

# **MOTHERS' CONSTRUCTIONS OF DAUGHTERS' SEXUALITY**

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## **DECLARATION**

I, the undersigned, hereby declare that the work contained in this assignment 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:

## ABSTRACT

HIV-infection and AIDS are major problems not only in South Africa, but worldwide. It has become evident that not only is HIV-infection and AIDS rife amongst the youth of South Africa, but the rate of infection is likely to increase within the next few years. Second to the HIV-infection pandemic in South Africa, is the high prevalence of teenage pregnancies. These have been shown to increase rapidly with more teenage girls becoming pregnant than a few years back. Teenagers tend not to use contraceptives and do not make use of their parents as sexual informants. It is believed that parents do not play an active role in the imparting of knowledge and sexual information. The youth and especially teenage girls' sense of personal agency are limited, when they are confronted with dangerous sexual situations.

Furthermore, it has been argued that a person's socio-economic status plays an important role in HIV-infection, contraceptive use and pregnancy – with teenagers from lower socio-economic groups more likely to be the higher risk group. This study proposed to address the need for research on female reproductive health in all the diverse South African communities, by focusing specifically on working-class mothers' constructions of daughters' sexuality in a “coloured”<sup>1</sup> semi-rural area of South Africa.

In the current study, data were obtained from ten women aged 32 to 55 years about their views of their daughters' sexuality and their experiences with their own sexuality. All of the participants were mothers of teenage daughters. The women all came from a semi-rural “coloured” community and mostly varied only in terms of age and educational level. All of these participants were from a working-class background.

Semi-structured in-depth interviews were conducted with the women and using a feminist social constructionist grounded theory these women's accounts were explored and analysed. The analysis revealed that women still uphold the belief that sexuality is an entity that should be feared. The focus of mothers' discussions with their daughters centered on the dangers of sexuality. Furthermore the analysis indicated that mothers aspired to reduce the sexual dangers that their daughters face. They endeavored to protect their daughters by continuously subjecting them to various messages – such as “sex is bad”, “sex and sexuality can ruin one's future” and “virginity is the key to successful womanhood”. Mothers also strived to protect their daughters through constant

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<sup>1</sup> Historically racial classifications were used in South Africa. However, in this document the term “coloured” is used to refer to the specific population group that participated in the study and not as political categorization.

scrutiny. However, mothers, in their efforts to preserve their daughters innocence, were unwittingly seen to endanger the girls. They were endangering their daughters by keeping them ignorant and through shaming sexual experimentation and sexual curiosity. A restricted focus on the danger and perils of sexuality is found to be extremely hazardous. It overshadowed all the other sexual experiences that women might have. The emphasis on danger portrays women solely as victims and as sexually vulnerable.

## OPSOMMING

Statistieke toon dat alle seksueel-oordraagbare infeksies, MIV-infeksie, VIGS en reprodktiewe gesondheidsprobleme op globale vlak toeneem, asook in Suid-Afrika. Baie duidelik is die invloed van MIV-infeksies asook VIGS onder die jeudiges van Suid-Afrika. Daar word gespekuleer dat die aantal infeksies aansienlik oor die volgende paar jaar sal toeneem. Naas die MIV-infeksie pandemonium is die hoë tienerswangerskappe 'n verdere probleem onder Suid-Afrikaanse tieners. Swangerskappe neem al hoe meer toe met meer tienerdogters wat swanger raak as 'n paar jaar gelede. Verder maak tieners nie gebruik van voorbehoedmiddels nie en gebruik ook nie hul ouers as seksuele inligtingbronne nie. Daar is ook bevind dat ouers nie 'n aktiewe rol speel om seksuele informasie met hulle kinders te deel nie. Tieners, en veral tienerdogters, se siening oor hul persoonlike agentskap is beperk en veral wanneer hulle gekonfronteer word met gevaarlike seksuele situasies.

Verder is daar bevind dat 'n persoon se sosio-ekonomiese status 'n belangrike rol speel by MIV-infeksie, die gebruik van voorbehoedmiddels en swangerskap. Tieners van 'n laer sosio-ekonomiese agtergrond is geïdentifiseer as die hoër risiko groep. Die huidige studie het beoog om die leemte van navorsing oor reprodktiewe gesondheid van vroue in alle diverse gemeenskappe in Suid-Afrika aan te spreek deur te fokus op "kleurling" werkersklas ma's in 'n semi-landelike area van Suid-Afrika.

Tien vroue het aan die huidige studie deelgeneem. Hulle ouderdomme het gewissel vanaf 32 tot 55 jaar. Inligting aangaande hulle sienings oor hul dogters se seksualiteit sowel as hul eie was verkry. Al die vroue was ma's van tienerdogters en afkomstig uit 'n semi-landelike "kleurling" gemeenskap. Die deelnemers was almal vanuit 'n werkersklas agtergrond afkomstig.

Semi-gestruktureerde in-diepte onderhoude is met die vroue gevoer. Die "feminist social constructionist grounded theory" metode is gebruik om die onderhoude te analiseer. Uit die analise blyk dit dat vroue glo dat seksualiteit 'n entiteit is wat gevrees moet word. Die fokus van ma's se besprekings met hulle dogters sentreer op die gevare van seksualiteit. Die analise toon verder dat ma's aspireer om die seksuele gevare te verminder wat hulle dogters in die gesig staar. Ma's wil hulle dogters beskerm deur hulle gedurig dop te hou asook deur boodskappe wat die ma's aan hulle dogters weergee. Boodskappe soos "seks is nie goed nie", "seks en seksualiteit kan jou toekoms verongeluk" en "maagdelikheid is die sleutel tot suksesvolle vrouwees" is van die boodskappe wat ma's aan hulle dogters weergee. Alhoewel ma's probeer om hul dogters se onskuld te beskerm, is

hulle terselfdertyd onbewustelik besig om hulle dogters aan gevaar bloot te stel. Deur hulle dogters onkundig te hou en deur seksuele eksperimentasie asook seksuele nuuskierigheid as skandalig en onbetaamlik voor te hou, stel ma's hulle dogters bloot aan gevaar. Daar is 'n risiko verbonde aan die beperkte fokus op die gevaar van seksualiteit. Dit oorskadu alle ander seksuele ervarings wat vroue mag hê. Die klem op seks as 'n bedreiging stel vroue slegs voor as slagoffers en as seksueel weerloos.

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## 1. INTRODUCTION AND MOTIVATION

Reproductive health problems are often seen as “women’s problems” (Goosen & Klugman, 1996), with women experiencing multiple problems that might affect the various stages of their sexual and reproductive life. According to Nielsen (1996), women also make up the largest numbers of those who make use of health services, both in South Africa and worldwide. The reproductive problems that women encounter can range from menstrual problems, cancer, hysterectomies, infertility, sexually transmitted diseases (STD’s), Human Immunodeficiency Virus (HIV) infection, induced abortion and maternal mortality (Goosen et al., 1996).

### 1.1 Reproductive health issues – National and international

#### 1.1.1 HIV-infection and AIDS

It is a fact that in a relatively short time, the Acquired Immunodeficiency Syndrome (AIDS), has come to be a major world problem (Strebel, 1996). According to recent estimates from the Joint United Nations Program on HIV/AIDS (UNAIDS) and the World Health Organization (WHO), 34.7 million adults and 1.4 million children were living with HIV worldwide at the end of 2000 (Centers for Disease Control, 2000). Furthermore, in 2000, an estimated 600 000 children aged 14 or younger became infected with HIV (LoveLife, 2001).

Health professionals continue to be concerned about sexually transmitted diseases (STDs), AIDS in particular, among the adolescent population (Center for Disease Control, 2000). At the end of 1999, there were over 25 000 cases of HIV infection among Americans between the ages of 20 and 24, and an additional 3 500 cases among those between 13 and 19 years of age. Furthermore, people under the age of 25 account for half of the HIV infections in the United States (Center for Disease Control, 2000).

In South Africa, the picture is as bleak as abroad. During the period 1994 to 2001, there has been an exponential growth of HIV infections in South Africa (LoveLife, 2001) and the total number of HIV infected people in South Africa is expected to rapidly increase into the next decade. It is estimated that approximately 4 million South Africans are currently HIV-infected (Department of National Health and Population Development - DNHPD, 1998), and this number is expected to rise

over the next 10 years. It is also estimated that there could be approximately 5.3 to 6.1 million infected individuals by 2005, and 6 to 7.7 million by 2010.

HIV is a disease that mostly affects younger people with approximately half of all adults who acquire HIV becoming infected before they turn 25 (Goosen et al., 1996). Studies also show that gender differences are pronounced (LoveLife, 2001; Strebel, 1996) and that women at highest risk are between the ages of 15 and 20. In South Africa, where 53% of the population is under 25 years old, teenage infection levels are increasing at an alarming rate (LoveLife, 2001). Other research shows that 45% of the South African population (16 million) is under 20 years of age (DNHPD, 1998; Goosen et al., 1996) and it is estimated that over 60% of all new infections occur in those between 15 and 25 years of age with women generally being infected earlier than men. Black women are worst affected, with over 70% of cases among women of "colour" (Goosen et al., 1996; Strebel, 1996).

Since 1990 the Department of Health in South Africa has been conducting anonymous HIV seroprevalence surveys among pregnant women attending state funded antenatal clinics. These annual surveys have charted the dramatic increase in HIV infection levels in women, from less than 2% in 1991 to 24.5% in 2000 (DNHPD, 1998). Most of the data on the South African HIV/AIDS epidemic is obtained from this anonymous, annual survey of pregnant women attending the public sector antenatal clinics. However, a recent study (LoveLife, 2001) indicates that fertility among HIV positive women is substantially lower than among uninfected women, in all but the youngest age group. This suggests that antenatal data may in fact underestimate HIV prevalence in women of reproductive age in many communities. In addition community surveys have confirmed the high level of infection among young women (LoveLife, 2001).

### 1.1.2 Pregnancy

The United States had the highest rates of teenage pregnancy and births in the western industrialized world (Chapin, 2000). Furthermore, more than four out of ten females become pregnant at least once before they reach the age of 20, which amounts to approximately one million pregnancies annually within the United States. As stated previously, adolescents are at high risk for a number of negative health consequences associated with early and unsafe sexual activity (Center for Disease Control, 1997; Miller, Forehand & Kotchick, 2000), such as infection with HIV and other sexually transmitted diseases, as well as unintended pregnancy (Miller et al., 2000).

Many South African teenagers are exposed to high-risk situations and a big concern at present is the high level of teenage pregnancy. According to recent research studies (LoveLife, 2001) findings showed that by the age of 19 years, 35% of teenage girls have been pregnant or have had a child. It also showed that over the past five years the HIV prevalence in the teenage group has been above 10%, and above 15% for the past three years. Ironically, even with the escalation of HIV and AIDS infection, teenage pregnancies are on the increase.

Finding effective ways to prevent adolescent pregnancy is a concern of public health officials, educators, social workers, and parents (Arnold, Smith, Harrison, & Springer, 2000) and it remains a social problem that continues to concern all involved parties.

### 1.1.3 Sexuality, sexual agency and responsibility

It has been shown that women, and particularly young women are not taking assertive and responsible action to manage their sexual health (Gorna, 1996). According to Goosen et al. (1996), young women need to take greater care about who their sexual partners are due to the growing threat of HIV/AIDS, and especially because they are the fastest growing group of people being infected with HIV/AIDS. Furthermore they state that young girls are not taught to assert themselves. Women today still feel pressure to obey sexually. Lancaster and di Leonardo (1997) state that young women need to become more agentic and less reactive or passive in sexual situations. These young women also have to take responsibility for protecting themselves against bad sexual and human experiences. According to Lips (1999), the right of the individual woman to be selective and to respond to her own sexual priorities and not those of another's have not yet been established. Not only do women have to become more assertive sexually, but they also need the assistance of important figures in their lives to help them gain the authority and confidence they need to be less passive.

People's attitudes to sexuality are strongly influenced by how they were raised, by what their parents thought about sex, as well as the sexual behavior of people around them (Goosen, et al., 1996). Tiefer (1995) states that a feminist vision of sexuality should focus on sexuality as it occurs within cultures and relationships. At the same time it should recognize the importance of the social context for facilitating or limiting women's experiences. For most people, a significant part of their sexual heritage evolves from how parents, or those who were like parents, felt about their sexuality and also how they conveyed these messages. According to Ellison (2000), much of what is learned about sex and sexuality in childhood and adolescence is indirectly taught. It would seem that no

matter how a female teenager or young woman, experiences sexuality in later life, what is learned through socialization persists and influences her life to a huge degree.

#### 1.1.4 Parental influence

Mayekiso and Twaise (1993) state that parents should play a more active role in imparting sexual knowledge and discussing issues of sexuality. It is their belief that despite the attention devoted to sex education, few attempts have been made towards involving parents in sex education programs. This notion was echoed by Gordon (1982), who asserted that parents play an important role in transmitting attitudinal and behavioral norms regarding reproductive behavior.

Field, Land & Bendell (1995) state that feeling close to one's mother appears to be a better predictor of positive adolescent outcomes than any other factor. Other studies indicated that effective parent-child communication decreases the risk of an adolescent engaging in high-risk sexual behavior that may lead to pregnancy (Holtzman & Rubinson, 1995; Arnold et al., 2000).

There is a growing need for parents to communicate with their adolescents about sexuality, as teenage pregnancies and sexually transmitted diseases are on the rise (Holtzman et al., 1995; Lees, 1994). However, many parents indicate that they lack information and feel uncomfortable communicating with their children about sex (Simanski, 1998).

Clearly such problems as early sexual activity, non-contraceptive use, pregnancy, STD's and HIV/AIDS, necessitate families to be more concerned about educating their children about sex (Simanski, 1998). Despite their reticence, most parents express the desire to openly communicate about sex with their children. Parents often feel inhibited and embarrassed when talking about sex and have also indicated that they lack accurate information (Brock & Jennings, 1993). In fact Reinisch (1990) has contended that the average person is poorly informed and unable to communicate fully about sexuality.

#### 1.1.5 Socio-economic status (SES)

Rates of sexual activity vary considerably across gender, social class and ethnicity (Lees, 1994). It has also been found that teenagers today, are more likely to have had sexual intercourse during adolescence than in previous decades and that the increase has been much greater for girls (Steinberg, 1993). Stanton, Black, Kaljee, & Ricardo (1993) also state that although teenagers come

from all socioeconomic, racial and ethnic groups, premature coital activity and pregnancy occur proportionately more frequently among minority youth. Dyk, Christopherson and Miller (1991) indicated lower socioeconomic status is strongly associated with adolescent sexual activity and reported higher rates of pregnancy in adolescents from lower SES families than from middle and upper SES families. The literature on socioeconomic status (SES) portrays female adolescents of low-SES as more likely to be poor contraceptive users than are more affluent young women (Lagana, 1999; Allgeier & Allgeier, 1991; Lethbridge, 1990). They argue that many disadvantaged youth regard sex as a way of achieving intimacy in an environment that is frequently hostile and depressing.

Jaffe (1998) state that having a less educated mother and being the daughter of a teenage mother are associated with early sexual activity. Adolescents who reside in unstable families and who have mothers who were teenage parents become sexually active at earlier ages, perhaps reflecting reduced parental monitoring and exposure to permissive sexual norms (Crockett, Bingham, Chopak & Vicary, 1996).

## 1.2 Limitations of sexuality research

According to Mohanty (1992), traditional sex research focused almost exclusively on the sexual behavior of white, middle-class, adult males. Furthermore, little is known about women's sexuality as previous research on women reflected the behaviors, interests, experiences and composition of the majority of academic women who are white and middle class. Women are not a unitary category – but are diverse with regard to race, class and culture (Finchilescu, 1995). The diverse experiences of working-class women or women of color, are frequently ignored in studies of female sexuality. Sex researchers have neglected women of “colour” and women from lower socio-economic groups in studies of sexuality that has been generalized to all women. Also, the use of college students in most of the studies pose as a limitation in that the sample is biased in favor of white, middle-class, educated participants, particularly in the late adolescence and young adulthood groups (Rider, 2000).

## 1.3 Conclusion

HIV-infection and AIDS are major problems not only in South Africa, but worldwide. It has become evident that not only is HIV-infection and AIDS rife amongst the youth of South Africa,

but the rate of infection is likely to increase within the next few years. Second to the infection pandemic in South Africa, is the high prevalence of teenage pregnancies. These have been shown to increase as rapidly with more teenage girls becoming pregnant than a few years back. Teenagers tend not to use contraceptives and do not make use of their parents as sexual informants. It is believed that parents do not play an active role in the imparting of knowledge and sexual information that teenagers need to prepare them when confronted with sexual encounters. The youth and especially teenage girls' sense of personal agency are limited, when they are confronted with dangerous sexual situations. Furthermore, it has been argued that a person's socio-economic status plays an important role in HIV-infection, contraceptive use and pregnancy – with teenagers from lower socio-economic groups more likely to be the higher risk group. This study proposed to address the need for research on female reproductive health in all the diverse South African communities, by focusing specifically on working-class mothers' constructions of daughters' sexuality in a "coloured" semi-rural area of South Africa.

## **2. LITERATURE REVIEW**

Various studies have been conducted that investigated the mother-daughter relationship and the complexities thereof. The current literature review looked at some of these studies and attempted to give a background to the current study. The purpose was to (1) present the findings of previous research of a similar genre; (2) discuss the implications of these findings for the current study and, (3) highlight limitations of previous research.

### **2.1 Mothers, daughters and sexuality**

During adolescence, sexuality comes to occupy an important place in the definition of self. How an adolescent daughter experiences her sexuality is crucial to the mother-daughter relationship at that time (Ruddick, 1990). Various studies (Furman, Brown & Feiring, 1999; Mazarella & Odom Pecora, 1999; Montemayor, Adams & Gullota, 1990) that investigated the mother-daughter relationship have been conducted. Results showed that in certain instances, mothers and daughters have very similar attitudes with regard to sexual conduct and gender roles. However, these views could also be very different with regards to pertinent and more intimate issues of sex and sexuality.

One study investigated the differences between parents' and daughters' beliefs on sexual aggression and gender roles (Quinones, Phares, Bryant & Stenmark, 1999). Information about gender-role attitudes, perceived family communication, and previous sexual experiences was collected. Results indicated that daughter-mother dyads shared similar attitudes about gender roles. Parental attitudes also predicted daughters' attitudes. In contrast it showed that family communication did not moderate the relationship between parental attitudes and daughters' attitudes. Results also indicated that the general sexual attitudes of parents and daughters, particularly those of mothers and daughters are similar. It has also been found that mothers have a big impact on their daughter's social development, as well as on their self-reliance and sexuality (Nielsen, 1996; Apter, 1990).

