The construction of young masculine sexualities in rural Western Cape

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Declaration

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



Summary

It is widely accepted that South African youth are particularly at risk of unplanned pregnancies and infection with the Human Immunodeficiency Virus (HIV) and other sexually transmitted diseases (STDs). Research addressing the issue of HIV and reproductive health problems among young adolescents has largely focused on exploring the sexual behaviour of young women. The perceptions and attitudes of young men toward sexuality have been neglected, thus perpetuating gender bias. It is argued that the dominant focus on women is a flawed strategy for prevention and that researchers also need to listen to the voices of young men when it comes to studying sexuality (Thorpe, 2002; Morrell, 2002). The aim of this study is to explore how adolescent men in rural communities in the Western Cape experience and construct a masculine sexuality.

Two-hundred-and-thirty-one Coloured adolescent men aged 12 to 20, who attend a rural high school in the Langeberg District, Western Cape, completed self-administered anonymous questionnaires. The aim was to document (1) the range and extent of rural adolescent males' sexual behaviour and (2) to determine the levels of knowledge and perceptions that rural adolescent men have regarding condom use and contraceptives, as well as the sources from which they receive their knowledge. Of the sample, 37.9% had had sexual intercourse before, 41% never used contraceptives when having sexual intercourse and almost 60% believed that the use of contraception is the women's responsibility.

In addition, 21 individual interviews were conducted with both sexually active and non- active rural adolescent men to understand how they construct a masculine sexuality. Interviews revealed that young men generally regret their first sexual experience and that the experience of having sexual intercourse does not necessarily prove that you are a 'real man'. According to some of these young men, masculinity is not proven via sexual coercion or sexual intercourse, but being gentle and caring at all times. However, male-to-male sex is not considered masculine, but just perceived to be 'morsig' (disgusting).

Opsomming



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IN THE MEMORY OF MY FATHER, WILLIAM M.J. WILDSCHUTT (1957-1993)

"There is a lot of talk about physically and/or emotionally absent dads, but sons are also beginning to ask themselves, Was my father really absent, or did he and I unconsciously conspire to ignore each other?"

Daddy, we never spoke, but somehow I still endeavour to copy your manhood, your masculinity. In your silence, you taught me more than anyone else ever could. Thank you for defying inequality in your relationships and transferring love, joy and happiness. Your presence in the prime of my adolescent years was dearly missed as I tried to construct an acceptable masculine sexuality.

¹ Christopher Harding in Wingspan, cited in Biddulph (1994: 54)

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Opsomming

Dit is bekend dat swangerskap onder tieners in Suid Afrika baie hoog is, wat hulle kwesbaar maak vir seksuele oordraagbare siektes insluitend MIV/VIGS. Navorsing wat fokus op die kwessie van MIV/VIGS en ander reproduktiewe gesondheidsprobleme onder jong adolesente fokus grotendeels op die seksuele gedrag van jong vrouens. Die persepsies en houdings van jong mans ten opsigte van sekualiteit is in die proses verwaarloos, wat lei tot die behoud van gender stereotipering en gender vooroordeel. Navorsing toon dat die dominante fokus op vroue 'n gebrekkige strategie is vir die voorkoming van MIV/VIGS onder jongmense en dat navorsers ook na die stemme van jong mans moet luister wanneer seksualiteit bestudeer word. Die doel van hierdie studie is om te verstaan hoe adolesente mans in 'n landelike gemeenskap in die Wes Kaap 'n manlike seksualiteit ervaar en konstruktureer.

Twee-honderd-een-en-dertig jong mans, tussen die ouderdom van twaalf en twintig, wat 'n landelike hoër skool in die Langeberg Distrik, Wes Kaap, bywoon, het annonieme vraelyste voltooi. Die doel van die vraelys was om te bepaal wat (1) die omvang en frekwensies van landelike adolesente manlike seksuele gedrag is en (2) die kennisvlakke en persepsies wat jong landelike adolesente mans het ten opsigte van kondoomgebruik en voorbehoedmiddels, asook die bronne waar of wat hulle hul seksuele kennis vandaan kry. In hierdie steekproef het 37.9% van die jongmans gerapporteer dat hulle seksueel aktief is, 41% het nog nooit voorbehoedmiddels gebruik tydens seksuele omgang nie, en byna 60% glo dat die gebruik van voorbehoedmiddels die vrou se verantwoordelikheid is.

