ander mense gepraat het?
4. Met wie praat jy oor seks?
5. Het 'n man al aan jou geraak op 'n seksuele manier? Vertel vir my van die eerste keer toe dit gebeur het. Wie het bepaal wat wanneer gebeur? Hoe het dit vir jou gevoel (voor, tydens, na)?
6. Het jy al seks gehad?
7. Wanneer het jy die laaste keer seks gehad?
8. Vertel my die storie van daardie laaste keer?
9. Hoe het dit vir jou gevoel voor, tydens en na seks?
10. Wat het jy met hom gedoen en wat het hy met jou gedoen?
11. Wat het julle gedoen oor kontrasepsie (voor, tydens, na)?
12. Wat is 'n orgasme?
13. Wat is jou woord vir orgasme?
14. Het jy die laaste keer met seks 'n orgasme gehad?
15. Hoe dikwels het jy orgasme met seks?
16. Watter reëls het jy vir jouself oor seks? Hoe het jy oor hierdie reëls besluit?
17. Dink jy dikwels oor seks? Wat dink jy?
18. Wat dink jy is die rol van 'n man/vrou tydens seks? Wat dink jy behoort mans/vrouens nie te doen tydens seks nie?



## Appendix D

### Informed consent form for interviews

#### Ingeligte toestemmingsvorms

Baie dankie dat jy die vraelys voltooi het. Dankie ook dat jy aangedui het dat jy bereid sal wees om 'n persoonlike gesprek met my te hê rondom seksualiteit. Ek het reeds op 'n vorige keer vir jou verduidelik dat ek besig is met 'n studie waarin ek die seksualiteit van jong vroue beter wil verstaan om uiteindelik beter seksopvoedingsprogramme vir jong vroue te ontwerp. 'n Gesprek met jou sal my help om die seksualiteit van jong vroue soos jy beter te verstaan. Ek beseef egter dat seksualiteit vir baie mense 'n sensitiewe en private saak is waaroor mens nie graag met 'n vreemdeling wil gesels nie. Ek wil jou egter verseker dat ek jou privaatheid sal respekteer en dat die inligting wat jy vir my gee, vertroulik gehou sal word. Indien jy toestem tot 'n onderhoud, sal jy vir jouself 'n skuilnaam kies. Ek sal net hierdie naam in die onderhoud gebruik. Jou regte naam sal dus nêrens genoem of geskryf word nie en niemand sal dus weet dat jy 'n gesprek met my gehad het nie.

Ons gesprek sal omtrent een uur neem. Dit sal met 'n bandopnemer opgeneem word, want ek sal nie alles kan onthou of neerskryf wat jy sê nie. Ek moet dus 'n manier hê om vas te lê wat jy my vertel het. Onthou net dat slegs ek na hierdie kasset sal luister en dat slegs jou skuilnaam op hierdie kasset sal wees. Ek sal dit toegesluit hou binne 'n veilige plek binne die Sielkunde-departement.

Ek glo dat die onderhoud vir jou interessant en leersaam sal wees. Dit is egter moontlik dat sommige vrae jou ongemaklik sal laat voel of vir jou te persoonlik is. Onthou egter dat jy enige tyd kan weier om vrae te beantwoord en dan jy enige tyd die onderhoud kan beëindig. Indien die onderhoud daartoe lei dat jy verdere vrae het of bewus geraak het van 'n probleem, is jy welkom om my te kontak. Ek sal vir jou die naam van iemand gee wat jou verder sal kan help.

Ek wil ook graag onder jou aandag bring dat indien ek tydens die onderhoud agterkom dat jy op een of ander manier mishandel word in jou gesin, ek deur die wet verplig word om

jou hiermee te help. Ek sal dit met jou bespreek en ons sal dan saam besluit oor wie die beste persoon sal wees om hiervan te vertel en watter stappe verder geneem moet word.

Indien jy alles gelees en verstaan het en toestem dat 'n onderhoud met jou gevoer word, sal ek bly wees as jy hieronder teken:

Ek, \_\_\_\_\_ verklaar hiermee dat ek die bostaande verstaan het en toestem tot die onderhoud.

Handtekening: \_\_\_\_\_ Datum \_\_\_\_\_

Ek, \_\_\_\_\_ verklaar hiermee dat die onderhoudsvoerder aan my verduidelik het waarom my voltooide vraelys belangrik vir die voer van die onderhoud is. Ek gee hiermee die nommer van my voltooide vraelys en my toestemming dat die onderhoudsvoerder die vraelys gebruik vir die voer van die onderhoud.

Nommer van vraelys: \_\_\_\_\_

Handtekening: \_\_\_\_\_ Datum: \_\_\_\_\_