### 2.1.1 Daughters' sexual maturation vs. mothers' envy

Various researchers have argued that to some extent a daughter's emerging sexuality is in fact a reemergence of the mother's past and her sexuality (O'Barr, Pope & Wyer, 1990; Glenn, Chang, and Forcey, 1994). As teenage daughters mature, mothers and daughters may become extremely competitive and a girl's interest in men is often seen as a sign that she is separating from her mother. Flaake (1993) stated that when daughters reach adolescence, unwittingly mothers envy their daughters' sexual desire. In addition, the argument follows that these mothers experience envy because they have difficulties in fulfilling their own desires. The adolescent daughter's sexuality thus confronts the mother with the possible separation from her daughter, as well as the mother's own advancing age.

Mothers who have a large investment in their children's lives but few outside interests may have mixed feelings about their children's sexual maturation and increasing independence (Jaffe, 1998). Steinberg and Steinberg's (1994) interviews with families with adolescent children revealed that many parents, especially those who are overworked or stressed out, compared themselves unfavorably to their apparently carefree, fun-loving sons and daughters. Many mothers admitted feeling envious of their children's sexuality and popularity, and subsequently they felt guilty for having such feelings. Their children's youthfulness and freedom reminded mothers that they ("the older generation") were no longer young and free. Some mothers reported a desire for a second chance at adulthood, implying dissatisfaction with the way their lives had turned out.

### 2.1.2 Mothers' contribution to negative views about sexuality

Evident from most studies on mothers and daughters (Flaake, 1993; Jaffe, 1998; Kelly, 1983; Schreurs, 1993) is the perception of daughters that mothers have negative influences on their sexual experiences and experiences of their bodies. Hammer (1976) stated that through her mother's responses to and initiatives toward her body and its needs, a daughter begins to form her own relationship to her body. This lays the groundwork for her developing sense of sexual identity. Also through her mother, a daughter first begins to learn about the cultural expectations of feminine role behaviour.

Another study examined the meaning and experience of female sexuality (Daniluk, 1992). Results indicated that many of the women perceived their mothers as largely contributing to their sense of sexual inadequacy. Mothers were perceived as "withholding information, being unable to accept their daughters' sexuality and failing to value their own sexuality"(p. 64). These results were confirmed by an earlier study by Phillips (1991) where results indicated that daughters experienced feelings of anger with their mothers because of a lack of information about sex and menstruation as well as the female biological processes. The study also revealed that daughters had great difficulty associating their awakening sexuality with intimacy with their mothers and thus became more distant. In addition, results showed that respondents experience shame and embarrassment about their sexuality as well as their knowledge of their mothers' sexuality.

Schreurs (1993) argued that there is no sexual validation for daughters through their mothers. It is stated that only men desire the female body and that reproductive body processes are ascribed negative connotations by women and especially mothers. Thus, Flaake (1993) argued that because of the negative connotations associated with reproductive functioning, women develop negative images of their bodies and these negative images and/or perceptions get passed on to the daughters.

Kelly (1983) has argued that American parents are likely to model negative sexual attitudes and behavior. Parents may discourage expressions of sexuality and, with respect to modesty taboos, communicate negative affect to children. By inhibiting discussions of sexuality or hiding sexual expression between marital partners, parents may lead adolescents to interpret sexuality as something bad (Andre, Frevert & Schuchman, 1989).

Flaake in Mens-Verhulst, Schreurs & Woertman (1993) stated that mothers tend to prevent their daughters' early sexual discovery. This led to daughters' inability to develop healthy and positive attitudes toward their sexuality. In her study on a group of children, Schmauch (1987) in Mens-Verhulst et al., (1993) concluded that mothers unconsciously want their daughters to remain dependent upon them. They envy the daughters' autonomous sexuality because they (the mothers) cannot be autonomous and live out their sexual desires.

### 2.1.3 Menstruation: curse and shame

Jaffe (1998) stated that in not so subtle ways, society conveys to girls that menstruation is a "curse", a source of discomfort, moodiness, and irritability. If nothing is said to the contrary, girls may view menstruating strictly as a burden rather than as a symbol of their femininity or as a sign of impending adulthood. Results revealed that parents should not limit their discussions of sexuality to menstruation and fertility, but they should present the reproductive process in a more general context that allows discussion of relationships and intimacy (Jaffe, 1998). At menarche, most girls look to their mothers for emotional support and ways of avoiding embarrassment and discomfort, but also expect their privacy to be respected. Girls want their mothers to be involved but not too involved. It is helpful for mothers to share their own experiences of first menstruation – what happened, how they responded, and how they felt (Koff & Rierdan, 1995).

Although most women spend a quarter of their adult lives menstruating (Unger & Crawford, 1996), menstruation has for centuries been a taboo topic surrounded by mystery (Kowalski & Chapple, 2000). Few people believe that menstruation could be openly discussed, even within the family household (Brooks-Gunn & Ruble, 1983; Unger et al., 1996). Because of the closed nature of the topic of menstruation, women are taught to conceal the fact that they are menstruating, a phenomenon referred to by Unger et al., (1996, p. 271) as the "cultural conspiracy of silence". "When we are taught that something is to be hidden, we naturally come to believe that there is something in the experience that is "wrong", and shame becomes a central possibility" (Kowalski et al., 2000). Thus whether conveyed through conversations with their mothers or with peers, young women are taught to keep their menstrual status concealed.

#### 2.1.4 Sexual communication between mothers and daughters

Various studies indicated that mothers and daughters rarely discuss sexual matters (Flaake, 1993; Furstenberg, Brooks-Gunn, & Morgan, 1990; Phillips, 1991). However, the studies do show that in the event of sexuality being discussed, the focus is on reproduction, contraception and hygiene.

According to Simanski (1998), when parents do talk to teens, it is typically the mother who initiates communication. It has also been shown that mothers are more likely to communicate with daughters than with sons. Mueller and Powers (1997) found that college aged females have a significantly higher level of sexual knowledge than do male students, seemingly attributable to more open communication about the biological processes of menstruation and the negative consequences of female sexual activity (i.e., pregnancy).

Flaake (1993) continued the argument that discussions between mothers and daughters on topics of sexual development tend to be factual and technical. Daughters are informed about their bodily functions such as menstruation, hygiene and birth control. In this factual conveyance of information, mothers pass on their own limitations to their daughters (Waldeck, 1988).

On the other hand, women participating in a qualitative study recalled that their mothers had a tendency to use more warnings and rules when talking about sex (Brock & Jennings, 1993). This is echoed by the study of Darling and Hicks (1982) where results indicated that messages to daughters are often admonitions against sex, heavily emphasizing the negative consequences of premarital pregnancy. Other studies have indicated that parents are less likely to discuss such issues as feelings, values and contraception and more often discuss less sensitive issues such as biological processes (Chilman, 1990).

Not only are mothers reluctant to communicate verbally with adolescents about sex, but they may also send nonverbal messages that discourage open communication (Simanski, 1998). Brock et al., (1993) found that women recalled negative nonverbal messages in discussions with their mothers about sexuality. Thus, mothers may find it difficult to provide open and positive communication (Simanski, 1998).

Silence communicates to adolescents a negative feeling or uncomfortableness about sex (Jaffe, 1998). This suggests that sexual communication should be approached in a more calm and relaxed manner, and parents should be encouraged to use more positive nonverbal communication and to

avoid silence. Discussing the biological details of sex was seen as relatively easy, but to communicate values was much more difficult. It was noted that adolescents might more readily relate to information about sex if parents are willing to share their own values and experiences.

Du Bois-Reymond and Ravesloot (1996) interviewed secondary school girls (age 15 to 19 years) and their mothers about how these teenagers felt about starting sexual relationships. Most of the mothers claimed that they did not want to interfere with their children's sexual behavior. The mothers felt that they were liberal and non-interfering, but daughters saw these mothers as demanding. In addition, the mothers thought they were supportive whereas their daughters did not perceive them in that way. The study also revealed that if adolescents discussed sexual matters, it was with their boyfriends or romantic partners and rarely with parents. However a few of the teenagers did rely on their mothers as confidants (Du Bois-Reymond et al., 1996). Furthermore, the study showed that the mothers felt that they were much more open regarding the discussion of sexual topics than their parents had been. However, their discomfort about the topic persisted and their children sensed it. Parental discomfort and adolescent fear of disapproval may partly explain increasingly frequent reports of adolescent girls' concealing their sexual activity and pregnancies from their parents (Balk, 1995; Jaffe, 1998).

Survey data (Balk, 1995) indicated that few adolescents reported that their parents are approachable about sexual information. The data also suggested that it may be a good thing many adolescents do not turn to their parents for sexual information; because a significant proportion of parents barely passed on a test about basic sexual knowledge (Balk, 1995).

#### 2.1.5 From a South African perspective

The trend in South African research has followed much the same route as those of the international studies (Finchilescu, 1995; Mayekiso et al., 1993). These studies on sexuality focused almost exclusively on teenage pregnancies and sexual knowledge. Results indicated that the sexual knowledge of South African adolescents is inadequate and that the main source of sexual knowledge was the peer group. It has also been the aim of various government institutions to investigate the rate of pregnancy within the various population groups in South Africa (Department of Health, 1998). Also, the research that has been conducted focused almost exclusively on the rate of HIV-infection as well as sexually transmitted infections (Department of Health, 2000). These studies confirmed the results of other international studies in that most sexually transmitted infections and HIV-infections occurred in the age group of 15-19 years and 20-24 years. Results of

the studies also showed that the Western Cape was the province where increase percentage of infections was the highest of all provinces for the period 1999 – 2000.

In South Africa there are very few studies and very little data concerning the sexual behavior of South African adolescents (Flisher, Ziervogel, Charlton, Leger & Robertson, 1993). Research conducted in the sexuality sphere in South Africa, have mainly focused on the attitudes of adolescents towards premarital sex (Mayekiso, 1994), while according to Bremridge (2000), the research exploring adolescent sexuality has been directed towards reproductive health issues and fertility control. According to Macleod (1999) various studies amongst adolescents from all race groups in South Africa have revealed that the role of parents in transferring information to their adolescent children is limited. Little has been reported about the context, relationships, social dynamics and actual sexual behavior associated with adolescent sexuality and the increasing sexual intercourse among adolescents.

A recent study (Lesch, 2000) investigated the sexuality of “coloured” adolescent females in a lower socio-economic community within the Western Cape. Results revealed that teenage girls are indeed sexually active. However, a more significant phenomenon highlighted in the study, was the fact that mothers seem to play a significant role in how these teenagers construct their sexualities. However, there is still limited information with regard to adolescent girls’ sexual knowledge and their sexual experience. Even less is known about how these girls begin to understand and make sense of their sexuality. More research should focus on the relationship between mothers and daughters and specifically with regard to the impact of mothers on their daughters’ sexuality.

In order to understand why the HIV-infection rate is so high amongst the youth, it is important to become aware of how adolescent girls think and feel about their sexuality. It is vitally important to gain an understanding of this phenomenon so that better ways of assisting teenage girls might be employed. The current study proposed that mothers play a key role in their daughters’ sexual upbringing and that they are very influential in how their daughters construct their sexuality. Mothers are very important figures in their daughters’ lives and it is believed that they are especially influential in their daughters’ sexual awakening. The previous study on female adolescent sexuality (Lesch, 2000) was used as a backdrop to the current study.

## 2.2 Summary

Previous studies have shown that parents and mothers especially, are very powerful figures in the lives of their daughters. Results also revealed that mothers and daughters tend to have similar views on certain issues such as how to conduct themselves sexually. However, differences were also noted. These differences were evident in mothers and daughters' outlook on the more pronounced topics of sex and sexuality. Apparent from the research that has been conducted, is the discovery that mothers feel envious towards their daughters because of the daughter's youth and sexual awakening. Mothers thus experience themselves as old, while the daughter is on the brink of sexual discovery and experience. In most instances, daughters experience their mothers as demanding and even interfering at times; while on the other hand, mothers believe that they are open and liberal where their daughters' sexuality is concerned.

Mothers also tend to pass on to their daughters their own sexual inadequacies and limited sexual knowledge. This is especially evident with regard to the daughters' menarche. If mothers do not treat the start of the daughter's menstrual cycle as a curse, it is portrayed as something that should be hidden and not openly discussed. Furthermore, mothers and daughters do not discuss issues of sex and sexuality but tend to focus on the biological, physical and technical aspects of reproductive bodily functions and physical development. It has been shown that mothers contribute to their daughters' negative attitudes about sex and sexuality, and that these mothers do not give their daughters any sexual support and/or justification. It has been proposed that mothers are not able to accept their own sexuality and thus find it difficult to accept and lend support for their daughters' sexuality.

## 3. THEORETICAL FRAMEWORK

Various research studies, using different methodologies, indicate that women's experiences of sexuality tend to be more relationship and intimacy focused and less genitally and orgasm focused than men's (Conway-Turner, 1992; Hurlbert, Apt & Rabehl, 1993; Patton & Waring, 1985). Thus many have called for a more woman-centered and expanded examination of women's sexuality. A theory that according to Tiefer (1991), would be more "individually variable and interpersonally sophisticated" (p. 2).

### 3.1 Feminist Social Constructionist Theory

Feminist social constructionist theory insists on a critical stance towards taken-for-granted ways of understanding the world (Burr, 1995). It invites individuals to challenge the view that conventional knowledge is based upon objective, unbiased observation of the world. It is through daily interactions between people in the course of social life, that individual versions of knowledge become fabricated. According to Burr (1995), feminist social constructionist theory denies that knowledge is a direct perception of reality. It could be said that people construct their own versions of reality as a culture or as a society. All knowledge is derived from looking from some perspective or other, and is in the service of particular interests, rather than others.

DeLamater and Hyde (1998) state that social constructionist theory provides a framework that stipulates that culture influences thoughts and behavior. The social constructionist theory offers the perspective that concepts such as femininity and sexuality represent social constructs or cultural scripts demanding and organizing socially appropriate behavior, qualities, practices, identities and expressions of emotions, needs and desires (Gergen, 1985; Tolman & Porche, 2000). It therefore informs that reality and subsequently sexuality is socially constructed. Social constructionism can thus adequately represent the complexities within a single culture. The social constructionist framework has no difficulty in accepting diversity. Diversity is anticipated rather than denied.

Sexuality, as stated, is believed to be a social construct, and not a fixed biological trait (Weber, 1998). It should not be regarded as a discrete variable, which lends it to be defined by set and rigid categories. According to Goosen et al., (1996), sexuality is a form of expression that begins at birth and continues through life. It involves the physical, emotional, social and intellectual aspects of the person. These researchers in addition, suggest that sexuality is also shaped by how people feel about themselves. A definition of sexuality should thus, also include perceptions of sexuality and/or how people feel about themselves, and that is to some extent shaped by their culture and the society in which they grew up.

Espin (1996) reported that women worldwide are enculturated and socialized to embody their sexual desire or lack thereof through their particular culture's ideals of virtue. Thus the social group's expectations are inscribed in women's individual desire and expressed through their sexuality. Thus, Foucault (1981) stated that sexuality is not private. Sexuality may be a universal component of human experience, yet how it is embodied and expressed is not a universal phenomenon. The study of women's experiences reveals a varied representation of sexual

differences among cultures (Espin, 1996). The cultural constructs inextricably inform the expression of female sexuality.

Because of the social and cultural construction of sexuality it is possible to presume that perceptions become fixed and carried over from one generation to the next. Transmitted through words and silences that pass between women of different generations, are values and beliefs about what constitutes appropriate sexual behavior (Espin, 1996). These include ideas about pregnancy, male-female relationships, and women's reproductive health. Mothers provide the core of cultural messages for women through what they say about men and other women, and what is allowed and what is forbidden to be a "good woman" in the culture of origin. These messages continue to be powerful injunctions for first-, second- and even third-generation women (Espin, 1996). It is thus inevitable for contemporary beliefs and perceptions not to have been influenced and shaped by the previous generation, more specifically, impossible for a mother to not pass on to and shape the beliefs of her daughter. A mother does not merely pass on the messages of her culture; she passes on her responses to the messages she received from her mother (Hammer, 1976; Phillips, 1991; Ruddick, 1990).

### 3.2 Implications of theoretical framework

Worldwide definitions of what constitutes appropriate sexual behavior are strongly influenced by male sexual pleasure (Espin, 1996), and too often, women's expressions and experience of their own sexuality are silenced and/or condemned. Research should provide a frame of reference from which the experiences of women of "colour" can be explored. Research studies should thus make allowances for women's diversity with regards to culture, patriarchy as well as differing statuses due to socio-economics and class. Although sexuality's universality is known, studies of sexuality should consider that the expression and embodiment is not universal and allowances should be made for that.

### 3.3 Conclusion

According to the feminist social constructionist theory, studies of sexuality should be more women focused. Although sexuality is a universal phenomenon, it has become clear that it is very complex with regard to both cultural and social aspects. Also, the community or society from which any female originate play an important and key role in her understanding of and her attitude towards

sexuality. In any study of sexuality, it is vital to consider the various and diverse factors that influence sexuality. It is crucial to reflect the participants' views and their opinions as these are shaped through their experiences and their society. It portrays their reality as well as their lived knowledge and know-how. It is essential to understand, to recognize and to become aware of how different communities, different genders and people/females of different ages construct and experience their sexuality. The present study attempted to address a limited aspect of this vast but neglected arena, by focusing on "coloured" working-class women and how they construct female sexuality.

#### **4. METHOD AND DESIGN**

##### **4.1 Aim of the study**

The aim of the study was to explore the constructions of sexuality of midlife mothers with teenage daughters in a semi-rural "coloured" community. Subsequently the study attempted to gain an understanding of these mothers' constructions of their own and their daughters' sexuality.

##### **4.2 Methodology: Social Constructionist Grounded Theory**

Grounded theory is a qualitative method that is often used to study female experience (Locke, 2001). Social constructionist grounded theory starts out by investigating events or phenomena occurring within a social context. The data and analysis are shaped by what happens in the social context and/or to the research participants. The aim of a grounded theory approach is to develop, revise and refine concepts within a particular field. On the other hand the social constructionist approach offers a new view on existing concepts (Charmaz, 1990). In a social constructionist grounded theory the researcher makes new discoveries by attending closely to the data at hand; makes theoretical analyses based on interpretations found within the data; and lastly, compares the analyses with existing theory and literature pertinent to the area under study (Charmaz, 1990).

In the grounded theory model, the line of investigative action moves from empirical observation to the definition of concepts (Locke, 2001). It is also argued that the grounded theory method of research is especially suited to generating theories of social process. The theory provides a set of strategies and rigorous methods that allow the researcher to check, to refine and to explore ideas

about the information gathered (Charmaz, 1990), and it is also suitable and useful for studying a topic such as personal experience, which is integral to the current study.

The method is inductive and assumes openness and a flexibility not otherwise obtained with other methods. Grounded theory methods can be employed as interpretive analysis to describe, explain and understand people's experiences. The aim is to seek a way of learning how people construct their experiences through their feelings, actions, intentions and beliefs. The goal is to theoretically analyze the data with relevance to the field under study.