In die proses is daar ook 21 individuele onderhoude gevoer met beide seksuele aktiewe en nie seksuele aktiewe landelike adolesente jong mans om te verstaan hoe hulle 'n manlike seksualiteit konstruktureer. Onderhoude het getoon dat jong mans oor die algemeen spyt is oor hul eerste seksuele ervaring en dat seksuele omgang nie noodwendig bewys dat jy 'n 'ware man' is nie. Volgens sommige van hierdie jong mans, word manlikheid nie bewys deur seksuele omgang of deur seksuele druk nie, maar deur ten alle tye 'n 'gentleman' te wees. Gelyktydig word man-tot-man seks nie as manlik beskou nie, maar wel as 'morsig' beskryf. Verskille in die konstruksies van 'n manlike seksualiteit is veral merkbaar in die verskillende onderhoude van beide seksuele aktiewe en nie-seksuele aktiewe jong mans.

Chapter 1

Background and motivation

1.1. Introduction

It is widely accepted that South African youth are at special risk of unplanned pregnancies and becoming infected with the Human Immunodeficiency Virus (HIV) and other sexually transmitted diseases (STDs) (Medical Research Council, 2002; Flisher, Reddy, Muller & Lombard, 2003; Netswera, 2002; Wood, Maforah & Jewkes, 1998; Tillotson & Maharaj, 2001). In addressing the issue of HIV/AIDS (Acquired Immunodeficiency Syndrome) and reproductive health problems amongst young adolescents, the predominant focus has thus far been on exploring young women's sexual behaviour. The perceptions and attitudes of young men toward sexuality have been neglected, thus perpetuating gender stereotypes and gender bias (Varga, 2001, in Morrell *et al.*, 2002). It is argued that the dominant focus on women is a flawed strategy for prevention and that researchers also need to listen to the voices of men when it comes to studying sexuality (Thorpe, 2002; Morrell, 2002).

There is a great need to focus especially on the young male's construction of his sexuality, as young males are sexually active at a younger age than young women. Young males have more sexual partners and, to a large extent, still play a dominant role in decision-making about and negotiation for sexual activities in sexual relationships. Thorpe (2002: 68) argues that

[b]oys' dominance and control over sexual relationships and the predominantly negative ways of resolving conflict, without open communication, and often through violence, exacerbate the spread of HIV and hinder both gender groups from achieving workable safe sexual relationships. This dominant discourse of masculinity can be challenged by counter-nurturing alternate discourses and voices emerging from the boys themselves.

By understanding young men's construction of a male sexuality, intervention programmes can be more exactly focused to prevent the spread of HIV/AIDS amongst young men and women.

Localised understanding of sexuality is also needed. This entails understanding how young men in specific communities construct their sexuality. Several studies have been conducted so far that contribute to such a localised understanding of sexuality (Harrison, 2002; Flisher,

Reddy, Muller & Lombard, 2003; Hillier, Harrison & Warr, 1998; Wood, Maforah & Jewkes, 1998). Most of the studies, however, have been conducted in the populous areas of rural KwaZulu-Natal, with insufficient research conducted on young adolescent men's sexuality in the Western Cape. Research in the Western Cape has predominantly been focused on the urban areas (e.g. Flisher *et al.*, 2003), with a limited amount of research that actually explores adolescent sexuality in rural areas (e.g. Bremridge (2000) studied adolescent male sexuality in semi-rural areas).

This study aims to explore how young adolescent men in a rural Western Cape community construct sexuality. Such an understanding will contribute towards assisting in developing HIV/AIDS prevention programmes and gender education programmes that are appropriate for the specific needs and realities of this specific community. In the following section I will highlight the reproductive health realities in South Africa and explain why there is a need to focus on the construction of young masculine sexualities.

1.2. Gender, sexuality and AIDS

1.2.1. Focus on women

Globally 40 million people are living with HIV/AIDS, 5 million of whom were infected in 2003 (UNAIDS & WHO, 2004). Nationally and internationally women's reproductive health has become the source of much investigation and research. It was predicted that in South Africa an estimated 12.5% of adult females would be infected with HIV in the year 2000 (Doyle, 1993, cited in Strebel, 1995). The reality is that 24.5% of women attending antenatal services in the public sector in South Africa were HIV infected (Walker and Gilbert, 2002). Compared to women in the rest of the world, the women in Sub-Saharan Africa were at a 500 to 1000 times higher risk of contracting the HI-virus Katz, 2002). In addition, it is suggested that 55% of HIV-positive adults in the Sub-Saharan region of Africa are women, with an estimated 12 to 13 women infected for every 10 African men (WHO, 2000, cited in Walker and Gilbert, 2002).

Horrific statistics show that about 60% of all new infections occur in the age range of 15-25 years in South Africa, with young women being infected at an earlier age than men (*ibid*, 2002). Shisana (2004) notes that for every 15- to 19-year-old boy infected with HIV, 5 to 6

girls might be infected in the same age group. In the Sub-Saharan region women below 25 account for almost 30% of all HIV/AIDS cases (Shisana, 2004).