Charmaz (1990) states that within the social constructionist grounded theory, the process of conceptualization and categorization is active and involves a researcher that interacts with the data in order to discover new categories. Furthermore, these discoveries enable the researcher to construct the analysis. This particular method of investigating is very flexible in that the researcher brings his/her own perspective to the process and that in itself shapes the data collection as well as the analysis. In addition, the researcher tries to discover how each of the identified categories develops, changes and gives rise to various consequences. Furthermore, the researcher also brings his/her experiences and values to the research process. These may again shape the process of investigating and analyzing.

Within the following section, each aspect and element of the research process will be explained. It will also be explained how the social constructionist grounded theory informed each of the elements.

#### 4.3. Research participants

According to the grounded theory method, researchers select individuals or groups that they believe will be able to provide good information on their chosen topic (Locke, 2001). For the current study ten participants were randomly selected from a list consisting of 25 names. This list was obtained from a previous study that investigated the sexuality of 25 "coloured" adolescent females (Lesch, 2000). The current study aimed to focus on and to interview the mothers of these adolescent girls who reported to be sexually active in the study conducted by Lesch (2000).

The participants came from a semi-rural "coloured" community and mostly varied only in terms of age and educational level (Table 1). All of the participants were from a working-class background. The study focused on "coloured" women from a working-class background for the following

reasons: firstly, they have been ignored as samples in previous studies of similar genre. Secondly, Jaffe (1998) stated that having a less educated mother and being the daughter of a teenage mother are factors associated with early sexual activity. Thirdly, Stanton, Black, Kaljee, & Ricardo (1993) stated that although teenagers come from all socioeconomic, racial and ethnic groups, premature coital activity and pregnancy occur proportionately more frequently among minority youth.

From the list of 25 names, seven names were at first randomly selected and the women contacted. This was done in order to assess the responses as well as the willingness of the women to take part in the study. The seven women were individually contacted per telephone and informed about the nature of the proposed study. Not all of those contacted were willing to participate in the study, and only two women of the initial seven contacted, agreed to partake in the current study. Most of the women contacted expressed a fair amount of suspicion and discomfort as to the nature and topic of the study. Even where further explanations were offered those women disinterested, would end the telephone call.

I randomly selected ten more names from the remaining 18 names on the list. Once again, the women were telephonically contacted and the study explained to them. As with the previous group of women, these women were similarly suspicious and uncomfortable. However, four women were willing to participate. The remaining eight names on the list were contacted. Of these women, three were agreeable to participate in the study. In the end, payment for the women's time seemed to be the incentive for participation. The women had no knowledge of the fact that their daughters took part in the previous study (Lesch, 2000) and this fact was never disclosed to the mothers. Nine women of the original list of 25, were interviewed. A tenth was contacted through one of the women that participated in the study. This woman was a friend of hers, living in the same area and had a teenage daughter. After explaining the procedure and nature of the study to her, she also agreed to partake in the study. This was the only name not selected from the list of 25 names. Her daughter was thus not part of the previous study (Lesch, 2000) that investigated the sexuality of adolescent females.

Informed consent was obtained from those agreeable to participation and interview times were then negotiated. The interviews occurred in privacy and were audiotaped with consent from the respondents. Although some of the participants expressed discomfort about being taped, most soon relaxed and appeared to enjoy the process. Participants were assured of their anonymity and were identified only by their initials. All the participants received a nominal payment of thirty rands to compensate for their time and participation.

Table 1

## Demographic descriptive information of participants

ID	AGE	MARITAL STATUS	RELIGIOUS DENOMINATION	EDUCATIONAL STATUS #	NO. OF CHILDREN	AGES*	OCCUPATION
GL	32	Single	Baptist Church	Std. 5	4	<b>18, 13, 13, 8</b>	Char/Cleaning
FC	36	Married	Old Apostolic Church	Std. 6	3	<b>20, 17, 11</b>	Housewife
DD	40	Married	Pentecostal Church	Std. 6	3	<b>22, 15, 5</b>	Housewife
ML	41	Married	United Reformed Church	Std. 8	4	<b>20, 18, 15, 3</b>	Housewife
JG	45	Widow	United Reformed Church	Std. 10, Nursing diploma	4	<b>27, 25, 24, 19</b>	Nursing sister
MN	48	Married	United Reformed Church	Std. 7	3	<b>22, 19, 16</b>	Housewife
SA	49	Married	Old Apostolic Church	Std. 5	3	<b>28, 26, 17</b>	Housewife
RA	49	Married	United Reformed Church	Std. 5	4	<b>25, 22, 19, 14</b>	Char/Cleaning
LM	49	Married	Pentecostal Church	Std. 10	2	<b>20, 18</b>	Housewife
BD	55	Married	Old Apostolic Church	Std. 1	4	<b>38, 35, 29, 17</b>	Housewife

# Std. denotes the grading system formerly used in the South African public schools education system. In the current grading system Standard 1 is equivalent to Grade 3.

\* The ages in bold is an indication of the ages of the daughters.

Ten women participated in the study. Their ages ranged from 32 years of age to 55 years of age, with an average age of 44 years. Eight of the women were married while one was single and the other a widow. 40%, 30%, 20% and 10% of the women were members of the United Reformed Church, the Old Apostolic Church, the Pentecostal Church and the Baptist Church, respectively. 20% of the women obtained a matric certificate. 40% left school during their high school years without completing matric, while the other 40% only had a primary school education. Only one (10%) of the women was educated on a tertiary level. All of the women had more than one child. The average number of children was three. 50%, 40% and 10% of the women had four, three and two children respectively, totaling 34. All the women had at least one daughter, while the highest number of daughters was four. 70% of the participants were housewives, one (10%) was a nursing sister and the remaining two (20%) did general cleaning work.

## 4.4 Methods of data collection

### 4.4.1 Questionnaire

A brief questionnaire (Appendix I) was designed to collect the biographical data of the participants. The information requested ranged from personal history (age, religion, level of education), to marital history (marital status, age at first marriage, no. of children) and employment history (place of employment, no. of jobs held, years of employment in each job, years in current job).

### 4.4.2 Interviews

The methodology of grounded theory sets creativity of the researcher as a very important element in the interview process (Strauss & Corbin, 1990). It enables the researcher to ask focused questions and questions that are applicable to the study. In-depth interviews were conducted with the ten participants. Interviews were semi-structured to the extent that all women were questioned about the same broad range of topics, including: their past and current experiences of and with their sexuality, their relationships, their personal views on sexuality, and where they thought it originated from, as well as their views on their daughters' sexuality.

An interview schedule (Appendix II) was used as a guide, although the style of the interviews was more conversational than question-answer format. The aim was to facilitate open, detailed, and reflexive discussion rather than circumscribed answers to predetermined questions. Discussion was allowed to flow on and develop according to interviewee responses, but was directed by the interviewer so that all areas of interest previously determined by the researcher were covered. Most interviews lasted on average between 1 and 1 ½ hours long. All interviews were fully transcribed.

## 4.5 Reliability of research method

Qualitative and quantitative research methods both have their strengths although the methods also differ in various ways (Locke 2001). Quantitative research emphasizes variables and the testing of hypotheses that are linked to causal explanations. Qualitative research, by contrast, often relies on interpretation or detailed examination of events occurring within the social context. Highly organized, formal, systematic and standardized methods are applied when quantitative methodology

is used. On the other hand, qualitative research uses few procedures that has been standardized but relies on judgment from the researcher that comes from experience (Lips, 1999).

Qualitative researchers emphasize the human factor and the intimate firsthand knowledge of the research setting; they avoid distancing themselves from the people or events they study. It means taking advantage of personal insight, feelings and human perspectives to understand social life more fully. Researchers should reflect on, reexamine and analyze personal points of view and feelings as a part of studying others. Qualitative researchers emphasize trustworthiness as a parallel idea to objective standards in quantitative research design. This ensures that research activities are dependable and credible (Lips, 1999; Wilkinson, 1996).

Qualitative research is more concerned about issues of the richness, texture and feeling of raw data (Schoepf, 1990). However, it has been argued that qualitative research has more ambiguity and fewer procedures or terms are standardized (Locke 2001) but this does not mean that qualitative research is less valid. The inductive approach of qualitative research emphasizes developing insights and generalizations out of the data collected. Qualitative research emphasizes conducting detailed examinations of cases that arise in the natural flow of social life. They usually try to present authentic interpretations that are sensitive to specific social contexts. Locke (2001), state that qualitative research captures and discovers meaning once the researcher becomes immersed in the data. Analysis of qualitative research proceeds by extracting themes or generalizations from evidence and organizing data to present a coherent picture. Thus concepts are in the form of themes, motifs and generalizations.

The language of qualitative research is interpretation. Researchers discuss cases in their social context and develop grounded theories that emphasize tracing the process and sequence of events in specific settings. They explain how people attach meanings to events and learn to see events from multiple perspectives. Qualitative data are empirical. They involve documenting real events, recording what people say, observing specific behaviors, studying written documents or examining visual images. The theoretical categories that qualitative researchers use to understand and interpret the social world often are in the form of grounded theory. According to Locke (2001), the purpose of grounded theory is to specify the conditions that give rise to a specific set of action or interaction pertaining to a phenomenon as well as the resulting consequences.

There are different ways of ensuring reliability within qualitative research. One way of overcoming the questionability of the reliability is transparency of how the research was conducted (Bruinsma &

Zwanenburg, 1992). However, it has been stated that the research procedures of qualitative studies are particular and that replication is rare. But, although it is difficult to replicate qualitative research because of the flexible and variable nature of the research process, there might be scope for other researchers to test the findings. Locke (2001) states that no theory that deals with a social/psychological phenomenon is actually reproducible, insofar as finding new situations or other situations whose conditions exactly match those of the original study. Given the same theoretical perspective of the original researcher and following the same general rules for data gathering and analysis as well as a similar set of conditions, another researcher might be able to come up with the same theory for the phenomenon.

Secondly, reliability can also be addressed through the process of triangulation (Pauw, 1994). Triangulation of measures is a process whereby researchers take multiple measures of the same phenomena. By measuring something in more than one way, researchers are more likely to see all aspects of it. Triangulation of observers: Multiple observers or researchers add alternative perspectives, backgrounds and social characteristics and will reduce the limitations. A single person means the limitations of the one observer become the limitations of the study. Triangulation of theory occurs when a researcher uses multiple theoretical perspectives early in the planning stage of research, or when interpreting the data. Triangulation of method means mixing qualitative and quantitative styles of research and data. The use of multiple methods of data collection in a single project is an important strategy to combat problems of validity. Mouton and Marias (1990) conclude that triangulation is a way of compensating for the disadvantage of each individual method. However, triangulation of method was a technique not implemented in this study.

A third method of ensuring reliability was through the process of self-reflectivity<sup>2</sup>. Self-reflectivity is the process whereby the researcher contemplates own perceptions, values and thoughts due to the effect of the research or how it influenced the research process (Locke, 2001).

The present study aimed to provide clear and credible information that could be easily replicated and that could be scrutinized by other researchers. It also aimed to be transparent about the research procedure and analysis. Additional methods that aided in the transparency process were the methods of self-reflectivity and triangulation. Regular consultations with the supervisor provided alternative understandings and different perspectives in the data and interpretation. This input and comments allowed for further triangulation.

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<sup>2</sup> For researcher's self-reflection, see Chapter 5

## 4.6 Ethical responsibilities

It is important for all researchers to apply the principle of voluntary consent (Locke, 2001). All the respondents participated in the study on a voluntary basis. Informed consent is another principle that researchers need to apply (Locke, 2001). In the current study, informed consent was obtained at the outset of the study to enable respondents to make informed decisions about their participation in the research study. Respondents were given a statement briefly (Appendix III) describing the aim of the study and what was required of them as participants. This statement was explained to them and they were requested to read it and sign if they were comfortable with the content and explanation.

Respondents were informed and assured about the confidentiality of the study as well as their anonymity. Sensitive issues that emitted during the interview were treated with care and sensitivity so as not to make the respondents feel as if their privacy was being invaded. Contact telephone numbers of counseling services were provided to one of the respondents who at the end of the interview indicated that she might consider talking to a counselor/therapist. Respondents were informed about the obligation of the interviewer to report any case of possible child abuse or neglect should it become known during the interview process.

## 4.7 Data analysis

### 4.7.1 Questionnaire

The relevant questionnaire data are shown in Table 1 and discussed in Chapter 4, Section 4.3

### 4.7.2 Interviews

Grounded theory derives analytic categories directly from data and not from preconceived ideas or hypotheses. The researcher is thus forced to be extremely attentive to the field under study (Charmaz, 1990; Strauss et al., 1990). The data gathered in grounded theory research becomes more condensed and focused since data analysis and data collection occur simultaneously. This is explicitly aimed at the development of theory (Locke, 2001). Thus, interview questions can be refined: more could be added and/or others could be discarded.

In the first phase of analysis, the researcher aims to assign codes with a common meaning to data observations while at the same time studying the data. In the current study, codes that emerged included codes such as “mother’s love”, “growing up”, “fear of losing control”, “protection”, “virginity”, “education”, “mother-daughter relationship”, “claim of ignorance”, “non-disclosure”, “defensiveness”, “jealousy” and “care”. In this naming an attempt is made to conceptualize and develop abstract meaning for the incidents emerging from the data. The codes are then developed into categories, which are more conceptual and analytic. Examples of such categories are “harm in protection”, “warnings” and “sex is bad”. Also, by raising a code to a category, the researcher explicates its meaning; specifies the conditions under which it arises, is maintained and under which it changes; to describe the consequences; and to show how the particular category relates to others (Charmaz, 1990; Locke, 2001; Strauss et al., 1990).

The next phase involves the process of memo writing. It enables the researcher to look at the codes in terms of processes rather than only descriptive topics or themes (Charmaz, 1990). The aim is to discover and define processes. As the process of memo writing unfolds, categories are taken apart; properties are identified; underlying assumptions are highlighted; and it is shown how the category develops and changes (Charmaz, 1990; Locke, 2001; Strauss et al., 1990). In the analysis of the current study it is shown how categories of “protection”, and “fear” lead to another category of “warnings” and the underlying assumption that “sex is bad”.

Locke (2001) stated that the process of memo writing, leads to theoretical sampling, which enables the researcher to fill out the categories, to discover variation, and to define gaps. The purpose is to develop the emerging theory and not to increase generalizability of the results (Charmaz, 1990). Through the process of memo writing, I found that more questions started to emerge. Specific questions that surfaced were questions such as “What is the participant’s overall opinion or judgment about the acceptability of experiencing bodily sexual pleasures?” “What is her opinion on her own sexuality and does she see herself as a sexual being?” “Why does she think there is such a silence when it comes to discussing issues of sex and sexuality?” “What does she think is her daughter’s sexual status and why?” “If her daughter would ask her mother advice about sex and sexuality, would she (the mother) be able to share her own sexual experiences with her husband with the daughter and if not, why?”

I had to return to the participants to gather more information in the areas that left voids. This was done to generate more productive discussion that might otherwise not have been reached. In the second interviews I asked more focused and specific questions. The trust that was established in the

initial interview, allowed for more openness and thus more in-depth data emerged. This process of intentionally going back for more information, assisted to enrich and redefine the process of analysis.

As categories have been developed, formulated and refined, these categories are bounded and start to bring the analysis together. A commitment is then made to tell a particular story/theory derived from the data. At the final stage of the grounded theory analytic process, the writing of the theory occurs. According to Charmaz (1990), the main argument may not be clear to the researcher until several drafts have been written. Detailed interview quotes and verbatim material should be used to illustrate the connection between the data and the analysis. This is also implemented in the current study where ample verbatim material has been used.

## **5. OWN REFLECTIONS**

As a “coloured” woman, I know the importance of one’s mother and one’s grandmother. I have first-hand experience of just how they impact and influence one’s life. They have an uncanny omnipotence. I have been brought up to be a good girl and to behave as fit for a lady. There was a lot of scolding and reprimanding if behavior was not seen as appropriate. In retrospect, I believe that it was important for both my mother and grandmother to be seen as having a well-behaved and good-mannered daughter and granddaughter. It gave them stature and showed that they were good carers and role models. I believe that it was not just about me but also, in large, about them. They did not want to be seen as having failed as caretakers. They wanted to be respected and did not want people to talk about their daughter as a loose girl or someone with no morals. That would mean that they had no morality and that they were loose.

Working on this thesis and through all the writing and re-writing I began to wonder about what my own mother’s comments and opinions to such a topic might be. I had a lengthy conversation – albeit telephonically - with my mother and somehow I expected what her answers would be. I knew that she would be uncomfortable talking about such a sensitive topic and that she would try to avoid as much of the emotionality as possible. Little did her answers disappoint me.

I had to ask myself how did what I have been taught influence my life? What impact did it have in how I see and experience my sexuality? How do I give meaning to my sexuality? I believe that I still have a long way to go in acknowledging my sexuality and becoming sexually confident. I have

been restricted in giving meaning to my sexual experience because of my mother's and my grandmother's input and rearing. I do not blame them but I would like to believe that I would not do the same if I ever have a daughter. I realize the growth that occurred in my life through the writing up of this thesis but I can also say that I am on a path of sexual discovery. I realize that the road is long but hopefully I'll be confident enough to face whatever I might discover. I am still left wondering if it would not have been easier growing up if one had the "real" information – the things that mattered most and the things that a young girls want to know?

Right now I am at a stage where I have to ask myself the question "Who am I?" Am I really the good girl that I was brought up to be? The good girl that is seen and not heard. What would they say if I had to ask them pertinent and embarrassing questions about sex? Would I then have been seen as the bad girl? I can honestly say that whether I was sexually active as a teenager or not, I would definitely not have discussed it with them. It still is a topic that we do not openly discuss unless for making jokes and then mostly from the male perspective. We prefer to remain on the safe side and do not venture to the unknown embarrassing discussions of the beauty and pleasure of sex and sexuality.

I think it is because both my mother and grandmother are too scared that they will create the wrong impression. They are scared that they will be giving legitimacy to the pleasure and thus to the act of sexual intercourse. On the other hand, it is more than likely that they are not able to contemplate that another perspective is to view sexuality as something both possible and desirable. Irrespective of the reason, we are not yet free to claim our sexuality and make it our own. A legacy that is being past on from one generation of mothers to the next. I can only hope that I will be able to be a more liberal and truly open mother myself. Not just in giving and sharing of information but also in sharing experiences. Thus, I hope that my daughter will be able to enjoy her sexuality fully and without restrictions.

With the construction of the data I was aware of how familiar the emerging data seemed to me. It was like having a conversation with my own mother and hearing her speak through the mouths of the participants. Being married definitely assisted in the data collection - the participants were more willing to discuss intimate detail if they knew that I was married myself. This echoed my own mother and grandmother's behavior in that they were more willing to discuss sexual topics with me after my marriage.

I was continuously confronted with my own opinions and principles as the construction of data developed. Self-reflectivity, as stated by Locke (2001), is seen as the process whereby the researcher contemplates own perceptions, values and thoughts due to the effect of the research or how it influenced the research process. I tended to assume that I knew what the women were talking, especially when they were discussing premarital sex. I assumed that because of what my mother said to me, they were referring to similar experiences. I was inclined to see the data from my own experience and preconceived ideas, such as the notion that virginity is one's most prized possession and that a girl who engages in premarital sex is "a bad girl".

Especially in the beginning of the research process, I had difficulty admitting and accepting my influence on the construction of the data. I had to concede to the fact that I played a role in the shaping of the data. It was only with the assistance and guidance of my supervisor that I came to that realization. I recognized that I needed to return to the women and to ask more pertinent questions. Critical questions that emerged were questions such as "What was the women's overall opinion about the acceptability of experiencing bodily sexual pleasures?" "What was her opinion on her own sexuality and did she see herself as a sexual being?" "What she thought her daughter's sexual status was and why?" These questions cleared up a lot of misinterpretations and I was confronted with the knowledge that I did not explore enough and made a lot of assumptions. I assumed that the women would never share their personal sexual opinions with me, but some of them disclosed their views and attitudes to sex with relative openness. In addition to that, I believed that the women would never trust me and thus would not be honest during the interview.

I also had to recognize that I often took on the child or daughter role as the women discussed issues that mothers and daughters would "normally" regard as sensitive. This limited the interview process in that I was reluctant to probe as discussed earlier. At times I felt even more uncomfortable than I assumed the women to be. However, as I became more aware of my own thoughts and feelings and how it affected my discussions and conversations with the women, it allowed me to be more assertive and confident during the second round of interviews. I was much more conscious of my personal beliefs such as that sexual intercourse is only allowed within a marriage and I tried to guard my beliefs from wittingly influencing the construction of data. I constantly questioned whether it was my viewpoint being expressed or the opinions of the women.

According to the social constructionist framework it is impossible for a researcher not to have a bearing on the construction process (Lips, 1999). My background as a "coloured" woman raised in a "coloured" community influenced my interpretation of the data. I have witnessed mothers' sorrow

when a teenage girl fell pregnant and I have seen a mother's disappointment. I could relate to what the women were trying to convey to me. I too had messages conveyed to me that it is important to protect yourself from being corrupted by men and subsequently falling pregnant. I heard the concern of my own mother in the words of the women. This may partly explain why I explored and attempted to convey the concern of mothers for their daughters. This became a central theme in the analysis and construction of the data.

As adolescent and young adult, the sexual information that one received was mostly from one's more experienced female friends. I took a look at my current female friends – all young, unmarried professionals. Some are sexually active and most are sexually confident. However, not one has the courage to discuss her sexual status with her mother. I have to marvel at the influence that our mothers have on our lives – how ironic it is that she is the most influential person in our lives, yet we do not feel comfortable to discuss our sexuality with her. Why is it that in the mother-daughter relationship we can not create a space where sexuality have a place to be talked about, shared with one another and where multiple opinions are valued and respected? I came to realize how much I would have wanted my mother to create a sphere where we could discuss issues of sexuality. This led me to wonder whether mothers never had similar desires to be able to talk with their mothers. Pondering this point allowed me to have more understanding for what these women might be going through in their daily raising of their daughters.

Granted the fact that sex has so many dangers – sexually transmitted disease, AIDS, pregnancy, rape – mothers should be respected for wanting to protect us from all of that grief. However, believing that innocence will protect us is of no good. Silence creates ignorance and that is endangering us. Silence creates mystery and that leads to curiosity. Curiosity is the real danger if one is still ignorant, naïve and lack the confidence to have a sexual negotiation that will protect one. We as daughters are endangered – we have no sexual agency and are fumbling in the dark searching for the light. We are paying a price because our mothers are so scared that they are condoning pre-marital sex, that they are giving their consent. But maybe our mothers too are fumbling in the dark and only doing how and what they have been taught? I only hope that I will be a mother that will arm my daughter instead of bringing her harm. Through the entire research project as it grew from only an idea to the final product, I also went through certain changes. I had to contemplate my own beliefs and now realize that I do not want to follow the path that “coloured” women have been on for such a long time. Should I ever be blessed with daughters, I would not want them to continue a path that makes no allowances to venture outside and still feel safe to return.

## 6. A GROUNDED THEORY ANALYSIS

The aim of the current study was to investigate the constructions of sexuality of “coloured” mothers with teenage daughters. To date, the sexuality of midlife mothers in a “coloured” community is a phenomenon that has not been studied in South Africa. In part, the current study could be described as phenomenological as it aimed to emphasize women’s experiences. Grounded theory is a qualitative method that is often used to study female experience. It allows and empowers women to tell their stories in their own discourse and without constraints (Griffin, 1986; Finchilescu, 1995).

According to Locke (2001), the aim of grounded theory is to develop a theory that is reliable and faithful to the evidence or the data gathered. Thus, it searches for a theory that is comparable to the data and that can be replicated as well as generalized to other studies or similar theories. Grounded theory also allows the researcher to develop, refine, revise and transcend concepts within the area of study. Charmaz (1990) also concludes that the groundedness of the research is found in researchers attending closely to the data; theoretical analyses are build directly on interpretations of processes within the data; and analyses are compared with literature and theory.

In line with the process of grounded theory, various concepts and categories were identified during the analysis of the data. These will be explicated and interpreted in the following section. Furthermore, the analysis and interpretation will be compared to existing literature and theory.

### 6.1 Concern for daughters’ well being and future

All the participants in the current study, showed a great deal of concern for their daughters’ well being. These mothers only want the best for their daughters.

*“Soos ek weer sê ... enige ma verlang maar die beste nè ... vir hulle dogters en sien uit om hulle dit te gee wat hulle toekom.”*

Interviewee DD

They want a better life and future for their children.

*“Ek het vir hulle ook gesê, julle is my kinders ... ek wil ook hê julle moet matriek.”*

Interviewee GL

*“Ek praat baie met haar ... Ek wil nie hê wat ek ... ek oorgekom het, moet hulle deurgaans nie ... Ek wil hê hulle moet bereik wat ek nie kon gebereik het nie”.*

Interviewee FC

This concern for their daughters' well being and future becomes especially evident as daughters begin to mature physically and as they reach menarche.

## 6.2 Sex and sexuality can ruin future

For most of the mothers interviewed, the start of her daughter's menarche is a turning point for both mother and daughter. It signals a new phase of mothering.

*“Toe sy haar maandstonde gekry het ... die period, toe het sy nog na my toe gekom, toe maak ek haar sit en toe sê ek vir haar. Jy is nou 'n gevaar vir die mans, ... jy is nou ryp en as jy met mans slaap dan kan jy 'n baba kry ...”*

Interviewee FC

*“Toe sy nou beginne menstrueer het toe het ek vir haar gesê, as jy en 'n mansmens seks, seks, seks, en jy gebruik nie 'n hoe kan 'n mens sê voorbehoedmiddels nie, of die man gebruik nie 'n kondoom nie, dan is dit klaar praat. As jy seks gehad het, jy gaan verwag. Al staan jy op jou kop, jy gaan verwag.”*

Interviewee JG

*“... toe sy siek word, was... toe sê ek vir haar dit is nou 'n gevaar stadium ...dit is gevaarlik ook in die opsig as 'n mens nou ... uh, uh ... siek word en jy is in 'n verhouding ... jy kan swanger word en so aan ...”*

Interviewee DD

*“Kyk van nouaf is jy nou 'n jongmeisie ... en seuns ... moenie hierdie goed sien nie en so ... Ek het vir haar gesê, sodra jy met 'n man gaan slaap, dan gaan jy 'n babatjie kry, en, en, en daar waar die outjie ingegaan het, daar gaan die babatjie uitkom en dit is baie seer.”*

Interviewee BD

In the above quotations explicit messages about men and of women's sexuality are conveyed. It gives the message that the female body is dangerous. Thus, sex and sexuality are forbidden areas not to be ventured into, because of the serious repercussions. These repercussions are more often than not, pregnancy or the loss of one's virginity. Nothing seems to be conveyed about the joys and pleasures of the maturing female body.

According to Prendergast (2000), menstruation is still something that is not quite right to talk about. He states that girls also acquire informal social knowledge about menstruation; how it is viewed and dealt with in the world, to whom and how she must speak about it, and the practical arrangements that must be made so that rules and etiquette as to its visibility and management are not contravened (Prout, 2000). In the current study, mothers give the exact similar messages to their daughters. They also convey the message that menstruation is a secret and should remain a mystery and hidden from men.

With the onset of menstruation girls receive strong messages about the need for hygiene.

*"...en jy moet baie presies wees daarop. Jou panties en goeters daar as jy klaar is moet jy in die water gooi en uitvryf en ek gaan dit nie doen nie, maar ek ... ek wil dit sien ..."*

Interviewee BD

*"... gesê as jy jou maandstonde het, ... moet nou netjies wees en mag nie op koue grond sit nie en nou soveel dae en so aan ..."*

Interviewee DD

Mothers give constant warnings about being careful of boys, but these messages are almost always clouded in mystery.

*"... gesê as jy jou maandstonde het, moet nie met mansmense lol nie ... En dit was maar presies basies soos nou ek dit aan my ... aan hulle oorgedra het."*

Interviewee DD

*"En ek sê vir haar en seuns ... moenie hierdie goed sien nie en so ... en jy moet baie presies wees daarop.... Ek het my oog daarop gehou."*

Interviewee BD

*“Bly weg van die jongietjiekinders af, ... en toe het ek dit weer oorgedra aan my kinders’ ...  
Oe henè ... nou moet jy wegbly van die mans af ...”*

Interviewee ML

As seen in the above quotes girls get information from their mothers but the content of the talk between mother and daughter is often warnings without giving explicit information. In accordance with others research it mostly centers only on the physicality and hygiene aspects of menstruation rather than topics of sexuality and/or relationships (Rider, 2000).

For the mothers, menstruation signals a dangerous stage. It signals a stage when daughters become women, although still little girls. The concerns of these mothers grow as they see their daughters blossoming into womanhood.

*“Weet jy hoe swaar was dit vir my! Ek kon dit nie glo nie. Ek wou nie gehad het dit moes al gebeur nie ... sy was daai tyd seker maar nog ... twaalf gewees ... twaalf geword in daai jaar. Oe! Dit was swaar! ... ek kan nie geglo het nie ...”*

Interviewee LM

*“Daar was definitief die vrees dat wat gaan gebeur as hulle nou miskien die stadium haal wat hulle nou in is. Nou kry ek dit ... nou kry ek dit ... al daai pyne, maar wat kan ek nou doen, ek moet nou maar fight teen al daai pyne.”*

Interviewee RA

Mothers believe that sex and sexuality would necessarily impede the dream for a daughter to complete her schooling career, to pursue further studies and ultimately to have good employment. Mothers seem to believe that sexuality leads to sexual experimentation, which inevitably leads to pregnancy.

*“...nie soos vandag se kinders wat op die skoolbanke sit en kinders kry nie ... Nee, my meisiekind moet iets van haar lewe maak.”*

Interviewee SA

*“Sy was st. 8, en sy was op skool toe sy mos nou swanger word ... ek wil gehad het sy moes skool klaar gemaak het.”*

Interviewee GL

*“...mammie wil hê jy moet skoolgaan, belowe mammie vandag dat jy nie in kêrels sal belangstel nie tot die dag wanneer jy klaar geleer is ...”*

Interviewee BD

With the daughters' physical maturation the mothers seem to remember their own hopes and dreams when they were teenagers (Rider, 2000). Flaake (1993) argues that not only does the start of the menstruation bring about a new and different level of fear, but the daughter's bodily development could remind and cause the mother to reflect on her own previous hopes and disappointments.

Most of the mothers worry about their daughters' appearance and especially about the fact that men are looking at them.

*“Ek het gevoel dat ... ek neem standpunt in dat ek ... ek hou nie van kort goed nie. ... Dit moet net nie te kort wees nie. Kleredrag sê baie ... Dit, dit kan vir jou ... na 'n losbandige meisie laat lyk.”*

Interviewee DD

Also, mothers are aware of their daughters' beauty and although they pride themselves in it, mothers do not talk to their daughters about it.

*“... maar sy is nog stokstyf ... sy dra nie eers 'n bra nie ... en sy is ... haar borste is so groot. Niks skud nie of is nie pap nie. Dis tekens wat 'n mens kyk ... maar sy's nog perfect ... sy's vet, sy's mooi, en so dik is haar boude ... so oulik ... so oulik is sy.”*

Interviewee BD

*“'n meisiekindjie kan 'n mens togte mooi maak en die oulikste goedjies vir haar koop, ... maar as sy ouer raak, dan wil 'n mens die mooigeid wegsteek want jy is te bang dit sal net ongeluk bring ...”*

Interviewee SA

According to Flaake (1993), mothers do not share their pride about their bodies with their daughters, and thus daughters remain dependent on men to be acknowledged. In so doing, mothers unwittingly disempower their daughters as women, while giving the power to men.

### 6.3 Strategies of protection

Mothers seem to employ different strategies to protect their daughters and try to keep them away from sex. These strategies include warnings as well as messages that the mothers give to their girls. These messages include implications such as that the female body is dangerous and that women need to be protected. Another strategy is the implementation of rules and regulations. Yet another, but often only as a last resort, is the administration of contraceptives. Also high on the list is instilling fear of sex and sexuality; religiously advocating virginity; and advocating the importance of scholastic education.

#### 6.3.1. Warnings

The mothers try to warn their daughters about the dangers that they as mothers perceive to be “out there”. They want their daughters to be safe and therefore constantly warn them about the pending doom should they be on their own away from home.

*“Nou sê ek vir hulle as hulle uitgaan, hulle moet vir hulle oppas.”*

Interviewee MN

They also warn their daughters by emphasizing examples within the community of what the daughters should not do.

*“Soos in ons bediening is daar twee dogters nou kort agtermekaar verkrag gewees, en toe kon ons daaroor praat ... Ek gebruik dinge wat gebeur as voorbeeld vir hulle.”*

Interviewee DD

*“Vir my eie dogter het ek baie die voorbeeld gemaak as dinge in die gemeenskap gebeur. Dan sê ek G, daar is al weer ‘n kind wat die skool moes verlaat het, en ek vertel ek hoe die auntie kom huil het oor die dogter wat nou ... Dan het ek dit baie as voorbeeld gebruik.”*

Interviewee LM

The mothers hope that in doing so, it will be a deterrent for their daughters to go “the wrong way”. Unintentionally, however, mothers are showing their daughters, as well as reinforcing, the

construction of women as powerless and women as having no agency. They fortify the belief that women and subsequently their daughters need to be protected or they will not be able to make it on their own.

### 6.3.2. Instill fear

Mothers also try to steer their daughters away from sexual experimentation, by making use of more warnings and “threats”. They try to give their daughters the message that pre-marital sex is a sin and that one who engages in such acts, will be punished. Such acts are regarded as anti-christian and that daughters who venture there will be rebuked and “cursed”.

*“Ek sê, ek sit nie ‘n curse op my meisiekind nie, maar dit is net so ... ek sê wat jy aan jou ouer doen, kom terug na jou toe. Ek het dit aan my ma gedoen en nou kry ek dit ... kyk, uh ... ek het ook feitlik my ma se hart seergemaak. Net soos my dogter nou my hart ook seer gemaak het.”*

Interviewee GL

*“En dan sê ek vir hulle onthou ... uh wat jy vandag teen jou ouers doen, kom op jou pad eendag en dan gaan jy spyt wees. Dan gaan jy terug kyk, dan gaan jy kan sê, maar dit is wat ek aan my ouers ... Ek sê ek gaan nie op die ou einde die vrugte pluk van jou verkeerde vrugte nie ... Jy gaan self die vrugte pluk van jou verkeerde vrugte.”*

Interviewee ML

*“ ... maar ek vertel my kinders van die gevare van rondslapery en dat hulle nie moet waag om huis toe te kom en te sê ... een ... is pregnant nie en my meisiekind weet ook sy moet haarself oppas ... ”*

Interviewee SA

*“En as christen kan ek nooit dinge soos ... voorhuwelikse seks goedpraat nie. So is ons grootgemaak en dit is verbode! ... daar is ... reëls ... reëls wat hulle weet gehoorsaam moet word.”*

Interviewee LM

This control by the use of threats is also evident by these mothers’ own mothers. They too were submitted to threats just as the mothers do to their daughters now.

*“... en sy't gesê ook as jy slaap met 'n man gaan jy 'n kind kry en ek is met jou niks te doen nie, ek smyt jou uit en al daai goed. My ma was rerig hard en tog het sy dit gedoen hoor.”*

Interviewee BD

*“Sy het sleg gevoel, want in die ou tyd is dit mos gesê as 'n mens nie 21 kan word in jou ma se huis nie, is dit amper of hulle vir jou wil onterf of iets ... soos ek vir jou gesê het 21 moet ek geword het in die huis in ...”*

Interviewee RA

### 6.3.3. Sex is bad

In the current study, there is a lingering sense that premarital sex (if not all sex) is bad. Sexual behaviors that do not conform to the known “truth” were judged as evidence of abnormality or sin.

*“Dit lyk so ... dit lyk al ... uh ... of die kind 'n behoefte het aan seks of so ... maar soos sy optree is nie normaal nie.”*

Interviewee FC

*“... dit is verbode!”*

Interviewee LM

*“Kyk in die bybelse tyd is dit mos nou uh ... uh ... dit is Sodom en Gomorra, of 'n gruwel as jy nou voor die tyd seks het as jy nou nie getroud is nie.”*

Interviewee GL

For these mothers, sexuality is paramount only to “bad women” and not part of the well-respected woman. Acknowledgement of sexuality is thus also an acknowledgement of being bad and wanton. These women believe that the image of a bad woman is someone that is loose, immoral, wild, fast, unchaste and shameless. These mothers try to instill in their daughters, the belief that chastity is a virtue and that they should abstain from sex until they are married. Virginity is highly proclaimed by all the mothers.

#### 6.3.4. Virginity is the key to successful womanhood

Virginity is seen as the means to an end. It is a way to ensure a better future - a future with “a good husband” and an intact reputation.