UNAIDS reported in 2000 that more than 600 000 children were infected with HIV in 1999, which primarily occurs through mother-to-child transmission, and of them almost 85% resided in Sub-Saharan Africa (Amon, 2002). First pregnancies among women in South Africa are still experienced by over one third of women by the age of 19 years (Harrison *et al.*, 2001). It is estimated that by the year 2020 births to girls aged 15-19 in South Africa will increase by 400 000 to the 1996 levels and will thus reach a figure of at least 4.8 million new births (Garenne, Tollman, Kahn, Collins & Ngwenya, 2001). According to Garenne and colleagues (2001: 278), this reflects "both a growth in the cohort of [adolescents], as well as higher levels of fertility among this age group."

Campbell (1995) argues, though, that the focus on changing women's behaviour and not men's places the burden only on women to ensure safe sex. This flawed strategy for women to negotiate safe sex with men ignores the social constraints in which women lack the power to perform this task in a society dominated by men. Bujra (2000) argues that without addressing the issue of men and male power in specific contexts, women's empowerment will not be achieved. Griffin (1998) concurs with Bujra (2000) that the current 'feminisation' of AIDS and its predominant focus on empowerment is only another form of reproducing gender hierarchies. In the next section I will look at how gender construction plays a role in heterosexual relationships.

1.2.2. Gender constructions in heterosexual relations

There is a tendency in the literature on sexuality and AIDS to blame men for the increase in HIV/AIDS victims across the globe (Mane & Aggleton, 2001). This can be ascribed to a feminist critique of heterosexuality, which emphasises male dominance and women's submissiveness in these heterosexual relationships (Shefer, Strebel & Foster, 1995). It can also be ascribed to the fact that men misuse their power and strength in raping young girls, abusing their wives and participating in multiple sexual relations without protection. It is also important to recognise, though, that women and men are equally responsible for the reproduction and construction of existing gender relations (Mane and Aggleton, 2001). Mane and Aggleton (2001: 26) argue that "gender relations affect *both* women and men, and collective as well as individual efforts of men and women are needed to achieve greater

gender equity." The goal to achieve is to reduce both women and men's vulnerability to HIV/AIDS.

What is not acknowledged in dominant discourse pertaining to gender and sexuality is that both the actions of men and women are determined by traditional beliefs and expectations (Mane & Aggeleton, 2001). Their actions are also further influenced by the social norms and the cultural beliefs that prevail within their society. Of these traditional expectations, socio-cultural gender roles depict the female as being the caretaker of the family, looking after the health of her family and thus taking the responsibility away from the husband to look after his own health (Mane & Aggleton, 2001). Young men are usually socialised by their mothers not to participate in any household chores or not show any form of emotion (Mane & Aggleton, 2003). In addition, adults usually focus only on the sexual behaviours of girls and thus leave boys to explore their own sexuality (Varga, 2001).

Traditional socialisation also inculcates in young men the notion that 'real' men initiate sexual activities, 'real' men are in charge of sexual activities and that sexual penetration is the ultimate achievement of becoming a 'real' man (Campbell, 1995). Campbell (1995) argues further that traditionally men are expected to know everything about sex and always be ready to have sex. Young men are trained to seduce and coerce women into sexual intercourse and to be heterosexually active and not monogamous (Campbell, 1995). This is further emphasised by the young men's urge for sexual release and the perception that condom use will inhibit this need.

Forman (1999) argues that it is not men's conscious choice to act this way, but it is how men are expected to behave (cited in Varga, 2001). It is emphasised that gender norms 'trap' boys into conforming to these traditional beliefs and thus increases the likelihood of their becoming infected with the HI-virus.

1.2.3. Why focus on young men

Varga (2001) emphasises that young African men's poor knowledge about, and participation in, risky sexual behaviours increase the likelihood of their being infected with sexually transmitted diseases. She further argues that young men will not admit ignorance regarding their sexual reproductive health due to the prevailing gender norms that exists in the African continent (Varga, 2001). The avoidance of focusing on young men in sexual

reproductive health research is further aggravated by a dominant focus on women's health concerns (Varga, 2001).

Power imbalances between men and women and the prevailing norms of masculinity emphasise the need to focus on young men in curbing the spread of the HI-virus. Globally women are under-represented in social, political and economic structures, which are ultimately dominated by men. Thus, empowering women is not enough to address gender inequality in men's and women's reproductive health, but it is also essential to motivate and inform men to be more involved in the reproductive health of both men and women (Mane & Aggleton, 2001).