*“My trots ... en ek is baie trots om te sê ek was 26 jaar oud, en ek was ‘n maagd toe ek getrou het. En ... ek sê altyd ... weet julle hoe wonderlik is dit om te kan trou en te weet dit is jou man en jy is die eerste persoon ...hy is die eerste persoon met wie jy gaan gemeenskap het. Dit is wonderlik. Niemand kan van jou praat nie.”*

Interviewee LM

*“Ek het baie met my oudste meisiekind gepraat. En ek het vir haar baie voorbeelde gegee uit my getroude lewe uit. Sy was ‘n maagd toe haar man haar gekry het. Sy wil haar jonglewe geniet het. Sy wil 21 geword het. Sy wil net met een man bly hou het en dit het sy nou uitgevoer.”*

Interviewee JG

*“Hulle moet mekaar respekteer ... As julle mekaar liefhet dan sal julle mos wag, maar as julle mekaar nie liefhet nie, dan sal julle nie wag met sulke dinge nie. Dan wat jy sulke dinge voor die tyd wil doen, nou moet jy nou met ‘n ander man eendag gaan trou, verstaan. Dan se daai man ook jy was los, ... Jy was nie eers ‘n maagd ...”*

Interviewee MN

*“Dit is nie reg om seks te het en rond te slaap voordat jy trou nie. Watter man sal dan nog wil trou met ‘n vrou wat alreeds met die hele dorp geslaap het. Ek weet dat ‘n mens net ‘n regte man kry as jy jousef oppas en die gevare vermy.”*

Interviewee SA

According to Ellison (2000), women regard their sexual needs as enemies because these needs or urges prompt them to “squander” what they consider to be their sexual treasure. Women thus feel that this treasure cannot be squandered – partly because they feel that they can only spend it once and partly because they do not want to make themselves ‘cheap’. Thus, women and subsequently their daughters should barter this treasure for the security of a man. In addition, Ellison (2000) states that for women, the sexual act needs to be preserved, and they do not regard it as a natural desire to be expressed.

According to Ortner and Whitehead (1990), holding on to daughters may begin early, but the fullest manifestation of this tendency is seen in the guarding of unmarried daughters' virginity. This is to be seen in the most fully elaborated form of the sexually controlled daughter. It is important to note that the daughter's virginity has a very high honor. This may be taken as an expression of the genuine value of the daughter (Wilkinson, 1996). What is symbolized by her virginity is not only her own self-control, but also the control by her mother over her behavior. Mothers want to preserve the daughter's virginity also because many of them lost their own early in life.

*“Dit, dit beteken vir my iets wonderliks, want om te dink ... jy het jou opgepas. Dan het jy nog jou kroon op jou kop ... niemand het jou getouch nie, niemand het jou geken nie, ...”*

Interviewee BD

*“Ek dink ‘n moeder speel ‘n groot rol ... in ‘n dogter se lewe ... En toe kom my seun nog en sê die meisie is swanger van hom ... En dit was erg gewees regtig waar ... Maar dit sou my baie meer geruk het as dit my eie ... gewees het ... Want ek het besef as dit my meisiekind gewees het ... ek bedoel wat sou ek nie gedoen het nie. Ek weet nie wat ek sou gedoen het nie.”*

Interviewee DD

*“Ek het altyd gesê ... jenè mens kan darem maar seks in die huwelik in, maar jy moenie voor die huwelik nie ... en ja man, weet jy ek wil hê hulle moet ... uh ... mooi bruide wees eendag.”*

Interviewee MN

Thus, the daughter's virginity is an accomplishment for the mother. It is a symbol of her worth as a mother. According to Beal (1994), parents give more autonomy and independence to boys than girls of the same age, and this pattern continues in adolescence because parents worry about the possibility that their daughters will become pregnant. Thus, a daughter will not be able to finish her schooling career and will not be able to have a “good life”.

### 6.3.5. Rules and regulations

According to De Waal (1993), parents have different strategies to guard their daughters from undesirable intimacies or imputations by others. These include:

1. Girls are restricted on where they go;
2. Time as a restriction – they can only go out during the day or early evening;
3. Certain activities are limited to girls – smoking, drinking, boys’ activities;
4. Restrictions on social contacts – limiting friendships;
5. Girls need to be chaperoned – they cannot go out on their own.

The message given to the girls is that a grim fate awaits those that take the risk to venture on their own. I believe that this leads to the assumption that girls must be looked after, and that they do not have the ability to look after themselves. Therefore girls should be protected by others.

*“Sy gaan nog uit saam met ons, en hulle gaan baie na die jeug en kerkfunksies toe, maar dan is sy altyd saam met haar broer en pleegsuster.”*

Interviewee DD

*“...daar is niks verkeerd met vrinne nie, maar hulle moet huis toe kom laat ek sien wie is die vrinne ... Is eintlik beter as jy weet wie die vrinne is ... en wherever hy of sy gaan, jy hoef nie te worry nie, want jy weet ... watter vrinne die kind mee te doen is.”*

Interviewee ML

*“In die huis is reëls. Ek en my man altwee ... ons wil hulle reg grootmaak en ... soos ons laat hulle nie programme kyk op die TV wat is vir 18 nie ... want ‘n mens weet nie of jy vir hulle moet laat kyk nie ...”*

Interviewee FC

Another strategy that mothers employ to protect their daughters, but mostly as a last resort, is to condone the use of contraceptives.

#### 6.3.6. Contraception

Although having contraceptives administered to their daughters is mostly done with a lot of reservations, these mothers see it as their only option to protect their daughters from being “corrupted” by men in the community. For these mothers it is almost a last resort in their attempts and struggle to protect and save their daughters from the evils of society.

*“...toe ek nou sien die dinge ruk so lelik uit in die wêreld in en toe sê ek G, ek dink mammië moet maar vir jou op die voorbehoedmiddels sit ... Toe dink ek net, ... soos die wêreld nou is ... waar jy kan keer moet jy maar keer ... want as die jongietjiekinders verkrag dan word die meisiekinders verwagting ... want dit is die groter jongens ... die jongens wat klaar is ... Die tipe jongens wat nou die kinders gebruik en so.”*

Interviewee BD

*“...ek het vir haar gesê as sy seksueel aktief raak, kom sê vir my, ... dan kan ek ...kan ek vir jou iets kry. Die inspuiting of die pil ... Ek was vir haar die dinge voor, maar sy het nou nie vir my kom sê toe sy seksueel aktief raak nie. Toe kom sê sy nie vir my nie ... ek is glad nie skaam om met my kinders te praat nie ... dat my kinders meer experience, meer mature kan en meer nugter kan dink ...”*

Interviewee JG

*“...definitief, want die clinic sit maar net hier bokant die pad ... dit kos niks. Dis verniet ... Ek voel hulle moet dit net doen ... En om nie 'n voormiddel te gebruik nie, dan moet jy dan at least nie 'n boyfriend het nie of so iets soos dit nie, maar voormiddel sal jy dan maar res van jou lewe gebruik as jy dan nou nie wil nie. Veral as jy seksueel verkeer, ... jy moet dit gebruik.”*

Interviewee RA

In condoning contraceptives, the message that mothers send out to their daughters, is that they are not in control of their own sexuality. The message send out is that men are at the steer and thus mothers have to be reactive and prevent these men from taking advantage. This message inevitably implies that women and especially daughters do not have the ability to stop this cycle and sex therefore becomes a monster with its own pace, carving out its own path. Sex is given a life of its own.

Although these mothers try to act in their daughters best interest, some of the mothers feel that it is almost as if giving the child the go-ahead to experiment sexually.

*“Nee, dit was rêrig nie 'n maklike besluit nie, dit was 'n swaar besluit, ... aan die ander kant het ek ook gedink as ek nou vir haar laat die goed, uh ... uh ... voorbehoedmiddels laat opsit gaan ek ...ek stuur haar nou veld toe ... Ek het haar mooi verduidelik gemaak oor*

*hoekom mammië dit uh ... wil doen."*

Interviewee BD

*"Dit voel soos die veiligste ... maar ... uh ... dan dink sy nou sy is vry. Dan ... uh ... dan dink sy ek dwing vir haar ... Ek praat baie met haar oor die goed ..."*

Interviewee FC

*"... 'n mens moenie jou kind op voorbehoedmiddels sit en uh dan is dit amper so, mens sal nooit weet as daai kind ... uh ... seks nie. As jy jou kind voor die tyd op 'n voorbehoedmiddel sit, dan is dit amper ... dan sê jy vir jou kind jy kan maar 'n hoer word, ... Kyk dan is dit so maar ek kan dit doen, ek sal nie swanger word nie, ek kan vanaand uitspan en so."*

Interviewee GL

Mothers are scared that they will be blamed for allowing and giving consent for their daughters to use contraceptives. They fear that their daughters will become sexually active if they use the contraceptives. This is echoed by Rider (2000), stating that ironically some parents believe that if they discuss sex and contraceptives with their children, they are giving them their blessing to become sexually active.

### 6.3.7. Education

The mothers feel that they have to protect their daughters and the hopes, dreams and aspirations that they have for them. The mothers' concern is especially evident in discussions about education and their dreams for their daughters to perform academically. They have specific aspirations for their daughters and great hopes that the girls will be able to fulfill those dreams and aspirations. For them, it would mean that their daughter achieved what they could not.

*"Ek sien hulle toekoms net nie soos ek sê met 'n man nie, nie 'n mooi man nie of 'n baie ryk man nie, maar met 'n man wat ek weet sal sorg vir hulle ... Ek soek nie vir gelerendheid of vir niks nie, maar vandag kan jy ook nie bo gelerendheid kyk nie."*

Interviewee RA

*“Ek praat baie met haar ... met hulle. Ek wil nie hê wat ek ... ek oorgekom het, moet hulle deurgaans nie ... Ek wil hê hulle moet bereik wat ek nie kon gebereik het nie ... ”*

Interviewee FC

*“Ek wil hê sy moet die boodskap kry dat geleerdheid baie belangrik is en dat dit ‘n mens se toekoms bepaal. Ek wil hê sy moet die vriende laat staan en goed slaag sodat sy verdere kan gaan leer en dan kan sy vir haar ‘n ordentlike man kry wat vir haar sal sorg en nie agter haar geld aan sal wees nie ... ”*

Interviewee SA

*“Ek was ook baie ... ook sommer nou reguit met haar ... Jy gaan klaar skool en jy leer klaar en dan kry jy ‘n outjie.”*

Interviewee LM

According to De Waal (1993), having a teenage daughter confronts many mothers with the lack of options in their own lives. Daughters can choose to pursue higher education – a choice that was not necessarily open for the mothers.

These mothers also worry that their daughters will be unable to complete their schooling career. They value education, because it is something that eluded them. In some instances, because they had to help in supporting the family, and in certain cases because they fell pregnant at a young age and before they had the sanctity of marriage.

*“En toe ek 18 word ... en ek het toe al gewerk ... en uh ... 2 maande daarna toe kom ek ook aan. Hier is ek ook swanger ... ”*

Interviewee BD

*“Ek was 17. Toe ek 18 gewees het, toe trou ek. Toe is sy omtrent ‘n jaar oud.”*

Interviewee JG

*“Ek was 18 toe ek swanger raak ... Ons het getrou toe die seun seker so ... ek dink ... hy was 5 jaar oud toe ons trou.”*

Interviewee DD

It is evident that education plays a very important motivational role in mothers' protection of their daughters. However, research (Cotton-Huston et. al., 1998; La Sorsa et. al., 1990; Pete et. al., 1990) has shown that most teenage girls engage in sexual activity although the mothers employ various means to keep them from sexual experimentation. A common factor that influences sexual exploration and experimentation is the quality of the mother-daughter relationship, or a conflictual mother-daughter relationship.

#### 6.4 Trust and openness in the mother-daughter relationship

Central to the mother-daughter relationship are issues of trust and openness. Mothers desperately want to trust their daughters as they want to trust in the upbringing they give their daughters. They want to believe that their daughters will not betray the trust that they (the mothers) have in them.

*" ... as jy sê 11 uur 12 uur in die huis, en hy kom oor die tyd dan moet ... dan gaan daar 'n wantroue ontstaan. Jy gaan jou kind nie vertrou nie. As jou kind doen wat jy sê dan gaan daar 'n vertrouendheid tussen julle ontstaan ... Wys vir hulle op die verkeerde dinge en wys vir hulle wat verkeerd is en wat hulle veronderstel is om te doen ... "*

Interviewee ML

*"So veral as H so partykeer uitgaan, ... dan dink ek eers maar ek het dan ook nie vertrou in haar dan nou nie. Dan dink ek ook ek kan darem nie so my kind se vertrou ... sy het mos nou die eerste mistake gemaak, ek glo darem nie sy sal die tweede mistake maak nie. Ek moet darem nou vir haar vertrou soos ek vir haar vertrou het eerste keer voor die baby."*

Interviewee MN

*"Sy is 'n gehoorsame kind ... sy luister altyd as daar gepraat word ... Ek wil vir haar sê, mammi vertrou jou en glo dat jy altyd die regte paadjie sal volg, maar onthou, ... moet nie vergeet wat jy in die huis geleer is nie."*

Interviewee SA

The mothers appear to be terrified of the truth of their daughters' sexual statuses. It would seem that the mothers prefer not to acknowledge that truth. They prefer to believe that their daughters are innocent and that they (the daughters) will not betray the trust that their mothers have in them. When asked what they thought their daughters' sexual status was, the mothers were adamant that

their daughters would never engage in such activity, that she was too young or that the mother would know if it happened.

*“Nee! Nooit nie ... niks nie. Nog niks van dit nie. Sy is nog stokstyf. Ek het mos gesê dat ‘n mens kan sien ... maar sy is nog reg ... niemand het nog aan haar gevat nie. ‘n Ma kan mos sien.”*

Interviewee BD

*“Ek kan vandag met ‘n versekerde hart sê dat sy nie sulke dinge doen nie. Sy het nie op die oomblik ‘n vriend nie, maar ek weet soos net ‘n ma sal weet, dat sy nog nie seks gehad het nie en ook nie sal totdat sy die dag trou nie.”*

Interviewee LM

*“Sy is darem nog te jonk om aan sulke dinge te dink. Sy gaan nog uit saam met ons en hulle gaan baie na die jeug en kerkfunksies toe, maar dan is sy altyd saam met haar broer en pleegsuster. Nee ek dink nie dat sy al seks gehad het nie, ... ek glo nie. Ons praat baie oor die voorbeelde van jong meisies wat swanger raak en nie meer hulle skoolloopbaan kan voltooi nie. Sy weet wat die gevare is.”*

Interviewee DD

*“Nee ... nee, ek glo darem nie. M is nog te klein vir sulke dinge. Sy gaan nog nie eens alleen uit nie. Sy gaan nog uit saam met my en haar pa. Nee, sy is nie ... glad nie.”*

Interviewee MN

*“Nee, glad nie. Hulle weet die opvoeding wat hulle gekry het en hulle weet wat ek en hulle pa van hulle verwag. Hulle is goed opgevoed en met goeie waardes en hulle kan selfstandige besluite maak. Hulle weet wat is reg.”*

Interviewee ML

In the study by Lesch (2000) the daughters of these mothers were interviewed with regard to their sexuality. All the daughters admitted that they were sexually active. The mothers' vehement denial of the possibility of sexual activity is therefore quite significant. One possible explanation for the vehement denial could be that these mothers are most likely aware of the fact that their daughters are sexually active and want to avoid this awareness. For them an acknowledgement of their daughters' sexual status would be a threat to the trust that mothers have in their worth as a mother.

Acknowledgement also poses a threat to the trust that the mothers want to have in their daughters' innocence.

One mother knew that her daughters were previously sexually active, because the daughter fell pregnant and had a baby. However, even this mother wanted to believe that the daughter no longer engaged in sexual activity.

*“So veral as H so partykeer uitgaan, dan praat ek nou goed soos moenie dat die tweede een weer inkom nie of so iets, dan dink ek eers maar ek het dan ook nie vertrou in haar dan nou nie. Dan dink ek ook ek kan darem nie so my kind se vertrou ... sy het mos nou die eerste mistake gemaak ek glo darem nie sy sal die tweede mistake maak nie. Ek moet darem nou vir haar vertrou soos ek vir haar vertrou het eerste keer voor die baby.”*

Interviewee MN

One mother when confronted with the question of her knowledge of her daughter's sexual status was quiet for a long while. It seemed as if she was weighing evidence and referring to incidences in the past, but she too preferred not to acknowledge the truth. She too, did not want to believe or admit that her daughter might be sexually active.

*“ ... maar ek is nie ene ... ek wil nie sommer jump to conclusions nie, as 'n gedagte in my kop opkom nie...”*

Interviewee JG

It is evident that the mothers have an awareness that their daughters might be sexually active and even sexually experienced. However, an acknowledgement and an acceptance of the daughter's sexuality and sexual experience pose to great a risk for the trust that mothers want to have in their daughters. They want to accept as truth that their daughters are innocent and virgins. They want to believe that their daughters will not follow in their footsteps.

These mothers want to foster “openness” with and an “open” relationship with their daughters, but it is clear that they differ on an understanding of what it entails. These mothers feel that informing their daughters about the dangers of life and sex and telling them about their bodily functions are enough to instill the open relationship.

*“Ek praat baie met haar ... ek het my groot gehou en ... ene ... daai wat ek so openlik praat met hulle, ek sê vir hulle die dinge ... maar ek moet sê die ouer en kind verhouding is baie goed oor die algemeen ... ek kommunikeer baie met hulle.”*

Interviewee FC

*“As ek voel ek wil dit sê ... ek voel ek wil ‘n ding sê, dan sê ek. Ek hou nie goed terug nie. Ek praat met haar. As ‘n ding op my mind kom, dan sê ek dit ... maar sy kom nie vrae vra nie ... sy is nie vrymoedig om oop te wees nie en sy is nie openlik nie ... Sy is ‘n baie toe kind.”*

Interviewee FC

*“Ek het weer gesien ‘n mens moet openlik met jou kinders ... ek het vir my meisiekinders het ek al boekies gegee al toe hulle beginne tien word, dan gee ek vir hulle boekies waar hulle nou beginne wys hoe jou liggaam groei en later as jy nou beginne ouderdom bereik van elf, twaalf dan sien jy jou borste beginne vorm en jy begin haartjies hierso by die pubis kry en so aan.”*

Interviewee JG

*“... toe hulle begin menstrueer het, ... toe het ek ‘n boek gaan uithaal by die library en ek het hulle aldrie gevat en ek het met hulle gepraat. Sommer nou net so plat, plat weg wat ... en ... hulle vind dit nie moeilik om vir my ‘n ding te vra nie ... Toe sê ek vir hulle ... dit en dit gebeur as jy dit en daai doen ... En ek laat vir hulle boeke lees ... so hulle weet waar hulle met my staan ... En as hulle dinge doen ... dit was ook in my praatjie ... wat verkeerd is, dan outomaties, as jy reg is, moet jy maar gaan op voorbehoed, maar jy ken die consequences daarvan. Ek sal nie vir hulle aanraai om dit te doen nie, maar dit was ook ... dit was ook deel van die gesprek.”*

Interviewee ML

The mothers try to have open conversations with their daughters, especially on the topic of menstruation. They also prepare their daughters with books long before the daughters start their menarche.

*“Ek het weer gesien ‘n mens moet openlik met jou kinders ... ek het vir my meisiekinders, het ek al boekies gegee al toe hulle beginne tien word, dan gee ek vir hulle boekies...”*

Interviewee JG

Some of the mothers inform all their daughters when one of the daughters starts to menstruate.

*“... toe hulle begin menstrueer het, ... toe het ek ‘n boek gaan uithaal by die library en ek het hulle aldrie gevat en ek het met hulle gepraat. Sommer nou net so...”*

Interviewee ML

These mothers believe that conveying these types of information will enable them to have this open and sharing relationship with their daughters. However, it would appear as if only the opposite seems to be true. That in doing so, mothers actually shy their daughters away from trust and from sharing their inner most thoughts and feelings.

Mothers want to have an open relationship with their daughters, but they feel uncomfortable and sometimes even threatened when having to discuss their own sexuality. It was apparent that these mothers equated sexuality with the sexual act and as mentioned, they prefer to steer clear from topics that are often regarded as sensitive and intimate. This avoidance could possibly explain the sense of threat and subsequently the discomfort.

*“Ja ... hoe kan ek nou vir jou so stel ... ek en my man geniet dit ... ons geniet dit of so, as ons op so ‘n vlak is en so ... Ons maak tyd daarvoor en so. Ons is nou nie elke aand loop en ... jy weet ... maar ons maak tyd daarvoor. Soos ek sê ... daar moet respek in wees en so.”*

Interviewee MN

*“Wel ek moet nou nogal sê dat uh ... ‘n mens dink nou nogal nie aan sulke dinge nie ... ek wonder nogal nie oor dit nie ... maar ... die rede is seker maar omdat ‘n mens nie so ... ek is nou nie so grootgemaak nie, maar dit is nou nie sal ek sê ‘n straf soos baie mense en seker vrouens daaroor dink nie ... dit is ook maar iets wat ‘n mens aanleer soos wat die jare aanstap en uh ... so. Ek sien myself nie as ‘n begeerlike vrou nie, maar ek dink darem my man is tevrede met wat en hoe hy gekies het. Ek probeer net om ‘n goeie ... uh ... ma te wees en dan volg al die ander dinge maar ... Ja.”*

Interviewee ML

*“As jy nou nie getroud was nie, sal ek nou nie vir jou gesê het nie.”*

Interviewee LM

*“Soos ek nou self sê ... toe ek, hoe kan ek sê ... en in ons huwelik is God en so aan ... en soos ek aangaan het ek nie seks verwerp nie of wou dit nie toegelaat het nie, ... hoe kan ek sê, ... ek het dit aanvaar. Ja ek het dit aanvaar en uh ... dit is okay. Soos ek sê, dit is nou okay.”*

Interviewee DD

When the mothers were confronted with the question of whether they would be able to share their sexual experiences with their daughters, all were adamant that the daughters were much too young for such information. The possibility that they had to disclose such intimate detail about their sexuality to their daughters was potentially intimidating and the mothers' discomfort was obvious.

*“Oe ... Ek dink sy weet mos seker van my en haar pa. Hulle dink en wonder mos tog seker aan, sekere van die dinge. As sy vir my sal vra sal ek vir haar sê ... maar seker nie nou dat sy nog op skool is nie. Ek sal vir haar verduidelik hoe 'n man uh ... en, en 'n vrou met mekaar uh ... verkeer en, en, en dat hulle mekaar respekteer en dat daar liefde moet wees en so. En daar moet respek in wees ... nie sommer net so nie, verstaan. Maar ek sal nie vir haar sê op die ouderdom nie. Sy is nog te jonk vir dit.”*

Interviewee MN

*“Ek is nie ... ongemaklik om daaroor te praat nie en ... en soos ek ook reeds vir jou gesê het ... uh, uh met my kinders vertel ek wat die dinge is wat van hulle verwag word en so ... Van myself praat ek nie sommer so oor nie want dit is persoonlike dinge wat in die slaapkamer hoort en nie nie sommer uh ... bespreek word nie ... Omdat dit dinge is wat, wat hoort tussen twee mense wat getroud is en nie iets is wat, ... iets om, om ... oor en weer bespreek word nie...”*

Interviewee ML

*“Ek dink nogal nie ek sal dit kan doen nie, ... nie voor sy die dag trou nie. As sy op die drumpel staan van haar troudag dan sal dit vir my makliker wees om haar mee te deel en vir haar te vertel.”*

Interviewee LM

*“Kyk, vir my is seks 'n ding wat in die huwelik hoort. Ek het nou wel 'n kind gehad voor ek getrou het maar juis dit soek ek nie vir haar nie. Ek sal nie met haar kan praat oor sulke*

*dinge nie. Die dag as sy trou wil ek as ma trots wees. Ek wil haar nou reghelp... maar sy wil nie luister na wat vir haar gesê word nie.*”

Interview FC

*“Ek dink dat ek sal kan nie ... want, want ek voel net dat seks is ‘n bybelse instelling en my geloof ... hoe kan ek sê ... daar is te veel respek aan om dit sommer net so te vertel. Ek glo nie dat ek oor daai aspek met haar sal kan gesels nie. Nie dat ek sê ek sal nie probeer om haar reg te lei nie ... ek sal haar vertel wat reg is. Ek sal wil sien dat sy die regte ding doen, ... nie net omdat ek so dink as ‘n ma nie, maar ook omdat dit haar geloof is.”*

Interview DD

*“Man, ... laat ek dit so stel ... ek sal nie graag wil hê dat sy haar met sulke dinge moet ophou nie ... Goed en wel as sy nou die dag trou, ... Die dag as sy trou, ja, dan sal ek vir haar sê en vir haar raad gee, ... maar uhh ... maar nie nou nie. Sy is darem nog te jonk ... Ek sien dit nie as ‘n ding wat moet gebeur as jy nog op skool is nie en ook nie as jy nog nie getroud is nie.”*

Interview BD

It is apparent that although these mothers try to foster open communication between themselves and their daughters, their discomfort with the topic of sexuality keep them from honest discussions. One possible hindrance in the communication process could be that for these mothers, disclosure means that they will be revealing something about themselves that they would prefer not to do. This is ironic, since most of the daughters are well aware of the fact that the mothers had teenage pregnancies. However, the mothers could possibly feel that it will be discrediting to them to disclose their sexual experiences – past or present.

In this section it has been shown that mothers desperately want to trust that their daughters will not betray their upbringing. They want to believe that their daughters are still virgins and that they are not sexually active. Even though evidence might at times show the contrary, mothers do not want to admit to their daughters’ sexual status. These mothers try to cultivate a space where they and their daughters can share information openly. However, quite the opposite seems to be true. Although the mothers try very hard to be open, they are too uncomfortable to talk about sex and sexuality. It would appear that the mothers have difficulty expressing themselves and experienced great discomfort and uneasiness. It seems that mothers believe that it is easier to keep the current status quo going than to challenge and change it.

## 6.5 Mothers' limitations to act as guide and facilitator

These mothers try to be their daughters' sexual guide. They want to teach them about the pitfalls and the dangers of sex and sexual experimentation. They want to share with their daughters the information that they have at their disposal, but in so doing pass on to their daughters their limited sexual knowledge and their own limitations.

### 6.5.1 Doing as my mother did

It is evident that the mothers continue to look to the past for the information that they impart to their daughters. They seem to have negative memories of how their mothers restricted them sexually and how rules were enforced to keep them from sexual exploration. However, these mothers seem to do to their daughters exactly as their mothers did to them. They too enforce strict rules and hold their daughters to these rules. According to Browning Cole & Coultrap-McQuin (1992), rules and rights do play an important role in mothers' caring and mothers' primary responsibility is to care for their children. However, most of the mothers in the study, try to have a different relationship with their own daughter.

*"Daar was baie streng dinges ... voorwaardes, maar daar's nie vandag by ons nie, ons ken mos nie meer daai dinge nie ... hulle het baie meer vryheid, baie. Baie, baie, baie vryheid."*

Interviewee RA

*"Ek kan ook nie my kinders grootmaak soos my ma-hulle vir ons grootgemaak het nie, dan het ek my kinders verloor. Definitief. Dan het ek hulle verloor. Ons sou nie so 'n mooi verstandhouding gehad het soos ons nou het nie, want as my pa gesê het so, dan is dit so."*

Interviewee LM

*"Ek het weer gesien 'n mens moet openlik met jou kinders omdat my ma nie ope ... as sy openlik met my gewees het dan het ek miskien anderse ... dan was ek miskien meer wiser, ... Omdat my ma meer met my close ... toe gewees het soos 'n boek, meen ek dat ek openlik met my kinders praat ... Dat my kinders nie so dom gewees het soos ek nie."*

Interviewee JG

These mothers try to teach their daughters sound values and morals. This morality and morals are usually schooled on the mothers' own upbringing.

*"'n mens se opvoeding sal seker maar altyd by jou bly ... Ek stem saam met my ma ... ek probeer om vir hulle goeie waardes te leer ..."*

Interviewee SA

*" ... dit is iets wat ek van my jongsdae af oorge-erf het ... Ek dink baie dit het te doen met die opvoeding wat 'n mens gekry het en miskien ook die tyd waarin jy self 'n dogter was. Met my ma, dink ek dit was net hoe sy grootgeword het, ..."*

Interviewee LM

*"Is seker maar ... omdat haar ouers ook weer vir haar weer so grootgemaak het, sien. Nou het sy nou weer vir ons so grootgemaak, ... Is net soos vandag ook."*

Interviewee JG

According to De Waal (1993), the continuing mystery that surrounds issues of the body and sexuality and the concern about the physical aspect of sexuality, inevitably leads to ignorance about the emotional aspects of sexuality. Thus, mothers having been influenced and conditioned as daughters, teach this view they have of sexuality to their families and daughters. This is then continued from one generation to the next.

*"Ek sê waar vanaf die goeters kom, want my ma was baie openlik met my ... En ek dink ons as ouers moet openlik wees met ons kinders. Dit is die beste ... My ma ... sy was 'n harde mens gewees ... en sy was ook maar so grootgemaak ... Ek dink 'n mens moet met jou kind praat oor sulke dinge, maar ek voel dat 'n mens moet jou hand op jou kinders hou."*

Interviewee BD

*" ... 'n mens moet vir jou kinders die dinge voorhou ... Ek wil graag sien dat sy volg die voorbeeld wat vir haar in die huis gestel is en nie van die regte pad afdwaal nie, ... 'n mens se opvoeding sal seker maar altyd by jou bly. Seks ... of so ... was nie iets wat in die huis bespreek was nie en dit is seker ook maar so in my huis nou. Ek stem saam met my ma dat losgeit nie werk nie en dat saamslapery voor jy trou net nie werk nie."*

Interviewee SA

*“ Ek gee vir hulle dieselfde ... soos mamma maar vir ons grootgemaak het, probeer ek ook maar my kinders groot te maak ... Ek is nou nog oor my ma ... nou nog ... mamma kan maar vir my iets sê ... ek leer nog baie van mamma af en so aan. Ja ... ek wil ook hê my dogters moet soos ek wees. Ek weet dan so alles soos ons in die huis grootgeword het. Mens probeer mos maar vir hulle ook so groot te maak.”*

Interviewee MN

From the above quotations, it is clear that the mothers' own upbringing plays a major part in their childrearing practices. They continue to look back at what their mothers did and how it influenced and/or shaped their (the mothers') lives.

#### 6.5.2 Trying not to do as my mother did

In their raising of their daughters, mothers are often reminded of a time when they themselves were daughters. They seem to recall and remember extremely punitive mothers. It seem that these mothers have an awareness of something lacking in their upbringing. However, they appear to continue doing as they have been taught, or as they remember their own childhood and their upbringing. It seem that because of lack of a different method, they accept the old ways of doing things without challenging it or questioning its validity.

*“My ma was baie streng, was bitter streng gewees.”*

Interviewee RA

*“Ons het nou streng grootgeword ... Ons het lank gevat om te trou, want my ma was baie streng saam met ons ... ons kon baie dinge nie gedoen het nie. Ons mag nie die kant toe gegaan het nie, ons mag nie dit kant toe gegaan het nie ... en nie voor die tyd met outjies uitgegaan het nie, en alles daai.”*

Interviewee MN

*“ ... sommige tye dan dink 'n mens aan hoe 'n mens se ma was ... nou nie dat sy altyd reg was nie, maar sommige dinge was reg en 'n mens moet daarby hou.”*

Interviewee SA

*“My ma was ... sy was baie outyds ... seker geprobeer om soos haar ma nou te wees, baie outyds, en jy mag nie boeke gelees het nie, daai tyd soos die “Kyks” en so en daai goete ...*

*kyk as jy op skool is en mos nou hou by jou skooling, jy moenie boeke lees en sulke goed nie ... en as sy ons vang met die boeke en dan skeur sy die boeke op ...So sy was baie streng gewees met ons ...”*

Interviewee JG

These mothers have conformed to the belief that women have no agency, that women should be passive and that women should not question the norms that society set with regard to issues of sexuality. This belief is subsequently taught to their daughters – a teaching that at times seem to be conscious and at other times unconscious. These women unchallengingly accept the norms regarding sex and sexuality. Thus, these mothers believe that their daughters would not willingly engage in sexual activity, but that it would be an act of force if it ever would happen.

### 6.5.3 Ignorance

These mothers believe that their own “ignorance” saved them from pregnancy and kept them safe. To them their naivety acted as a protective shield.

*“... miskien was ‘n mens so bietjie dom toe jy trou, maar dit het voorsien dat ‘n mens nie ontydig sit met ‘n kindjie nie ... ‘n mens leer die kinders slim voor die tyd.”*

Interviewee SA

*“Ek was baie dom, en ek dink baie, uh ... uh ... my oorlede man ... hy het gesien ek is nie daai, ... daai wyse meisie nie en uh ... maar ek was nie hoe kan ek sê ‘n maklike target vir hom gewees nie.”*

Interviewee JG

For some however, ignorance was their downfall and let them into the trap of falling pregnant.

*“... my suster was op skool toe ontdek my ma dat sy swanger is ... en twee maande daarna toe kom ek ook aan ...my ma het dit so gevat, sy het nie geweet wat aangaan nie, want ek is ouer as sy en ek was aspris. Maar dit was nie aspris gewees nie, want ek het nie geweet nie.”*

Interviewee BD

*“Ek het nie geweet dat ek swanger was nie. Ek het gedink my maag. Dat daar iets fout was met my maag ... dat ek seker iets geëet het. As 'n mens seks het weet wat die ... ek dink nie ek het gebesef wat die gevolge is nie ... ek was op daai ouderdom baie dom gewees.”*

Interviewee FC

Biological instruction about sex has had a reasonably long history in parental instruction of their children (Fisher & Embree, 2000). It is about the only form of sexual instruction, which is thoroughly respectable. Beal (1994) state that the purpose of teaching this sort of thing to children is to make sex, in its purely physiological aspects, appear as natural and acceptable: to teach them “the facts of life”.

Parents are often uncomfortable talking about sex with their children and are not always sure when is the best time to discuss sex. In the current study it was evident that these mothers steered away from the emotional aspects of sex and sexuality and preferred to discuss the biological as well as the hygienic and physical aspects of sexuality and reproduction. It was almost as if these mothers were once again scared that they might teach their children about sex and steer them to experiment sexually.

As a result of the various strategies that these mothers employ, they are doing exactly as their mothers did. They resort to the age-old method of protection and give their daughters the same warnings as their mothers gave to them.

## 6.6 Summary

From the analysis it is apparent that women still uphold the belief that sexuality is an entity that should be feared. Without this panic and alarm, women will be sexually corrupted and violated. Thus, women as a group need to be constantly aware of this trepidation and protect themselves. The focus of mothers' discussions center on the dangers of sexuality and the problems that the conscious acceptance of sexuality will ultimately cause. The emphasis of sexuality continues to be the prevention of sexuality and the prominence of danger.

Mothers aspire to reduce the sexual dangers that their daughters face. They endeavor to safeguard their daughters by constantly subjecting them to messages of reprimanding and guilt and through constant scrutiny. Daughters are not allowed the freedom to explore their sexual curiosity and/or to discuss their sexual problems with their mothers, for fear of being seen as loose. These girls fear

that they will be chastised and that they will no longer be seen as the good and pure and virginal girls that their mothers want them to be. Thus girls remain sexually inept and without the necessary knowledge to equip them in the sexual arena.

Mothers, in their efforts to preserve their daughters innocence, are unwittingly endangering the girls. They are endangering their daughters by keeping them ignorant and shaming sexual experimentation and sexual curiosity. A restricted focus on the danger and perils of sexuality is extremely hazardous. It overshadows the other sexual experiences that women might have. The emphasis on danger situates women solely as victims and thus with no sexual agency. In the mothers' various attempts to protect, they are causing their daughters grave harm.

## **7. A GROUNDED THEORY**

### **7.1 Introduction**

When working according to the principles of grounded theory, the researcher aims to construct theory from the data received through the interaction with the research participants. It means that grounded theorists do not begin with preconceived hypotheses or structure their data collection and analysis on pre-existing theories. Grounded theorists aim to allow theoretical categories and constructions to emerge from the data (Charmaz, 1990). The data is not used to prove or disprove preconceived theories for the researcher. Instead, the data is used to increase and deepen the understanding of the subject, concept or issue being researched. In this way the theory that emerges is rich, thorough and comprehensive.

In the previous section it was shown that mothers want to protect their daughters. They only want the best for their daughters and want to keep them from harms way. To achieve this, mothers employ various strategies and mechanisms. They enforce strict rules and regulations to keep daughters from sexual experimentation and they instill the fear that "sex is bad" and that "virginity and education are the only keys to successful womanhood". However, it has also been shown that mothers are not good facilitators when it comes to their daughters' sexual education. Mothers themselves look to the past for direction and impart to their daughters their own limited sexual knowledge. In the process of referring to the past for guidance, mothers pass on their own sexual limitations to their daughters because of their lack of a different method.

In the current study sexuality was portrayed as an entity that should be controlled. Mothers were seen to enforce this control in an attempt to protect their daughter's innocence. However, it became evident that in so doing, mothers kept their daughters ignorant, sexually uninformed and sexually naive. Equating sexuality with only negativity and with danger has been evident in the narratives of all the mothers. A central theme that emerged from the analysis was the theme of "protection that can potentially harm". It encapsulates what became apparent in the narratives of all the mothers. It also appeared as if the mothers denied the positive attributes of their own as well as their daughters' sexuality.

Lesch (2000) investigated the sexuality of teenage girls from a "coloured" community and found that adolescent girls are indeed sexually active from a very early age. As mentioned previously, the participants of the current study were the mothers of the adolescent girls that participated in the study by Lesch. It was shown that these girls do not consult their mothers on matters of sex and sexuality. Furthermore the study showed that these girls do not always make use of contraceptives when engaging in sexual endeavors. This creates serious questions about the influence of mothers in their daughters' sexual safety.

According to Gorna, (1996) the area which is most available to feminist thinking and which receives increasing attention from feminist writing is the domain of sexual danger. Extraordinary levels of sexual violence and terror restrict the opportunities women have to protect their health and safety throughout the world. In the current study it is apparent that mothers in their inability to talk to their daughters do pose a threat to their daughters' sexual health and safety.

In this section I will attempt to explore the theme of "danger in protection", by referring to relevant literature pertaining to the subject of sexual danger. I will do so by exploring various sub-categories that I hope will inform this main category.

#### 7.1.1 Learning about sexuality

During their developing years children are socialized by their parents and mothers in ways that are characteristic of and for each culture. Parents also socialize their children in very specific ways with regard to issues of sexuality (Calderone, 1992). As it has been stated in contrast to the sexual danger that equates violence, rape, assault, STD's and AIDS, mothers also pose a sexual danger to their daughters. The mothers in the current study, socialize their daughters to believe that sexuality is a

topic not to be discussed openly, that premarital sexual activity is condemned and that a girl should preserve her virginity if she wants achieve in life.

It is believed that mothers endanger their daughters through sexual prohibition, through constrictions and by perceiving sexual activity as taboo. According to Vance (1992), because parents have such a big influence on their children, they are able to discriminate between what they tell their children about sexuality and what they prefer to keep quiet about. Parents and especially mothers thus decide between what they think is fundamental for the children to know about sexuality and what might be more a matter of appropriateness – such as what the appropriate sexual behavior should be. Once again this was the case in the current study. Mothers preferred to tell their daughters how they should behave sexually, while not discussing intimate sexual topics. Calderone, (1992) argued that this discriminating between information, can lead to children making often-dangerous attempts to learn about sexuality and to deal with the experience of their awakening sexuality. All the participants articulated how they experimented with sexuality with sometimes serious consequences.

#### 7.1.2 Shame and guilt of sexuality

It is noted that children are completely aware of and enjoy their sexual functioning much earlier than parents are comfortable with (Calderone, 1992). This is also evident in the South African study with female “coloured” adolescents (Lesch, 2000). Girls are sexually active much earlier than their mothers are aware of or want to admit. Mothers might have an awareness of their daughters’ sexual statuses but it seems that they prefer not to acknowledge the fact. It is acknowledged that to deny the sexuality of children places them in a precarious position of intensely experiencing something that their own parents deny or worse, punish.

Sex is presented as a crime to children. The present study showed that mothers inform their daughters that “sex is bad” and they also try to instill in their daughters a fear of sexuality. According to Millet (1992) this is how parents control their children and how they forbid them their sexuality. The mothers in the current study, constantly proscribe sexuality and they forbid and police their daughters to be sure that they will not engage in sexual activity. However, despite the sexual prohibition by mothers, their teenage girls do engage in sexual activity – albeit in private and without the necessary sexual and contraceptive information (Lesch, 2000). It is argued that this control of sexuality leads to shame, being shamed as well as shaming (Millet, 1992). The control works in stopping the “unwanted” behavior and where it does not work, it still succeeds because of

the guilt and shame that the girls experience when sexual activity does take place. Evident in the participants' discussions is that they experienced a fair amount of shame and guilt when experimenting sexually. This shame and guilt emerged in response to the constant messages such as "sex is bad" that they received from their mothers. These mothers unwittingly instill these fears in their own daughters. Daughters are taught that sex is shameful and that if one engages in sex, you should feel guilty. It would appear as if it is a device unquestioningly accepted by the mothers as a means to protect, and is employed to steer their daughters from venturing into the sexual arena.

Millet (1992) believes that mothers have been all too effective in poisoning sexuality and in preventing their daughters from understanding or experiencing their sexuality. Furthermore, it is believed that the policing of adolescent females is one oppressive system that needs to be investigated. Women in general are being controlled and teenage daughters specifically are controlled by their mothers.

### 7.1.3 The predicament of non-contraceptive use

Although the teenage pregnancy rate is alarming, (Kann et al., 1995; Lagana, 1999; LoveLife, 2001), sexual prohibition is still very popular with mothers (Vance, 1992). Since talking about sexuality is a forbidden topic, it is only natural to assume that talk about contraceptives and the use of it also become forbidden. Most of the mothers preferred not to discuss the issue of contraceptives with their daughters. The fact that daughters realize that the use of contraceptives is not condoned by their mothers has been confirmed in the study on the sexuality of South-African "coloured" teenage daughters (Lesch, 2000). Mothers thus expose their daughters to the risk of falling pregnant or contracting sexually transmitted diseases and HIV- infection.

Millet (1992) argued that teenagers who fall pregnant have seized their sexuality irrespective of the prohibition and although they have been forbidden it. They were also forbidden to prevent pregnancy with contraceptives and thus are burdened with a child that they did not prepare for and mostly did not want. In addition, these teenagers are punished for the fact that they are pregnant. It is believed that this predicament leads to further confusion, fear and hatred of sex (Calderone, 1992; Millet, 1992; Vance, 1992). It reinforces the interpretation that mothers are actually harming their daughters in their attempts to protect them. These daughters learn only about the negative aspects of sex without being taught about the many positive attributes of sex and sexuality. Mothers should open up the avenues for open and empathic conversation about contraceptives and sexuality.

#### 7.1.4 “Better safe than sorry” – Policing sexuality

As a result of the taboo of discussing sexuality, the prohibition of sexuality and contraceptives, and the punishment of sexual activity and pregnancy, ignorance develops. According to Millet (1992, p. 220) “adults create this pool of ignorance”. The mothers of the current study believe that they are fostering innocence in their daughters while they were actually assisting in their daughters’ ignorance. Adolescent daughters are thus, not just ignorant but also inexperienced, uninformed and naive with regard to their sexuality and their sexual rights.

Discussing the dangers in sexuality is important for mothers, but it can impede their daughters’ ability to take control in sexual situations (Gorna, 1996). It cannot be emphasized more that by reducing sexuality to only the danger that it poses for women, mothers are in fact creating danger and simultaneously exposing their daughters to more danger. This portrays the daughters solely as victims and does not empower them sexually (Vance, 1992). Furthermore, it creates questions about adolescent females’ sexual agency and their mothers’ impact on and involvement with that agency.

“Better safe than sorry” is still a prevailing warning echoed by mothers. “Women – socialized by mothers to keep their dresses down, their pants up, and their bodies away from strangers – come to experience their own sexual impulses as dangerous, causing them to venture outside the protected sphere.” (Vance, 1992; p. 4). Mothers need to realize the danger in constriction, prohibition and prescription to ensure that their daughters do not become sexual victims. Daughters should be encouraged to talk about their sexual feelings and concerns in an attempt to become sexually confident.

Sex poses various dangers in a women’s life: sex outside of marriage has the potential loss of respectability; the fear of physical violence, such as rape; fear of being infected with a sexually transmitted disease; and the danger of unwanted conception. This is a fact continuously stressed by the mothers in trying to keep their daughters from experimenting sexually. Vance (1992) argued that the struggle for acknowledgement for one’s sexuality is legitimate and need not imply a callous disregard of sexual danger. However, mothers are the agents that need to give legitimacy to their own and their daughters’ sexuality.

### 7.1.5 The need for both connection and separateness

During their formative years, teenage girls are not only socialized to behave in sexually specific and appropriate ways, but they are also faced with certain ambiguities (Balk, 1995). They are confronted with the ambiguous and confusing need for autonomy, while they still want to remain close to the authority figures - mostly the mothers - in their lives. They are drawn towards a sense of being separate and unique while at the same time experiencing a need for connection with their family and mothers. This was a theme clearly visible in the narratives of the participants in the current study.

Through the conventions and prohibitions facing them, girls begin to separate and detach themselves from their mothers. They become aware that certain sexual behaviors and beliefs have no legality and value with their mothers. This awareness causes them to distance and separate from their mothers. Through the girls' longing for a sense of autonomy they come to realize that they will not be afforded real independence by their mothers.

On the other hand it is also noted that women fear that sexual empowerment and sexual self-definition would involve a betrayal of their mothers (Echols, 1992). Daughters come to believe that it is better for them to embrace the mother's putative or assumed sexual values than to acknowledge her own sexuality. It is clear that daughters would rather deny their sexual exploration and acknowledgement of their sexuality. Daughters rather choose to deceive their mothers than to face being disloyal to the mother's upbringing and the values that they were taught. In doing so daughters fear that they will lose the connection and tie that they have with their mothers. The mothers in the current study also expressed how they too rather deceived their mothers for fear of disappointing them and losing their mothers' love. The same is true for their daughters (Lesch, 2000). The daughters in the study by Lesch never told their mothers about their sexual experimentation. It is evident that daughters would go to great lengths to remain close and connected to their mothers.

Women's sexuality and sexual feelings are hidden from themselves as it is hidden from those who disallow and forbid them. However, it is argued that sexuality "is a force that insists on finding a way to break through despite all the inner repression that results from outer oppression." (Murphy Robinson, 1992: p. 253). The outcome could be detrimental – with the possibility of unwanted conception, as is clear in the case of almost all the mothers interviewed and some of their daughters. They too were faced with unwanted pregnancies, leaving school and raising the child. In contrast to

the need for connection this portrays the need of daughters to be autonomous and to make their own decisions, despite the ramifications.

Young women frequently find that their struggle to break away from the pattern of their mothers' lives, tangle them ever more deeply in a mesh of invisible threads (Gorna, 1996). Daughters who have grown up, married, and become mothers in turn, may still be haunted by the nagging and pesky voices of their mothers telling them how to behave sexually, and setting standards of sexual behavior and perfection. This has been shown in the current study, where the mothers could still remember how they were told to behave and how to be a "good girl". It has been shown that what makes the situation even worse is if the maternal voice has been internalized by the daughter and subsequently carried over to the granddaughter. Evident in the current study was the phenomenon that the mothers do as their mothers did and pass on to their daughters the sexual standards and norms of the culture. The mothers turn to the past for guidance and impart to their daughters the old and accepted constructions of sexuality. Through the acceptance of these norms daughters once again show their search and their need for connection.

## 7.2 Conclusion

"Sexuality is simultaneously a domain of restriction, repression, and danger as well as a domain of exploration, pleasure and agency." (Vance, 1992; p. 1). However, it is clear that the participants in the current study focused on the dangers of sexuality. I, as so many others (Calderone, 1992; Gorna, 1996; Vance, 1992), argue that perhaps the foci of sexuality education should also include the pleasure, the beauty and the power of one's sexuality and not just the policing of sexual experimentation. There should be a greater emphasis on the positive components of sexuality, with mothers equating as much talk and discussion to intimacy, sensuality and excitement as they do against danger.

Hiding the positive possibilities of sexuality does not make the world safe for women (Vance, 1992). As mentioned earlier, the overemphasis on danger in the mothers' reprimanding, means that talking about sexuality becomes almost taboo. This means that sexuality has no public space but an ever-growing private space where daughters do not disclose their sexual thoughts and/or concerns. Thus, daughters are not empowered in their sexuality, but they are denied the opportunity to be confident and active in their journey of sexual exploration.

Mothers are unequipped to act as facilitators in their daughters' sexual education. This causes confusion, conflict and more restrictions. A possible way of rectifying this hostility is in creating a space where mothers and daughters can openly discuss issues of sexuality without fear of being evaluated and judged according to the standards that mothers deem to be appropriate. Vance (1992) believes that there is a danger in prescription because it offers no safe place for women to express and experience their bodies and their sexuality. Women should be allowed a safe space where no woman is required to choose between the acknowledgement and exploration of her sexuality and the fear of being judged.

## 8. SUMMARY AND RECOMMENDATIONS

It has become evident from the literature (Rider, 2000; Dominelli & Mcleod, 1990) that women:

1. need to take more responsibility for their own sexuality than ever before,
2. need to become more agentic and less reactive or passive in sexual situations,
3. should redefine their responsibilities to include contraception and knowledge about their own sexual preference, and
4. need to be responsible for protecting themselves against bad sexual and human experiences, exploitation and dangers.

Ellison (2000) believes that the central focus of women's sexual and psychological development need to be redefined towards having an importance and capacity for self-fulfillment in its own right. It should become apparent that women's sexual and emotional development is far from being subordinate to that of others and that it has a rightful place of its own. Murphy Robinson (1992) argues that work needs to be done to elucidate how girls are brought up to accept the role of subordinate carers. In such accounts a central argument is that mothers' part in this process is highly influential and that it is important that women should both resist and counter what is going on.

According to Rider (2000), parents significantly influence their children's knowledge and feelings about sexuality. Parents and mothers especially are the sexuality educators of their children, whether they do it well or whether it is done badly. They should be given the skills to teach and educate their children and especially girls about sex and their own sexuality. Bryson (1999) believes that it is possible for women to teach their daughters about sexuality through sharing with therapists and other women their actual experience of parental love, the feelings they have toward themselves, and the reality of their experiences of central adult relationships.

Sexual discussions between mother and daughter should progress developmentally. Current research suggests that discussions about sexuality should be part of the developmental process, in which topics are introduced based upon the age of the child (Simanski, 1998). The benefits of ongoing, in-depth discussions between mothers and their adolescent daughters regarding sexuality are apparent. First, adolescents become more aware of the steps they must take to prevent sexually transmitted diseases and pregnancy. Furthermore, adolescents' well being may be enhanced if they feel more comfortable with their own sexuality. The family may also benefit from open communication, adjusting more successfully to the adolescent's developing sexuality. Education by parents could be the key to help adolescents make smarter decisions regarding their reproductive health.

## 9. REFERENCES

- Aggleton, P. (1995). Young people and AIDS. AIDS Care, 7, 77-80.
- Allgeier, E. R., & Allgeier, A. R. (1991). Sexual Interactions. Lexington: Heath and Company.
- Andre, E., Frevert, R., & Schuchmann, D. (1989). From who have college students learned what about sex? Adolescence, 20, 3, 241-268.
- Apter, T. (1990). Altered loves: Mothers and daughters during adolescence. New York: St. Martin's Press.
- Arnold, E. M., Smith, T. E., Harrison, D. F., & Springer, D. W. (2000). Adolescents' Knowledge And Beliefs About Pregnancy: The Impact Of "ENABL". Adolescence, 35,139, 485-498.
- Balk, D. E. (1995). Adolescent Development: Early Through Late Adolescence. London: Brooks/Cole Publishing Company.
- Bartky, S. L. (1990). Femininity and domination. London: Routledge.
- Beal, C. R. (1994). Boys And Girls: The Development of Gender Roles. New York: McGraw-Hill, Inc..
- Bortolaia Silva, E. (Ed.), (1996). Good Enough Mothering?: Feminist Perspectives on Lone Motherhood. London: Routledge.
- Bremridge, C. (2000). Constructions of Male Adolescent Sexuality: An Exploratory Study in a Coloured, Rural Community. University of Stellenbosch.
- Brock, L., & Jennings, G. (1993). Sexuality education: What daughters in their 30's wish their mothers had told them. Family Relations, 42, 61-65.

Brooks-Gunn, J., & Ruble, D. N. (1983). Dysmenorrhea in adolescence. In S. Golub (Ed.), Menarche. Lexington: Lexington Books.

Bruinsma, G., & Zwanenburg, N. (1992). Methodology for management specialists: Trends and Methods. Muiderberg. Dick Coutinho.

Bryson, V. (1999). Feminist Debates: Issues Of History And Political Practice. London: Macmillan Press Ltd..

Burr, V. (1995). An Introduction to Social Constructionism. London: Routledge.

Calderone, M. S. (1992). Above and Beyond Politics: The Sexual Socialization of Children. In C. S. Vance (Ed.), Pleasure And Danger: Exploring Female Sexuality (pp. 131-137). London: Pandora Press.

Campbell, C. (1990). Women and AIDS. Social Science and Medicine, 30, 407-415.

Carpenter, C., Mayer, K., Stein, M., Leibman, B., Fisher, A., & Fiore, T. (1991). Human Immunodeficiency Virus infection in North American women: Experience with 200 cases and a review of the literature. Medicine, 70, 307-325.

Centers For Disease Control. (1997). Patterns of condom use among adolescents: The impact of mother-adolescent communication. In Chapin, J. R. (2000). Adolescent Sex And Mass Media: A Developmental Approach. Adolescence, 35, 140, 799- 811.

Centers For Disease Control. (2000). AIDS prevention fact sheet. In Chapin, J. R. (2000). Adolescent Sex And Mass Media: A Developmental Approach. Adolescence, 35, 140, 799- 811.

Chilman, C. (1990). Promoting healthy adolescent sexuality. Family Relations, 39, 123-131.

Chapin, J. R. (2000). Adolescent Sex And Mass Media: A Developmental Approach. Adolescence, 35, 140, 799- 811.

Charmaz, K. (1990). "Discovering" Chronic Illness: Using Grounded Theory. Social Science Medicine, 30, 1161-1172.

Chin, J. (1990). Current and future dimensions of the HIV/AIDS pandemic in women and children. The Lancet, 336, 221-224.

Chodorow, N. J. (1990). Feminism and Psychoanalytic Theory. New Haven: Yale University Press.

Conway-Turner, K. (1992). Sex, intimacy and self-esteem: The case of the African-American older woman. Journal of Women and Aging, 4, 91-104.

Cotton-Huston, A. L., & Johnson, D. V. (1998). Brief Report: Daughters and Mothers: Age Differences in Relationship Descriptions and Communicative Desires. Journal of Adult Development, 5, 117-123.

Crockett, L. J., Bingham, C. R., Chopak, J. S., & Vicary, J. R. (1996). Timing of first sexual intercourse: The role of social control, social learning, and problem behavior. Journal of Youth and Adolescence, 25(1), 89-112.

Daniluk, J. C. (1992). The Meaning and Experience of Female Sexuality: A Phenomenological Analysis. Psychology of Women Quarterly, 53-69.

Darling, C., & Hicks, M. (1982). Parental influence on adolescent sexuality: Implications for parents as educators. Journal of Youth and Adolescence, 11(3), 231-245.

DeLamater, J., & Hyde, J. S. (1998). Essentialism vs Social Constructionism in the Study of Human Sexuality. Journal of Sex Research, 35, 10-18.

Demographic and Health Survey. (1998). In LoveLife. Impending Catastrophe Revisited: an update on the HIV/AIDS epidemic in South Africa. Cape Town: Abt Associates Inc..

Department of Health. (1998). South African Demographic and Health Survey.

Department of Health. (2000). National Sero-Prevalence of Women Attending Public Antenatal Clinics in South Africa.

Department of Health. (2000). The Provincial and District HIV Antenatal Survey Report.

De Waal, M. (1993). Teenage daughters on their mothers. In J. van Mens-Verhulst, K. Schreurs, & L. Woertman (Eds.), Daughtering & Mothering: Female Subjectivity Reanalyzed (pp. 35-43). London: Routledge.

Department of National Health and Population Development (1998). AIDS in South Africa since 1982- as on 19 February, 1995. Epidemiological Comments, 20, 23.

Dominelli, L., & Mcleod, E. (1990). Feminist Social Work. London: The Macmillan Press Ltd.

Doyle, P. (1993). Editorial: adult HIV prevalence for males and females. AIDS Scan, 5, 3-4.

Dyk, P. H., Cristopherson, C. R., & Miller, B. C. (1991). Adolescent sexuality. In S. J. Bahr (Ed.), Family Research: A sixty year review, 1930-1990. New York: Lexington Books.

Echols. A. (1992). The Taming of the Id: Feminist Sexual Politics, 1968-83. In C. S. Vance. (Ed.), Pleasure And Danger: Exploring Female Sexuality (pp. 50-72). London: Pandora Press.

Ellison, C. R. (2000). Women's Sexualities: Generations of Women Share Intimate Secrets of Sexual Self-Acceptance. Oakland: New Harbinger Publications, Inc.

Espin, O. M. (1996). 'Race', racism and sexuality in the life narratives of immigrant women. In S. Wilkinson (Ed.), Feminist Social Psychologies: International Perspectives. Buckingham: Open University Press.

Field, T., Lang, C., & Bendell, D. (1995). Adolescents' intimacy with parents and friends. Adolescence, 30, 133-140.

Finchilescu, G. (1995). Setting the frame: gender and psychology. South African Journal of Psychology, 25,(3), 133-138.

Fisher, T. D. (1987). Family relationships and parent discussion about sex. In Lagana, L. (1999). Psychosocial correlates of contraceptive practices during late adolescence. Adolescence, 34, 135, 463-482.

Fisher, L., & Embree, L. (Eds.), (2000). Feminist Phenomenology: Contributions To Phenomenology. The Netherlands: Kluwer Academic Publishers.

Fisher, A. J., Ziervogel, C.F., Charlton, D. O., Leger, P. H., & Robertson, B. A. (1993). Risk-taking behavior of Cape Peninsula high-school students: Part VIII – Sexual behavior. South African Medical Journal, 83(3), 495-497.

Flaake, K. (1993). Sexual development and the female body in the mother-daughter relationship. In J. van Mens-Verhulst, K. Schreurs, & L. Woertman (Eds.), Daughtering & Mothering: Female Subjectivity Reanalysed (pp. 7-14). London: Routledge.

Foucault, M. (1981). The History of sexuality. Harmondsworth: Penguin Books

Furman, W., Brown, B. B., & Feiring, C. (Eds.), (1999). The Development of Romantic Relationships in Adolescence. Cambridge: Cambridge University Press.

Furstenberg, F. F., Brooks-Gunn, J., & Morgan, S. P. (1990). Adolescent Mothers in later life: Human Development in Cultural and Historical Contexts. Cambridge: Cambridge University Press.

Garrett, S. C., & Tidwell, R. (1999). Differences Between Adolescent Mothers And Nonmothers: An Interview Study. Adolescence, 34, 133, 91-105.

Gergen, K. J. (1985). The social constructionist movement in modern psychology. American Psychologist, 40, 266-275.

Gergen, J. K. (1990). Everyday Understanding: Social and Scientific Implications. London: Sage Publications Ltd.

Glenn, E. N., Chang, G., & Forcey, L. R. (Eds.), (1994). Mothering: Ideology, Experience and Agency. London: Routledge.

Goosen, M., & Klugman, B. (Eds.), (1996). The South African Women's Health Book. Cape Town: Oxford University Press.

Gordon, S. (1982). Sexuality education in the 80's – No more retreats. Journal of Sex Education and Therapy, 8(2), 6-8.

Gorna, R. (1996). Vamps, Virgins And Victims: How Can Women Fight AIDS? London: Cassell.

Griffen, C. (1986). Qualitative methods and female experience: young women from school to the job market. In S. Wilman (Ed.), Feminist Social Psychology (pp 173-191), Milton Keynes: Open University Press.

Hammer, S. (1976). Daughters and Mothers: Mothers and Daughters. London: Hutchinson & Co, Ltd.

Holtzman, D., & Robinson, R. (1995). Parent and peer communication effects on AIDS-related behavior among U. S. high school students. Family Planning Perspectives, 27, 235-240.

Hunter College Women's Studies Collective. (1995). Women's Realities, Women's Choices: An Introduction To Women's Studies. New York: Oxford University Press.

Hurlbert, D. F., Apt, C., & Rabehl, S. M. (1993). Key variables in understanding female sexual satisfaction: An examination of women in nondistressed marriages. Journal of Sex and Marital Therapy, 19, 154-165.

Jaffe, M. L., (1998). Adolescence. New York: John Wiley & Sons, Inc..

Kann, L., Warren, C. W., Harris, W. A., Collins, J. L., Douglas, K. A., Collins, M. E., Williams, B. I., Ross, J. G., & Kolbe, L. J. (1995). Youth risk behavior surveillance – United States, 1993. Child Development, 67, 344-369.

Kelly, K. (1983). Adolescent sexuality: The first lessons. In D. Byrne & W. A. Fisher (Eds.). Adolescents, sex, and contraceptives. New Jersey: Erlbaum.

Koff, E., & Rierdan, J. (1995). Preparing girls for menstruation: Recommendations from adolescent girls. Adolescence, 30, 795-811.

Kowalski, R. M., & Chapple, T. (2000). The Social Stigma Of Menstruation: Fact Or Fiction. Psychology of Women Quarterly, 24, 74-80.

Lagana, L. (1999). Psychosocial correlates of contraceptive practices during late adolescence. Adolescence, 34, 135, 463-482.

Lancaster, R. N., & Di Leonardo, M. (1997). The Gender Sexuality Reader: Culture, History, Political Economy. New York: Routledge.

La Sorsa, V. A., & Fodor, I. G. (1990). Adolescent daughter/midlife mother dyad: A new look at separation and self-definition. Psychology of Women Quarterly, 14, 593-606.

Lees, S. (1994). Talking about sex in sex education. Gender and Education, 6, 3, 281-292.

Lefkowitz, E. S., Kahlbaugh, P. E., & Sigman, M. D. (1996). Turn-taking in mother-adolescent conversations about sexuality and conflict. Journal of Youth and Adolescence, 25(3), 307-322.

Lesch, E. (2000). Female Adolescent Sexuality in a Coloured Community. Unpublished doctoral dissertation, University of Stellenbosch.

Lethbridge, D. J. (1990). Use of contraceptives by women of upper socioeconomic status. Health Care for Women International, 11(3), 305-318.

Lewis, H. B., & Herman, J. L. (1986). Anger in the mother-daughter relationship. In T. Bernay and D. W. Cantor (Eds.), The psychology of today's woman: New Psychoanalytic visions. New Jersey: Erlbaum.

Lips, H, M. (1999). A New Psychology of Women: Gender, Culture and Ethnicity. Mountain View, California: Mayfield Publishing Company.

Locke. L. (2001). Grounded Theory in Management Research. London: Sage Publications.

Lorber, J. (1997). Gender and the Social Construction of Illness. London: Sage Publications.

LoveLife. Impending Catastrophe Revisited: an update on the HIV/AIDS epidemic in South Africa. Cape Town: Abt Associates Inc..

Macleod, C. (1999). Teenage pregnancy and its “negative” consequences: Review of South African research – Part I. South African Journal of Psychology, 29(1), 1-7.

Mayekiso, T. V. (1994). Attitudes of students at the University of Transkei towards premarital sex. South African Journal of Psychology, 24(4), 216-218.

Mayekiso, T. V., & Twaise, N. (1993). Assessment of parental involvement in imparting sexual knowledge to adolescents. South African Journal of Psychology, 23(1), 21-23.

Mazzarella, S. R., & Odom Pecora N. (Eds.), (1999). Growing Up Girls: Popular Culture and the Construction of Identity. New York: Peter Lang Publishing.

Miller, K. S., Forehand, R., & Kotchick, B. A. (2000). Adolescent Sexual Behavior In Two Ethnic Minority Groups: A Multisystem Perspective. Adolescence, 35, 138, 313-333.

Millet, K. (1992). Beyond Politics? Children and Sexuality. In C. Vance (Ed.), Pleasure and Danger: Exploring Female Sexuality (pp. 217-224). London: Pandora Press.

Mohanty, C. T. (1992). Feminist encounters: locating the politics of experience. In M. Barrett & A. Phillips (Eds.), Destabilizing theory (pp. 74-92), Cambridge: Polity Press.

Montemayor, R., Adams, G. R., & Gullotta, T. P. (Eds.), (1990). From Childhood to Adolescence: A Transitional Period? Newbury Park, California: SAGE Publications, Ltd..

Mouton, J., & Marais, H. (1990). Basic Concepts in the methodology of the Social Sciences. Pretoria: HSRC.

Mueller, K. & Powers, W. (1990). Parent-child sexual discussion: Perceived communicator style and subsequent behavior. Adolescence, 25,(98), 469-482.

Murphy Robinson, P. (1992). The Historical Repression of Women's Sexuality. In C. Vance (Ed.), Pleasure and Danger: Exploring Female Sexuality (pp. 251-266). London: Pandora Press.

Nielsen, L. (1996). Adolescence: A Contemporary View. Fort Worth: Harcourt Brace College Publishers.

O'Barr, J. F., Pope, D., & Wyer, M. (Eds.), (1990). Ties that Bind: Essays on Mothering and Patriarchy. Chicago: The University of Chicago Press.

Ortner, S. B., & Whitehead, H. (Eds.). (1990). Sexual Meanings: The Cultural Construction Of Gender And Sexuality. Cambridge: Cambridge University Press.

Panos (1990). Triple Jeopardy: Women and AIDS. London: Panos Publications.

Patton, D., & Waring, E. M. (1985). Sex and marital intimacy. Journal of Sex and Marital Therapy, 11, 176-184.

Pauw, I. (1994). Let's talk about sex workers, baby. Die Suid-Afrikaan, 44-47.

Phillips, S. (1991). Beyond the Myths: Mother-Daughter Relationships in Psychology, History, Literature and Everyday Life. Australia: Hampton Press.

Prendergast, S. (2000). 'To Become Dizzy in Our Turning': Girls, Body-Maps and Gender as Childhood Ends. In A Prout (Ed.). The Body, Childhood And Society. Houndmills, Great Britain: Macmillan Press Ltd.

Prout, A. (Ed.), (2000). The Body, Childhood And Society. Houndmills, Great Britain: Macmillan Press Ltd.

Quinones, B., Phares, V., Bryant, V. B., & Stenmark, D. (1999). Beliefs and Attitudes about Sexual Aggression: Do Parents and Daughters share the same belief system? Psychology of Women Quarterly, 23, 559-572.

Reinisch, J. M. (1990). The Kinsey Institute new report on sex. New York: St. Martin's Press.

Rider, E. (2000). Our Voices: Psychology of Women. Belmont, United States: Wadsworth, Thomson Learning.

Ruddick, S. (1990). Maternal Thinking: Towards a Politics of Peace. London: The Women's Press.

Sayers, J. (1998). Boy Crazy: Remembering adolescence, therapies and dreams. London: Routledge.

Schmauch, U. (1987). Anatomie und Schicksal. Zur Psychoanalyse der fruhen Geschlechtersozialisation. In J. van Mens-Verhulst, K. Schreurs, & L. Woertman.(Eds.), Daughtering & Mothering: Female Subjectivity Reanalyzed. Cambridge: Cambridge University Press.

Schoepf, B. (1990). Women, AIDS and Economic Crisis in Central Africa. Canadian Journal of African Studies, 22(3), 625-644.

Schreurs, K. (1993). Daughtering: The development of female subjectivity. In J. van Mens-Verhulst, K. Schreurs, & L. Woertman.(Eds.), Daughtering & Mothering: Female Subjectivity Reanalyzed (pp. 1-6). Cambridge: Cambridge University Press.

Scott, J. (1993). African-American mothers-daughter relationships and teenage pregnancy. In Garrett, S. C., & Tidwell, R. (1999). Differences Between Adolescent Mothers And Nonmothers: An Interview Study. Adolescence, 34, 133, 91-105.

Sherman, B., & Donovan, B. (1991). Relationship of perceived maternal acceptance-rejection in childhood and social support networks of pregnant adolescents. In Garrett, S. C., & Tidwell, R. (1999). Differences Between Adolescent Mothers And Nonmothers: An Interview Study. Adolescence, 34, 133, 91-105.

Simanski, J. W. (1998). The Birds And The Bees: An Analysis Of Advice Given To Parents Through The Popular Press. Adolescence, 33, 129, 33-45.

Stanton, P. D., Black, M., Kaljee, L., & Ricardo, I. (1993). Perceptions of sexual behavior among urban early adolescents: Translating theory through focus groups. Adolescence, 13(1), 44-66.

Steinberg, L. (1993). Adolescence. New York: McGraw-Hill.

Steinberg, L., & Steinberg, W. (1994). Crossing paths: How your child's adolescence triggers your own crisis. New York: Simon & Schuster.

Strebel, A. (1996). Whose epidemic is it? Reviewing the literature on women and AIDS. South African Journal of Psychology, 25, 12-20.

Tiefer, L. (1991). Historical, scientific, clinical and feminist criticisms of "The Human Sexual Response Cycle" model. Annual Review of Sex Research, 2, 1-24.

Tiefer, L. (1995). Sex is not a Natural Act and other Essays. Colorado: Westview Press Inc.

Tolman, D. L., & Porche, M. V. (2000). The Adolescent Femininity Ideology Scale: Development and Validation of a New Measure for Girls. Psychology of Women Quarterly, 24, 365-376.

Tucker, S. K. (1989). Adolescent patterns of communication about sexually related topics. Adolescence, 24, 94, 269-278.

Unger, R., & Crawford, M. (1996). Women and gender: A feminist psychology (2<sup>nd</sup> ed.). New York: McGraw-Hill.

Vance, C. S. (Ed.). (1992). Pleasure And Danger: Exploring Female Sexuality. London: Pandora Press.

Waldeck, R. (1988). Der rote Fleck im dunklen Kontinent. In J. van Mens-Verhulst, K. Schreurs, & L. Woertman.(Eds.), Daughtering & Mothering: Female Subjectivity Reanalyzed. Cambridge: Cambridge University Press.

Weber, L. (1998). A Conceptual Framework for Understanding Race, Class, Gender, and Sexuality. Psychology of Women Quarterly, 22, 13-32.

Whisler, S. C., & Elkund, S. J. (1986). Women's ambitions: A three-generational study. Psychology of Women Quarterly, 10, 353-362.

Wilkinson, S. (Ed.). (1996). Feminist Social Psychologies: International Perspectives. Buckingham: Open University Press.

Wilson, M. D., Kastrinakis, M., D'Angelo, L. J., & Getson, P. (1994). Attitudes, knowledge, and behavior regarding condom use in urban black adolescent males. Adolescence, 29, 133, 13-26.

**APPENDIX I****BRIEF QUESTIONNAIRE**

<b>A. PERSONAL HISTORY</b>	
Age	
Religion	
Level of education	
<b>B. MARITAL HISTORY</b>	
Marital status	
Age at first marriage	
Years married	
No of marriages	
No of children	
Sex of children	1.
	2.
	3.
	4.
Ages of children	1.
	2.
	3.
	4.
<b>C. EMPLOYMENT HISTORY</b>	
Level of education	
No of jobs held	
Places of previous employment	1.
	2.
	3.
Years of employment in each job	1.
	2.
	3.
Current employment	
Years in current employment	

## APPENDIX II

### INTERVIEW SCHEDULE

1. How old is your daughter now? How old were you when she was born?
2. What was it like, having a daughter after 2 sons?
3. What emotions/feelings do you still remember having as she grew up?  
It sounds as if you are scared for her or fear that something might happen to her? What dangers are you referring to?
4. What is the nature of your relationship with your daughter?
5. Do you see yourself as approachable? In what way?
6. Can your daughter discuss intimate things/topics with you?
7. What would hinder discussions on a personal level?
8. How do you deal with disagreements?
9. What topics/issues/things do you and your daughter disagree on?
10. Are there certain things/issues/topics that are difficult for you to say or talk about?
11. Are there times that you want to say something to her, but don't? Why do you think that happens?
12. What would you like to say to your daughter? What do you think would happen if you do?
13. Do you think you sometimes make her feel guilty? How does it happen? Is it a conscious decision on your part, or something that has become a habit?

14. Why do you think you have the need or want to make her feel that way? How does making her feel guilty help you – What do you achieve?
15. Does having a daughter remind you of being a daughter yourself?
16. What memories – good and bad – are you often reminded of?
17. What – if anything – is special about having a daughter?  
Is that what you wanted for yourself – an education first and foremost and later on marriage with children?
18. What in your opinion is bad about being the mother of a daughter?
19. What joys did having a daughter bring you?
20. What was your own childhood like?
21. What kind of messages did you get from your parents about sex? How has that influenced your sexuality? How has it influenced your parenting?
22. What do you think your parents' adolescent ideas were about virginity and intercourse?
23. Do you think your daughter will follow the values you set as parents, or work out her own?
24. What kind of messages do you give to your daughter?
25. As you think about it now, how are you still affected by what your parents thought and taught about sexual matters?
26. Which of your own values are thought-out agreements or disagreements with your parents'?
27. Which of your values are in reaction to their values or behaviors?

28. What do you know of the influence on your parents' sexual beliefs, attitudes and knowledge as they were growing up? What did they learn about sex and relationships, and where did they get that information? How much do you think your parents are or were affected by their parents' views and behaviors?
29. How much of what your parents and grandparents believed about sex and sexuality do you think has affected you? How much has affected your children?
30. Are there any sexual experiences that you regret – considering the circumstances, the roles of others and how you saw your options at the time?
31. What is your overall opinion or judgment about the acceptability of experiencing bodily pleasures and/or sex? How do you arrive at that value?
32. What is your opinion on your own sexuality? Do you see yourself as a sexual being?
33. Why do you think there is such a silence when it comes to discussing issues of sex and sexuality? Is it difficult for you to discuss it? Why? Why do you think it was difficult for your mother to discuss it?
34. What do you think is your daughter's sexual status? Why?
35. If she would ask your advice about sex and sexuality, would you be able to share your sexual experiences with your husband with her? If not, why?

**APPENDIX III****CONSENT FORM**

(proposed research study: how mothers construct their sexuality as well as their daughters' and the influence/impact thereof on reproductive health)

I ..... hereby give consent that all information obtained in the interview conducted by ..... on this day ..... may be used in her research study or any future research that she may endeavor and/or participate in, with the condition that my identity and those of my family will not become known and will remain anonymous.

I am aware that said research study as well as the future research studies could possibly be published and I promise not to hinder in any way the publication of such material.

I am aware that should any irregularities, i.e. abuse (physical, sexual, verbal, emotional) regarding a minor become known in the course of the interview, the interviewer ..... will be reporting such incidents to the appropriate authorities i.e. The South African Police Services (SAPS) and/or The Department of Welfare.

I have no reservations about my participation in, or of the proposed research study.

I am participating in this proposed research study on a voluntary basis.

NAME (Capital letters): .....

SIGNATURE: .....

DATE: .....

SIGNATURE (Interviewer):.....