In addition, Mane and Aggleton (2001) argue that men are too often seen as the problem and are usually generalised as a monolithic entity that is in need of change. In this regard, subordinate masculinities (those that do not prescribe to the dominant norms of masculinity and traditional beliefs) are usually ignored in sexuality research. Mane and Aggleton (2001) argue that the hegemonic forms of masculinity oppress men and women and in a sense form the boundaries of heterosexual relations. Men who do not conform to the hegemonic heterosexual form of masculinity are ridiculed, often violently abused and usually the victims of homophobic reactions. Thus, in order to address gender and sexuality in AIDS research it is important to acknowledge the gender relations between men and women as well as men and men. In Chapter Three I look specifically at the 'masculine construct' in sexuality research. I especially focus on the impact that these gender norms and stereotypes, as indicated in research, has on young men's constructions of their masculine sexuality.

The studies mentioned above thus highlight the economic and political influences on adolescent sexual behaviours, as well as how gender intersects with sexuality and how important it is to study gender issues when concentrating on the construction of adolescent sexuality. Thus, when looking at the social factors that influence adolescent sexual behaviours, specifically the adolescent sexual behaviours of young men, is it necessary to understand the political, economical and social context in which these adolescents live and how these factors influence the young man's sexual behaviours. Salo's (2002) specific focus on coloured people in the Western Cape is also an indication of the need for research studies to focus more attention on specific race groups as different race groups in South

Africa might experience their social influences and sexual behaviours differently from other race groups, due to the legacy of apartheid in South Africa.

1.2.4. Race

With the vast majority of research focusing on KwaZulu-Natal, most research has also focused entirely on the black communities, treating the AIDS epidemic as a "black plague" (Alexander & Uys, 2002, emphasis added). There is a lack of research on Indians, Whites and Coloured people with a focus on AIDS (Alexander and Uys, 2002). The HIV/AIDS rates of non-black groups are seldom published, which diverts scholarly and policy attention from other racial groups in the South African context (Crothers, 2001). The focus of this research will specifically be on the construction of young rural Coloured men's sexuality.

1.3. Researched populations in South Africa

The rural KwaZulu-Natal regions and the rural Northern Province regions are usually targeted for the exploration of adolescent sexuality in South Africa due to the high prevalence of HIV/AIDS among the youth (Harrison *et al.*, 2001; Taylor *et al.*, 2002; Peltzer, 2002). Kau (1991) investigated the sexual behaviours of adolescents in the Molopo region of Bophuthatswana, with the sole focus on adolescent men. Richter and Swart-Kruger (1995) paid attention to male street children and adolescents across South Africa. An unpublished study based on research that was conducted in semi-rural Stellenbosch, Western Cape region, set out to understand the construction of adolescent men's sexuality and their sexual behaviours in heterosexual relationships. It also aimed to determine the range and frequency of sexual behaviours that these young men engaged in (Bremridge, 2000). Research studies that focus on adolescent sexuality in the Western Cape were usually conducted in urban areas (see Flisher, 2003; Salo, 2002).

There is a paucity of research conducted on the sexuality of men in South Africa and across Sub-Saharan Africa. Varga (2000) emphasises that it is important for researchers to assess adolescent understandings of HIV/AIDS at different levels. This entails shifting the focus to include men or adolescent men, instead of conducting female-specific research or investigating both men and women in one study. Varga (2000) argues that, when researchers investigate both men and women in sexuality studies, they do not explore

gender differences in this regard, making it difficult for other researchers to draw specific conclusions about adolescent men's reproductive and sexual knowledge.

Most studies pertaining to adolescent sexuality were conducted in the rural areas of KwaZulu-Natal, the most populous area affected by the AIDS epidemic. Rural areas in the Cape Province have been neglected, making it difficult to implement effective prevention programmes in these communities, because little contextual information about the communities is available.

There is therefore a need for more in-depth studies in the rural areas in the Western Cape. More specifically, there is a need to explore the sexual behaviours of rural adolescent men in the Western Cape engage in and the social factors that influence the construction of their sexuality.

This research was conducted in a predominantly Coloured secondary rural community in the Langeberg District, Western Cape.

1.4. Research questions and methods used

The aim of this study is to explore how adolescent men in rural communities in the Langeberg District in the Western Cape construct a 'masculine' sexuality. Secondary research questions will be explored to get an in-depth understanding of how the adolescent man constructs a 'masculine' sexuality. These secondary research questions include the following:

1.4.1 Range and extent of adolescent male sexual behaviour

My aim in this secondary objective will be to explore the range and frequency of adolescent men's sexual behaviours within the context of the rural community of the Langeberg District, where this study was conducted.

Due to the sensitive nature of this topic, the range and frequency of adolescent men's sexual behaviour will be explored through the use of a self-administered questionnaire.

1.4.2. Exploration of adolescent males' knowledge of contraceptives

The second secondary aim will include an exploration of the knowledge that adolescent men have regarding contraceptives and condoms, as well as the sources from where they receive their knowledge. It is imperative to establish whether adolescent men are informed about the correct use of condoms. Knowledge about adolescents' safe sex practices and sexuality is significant in understanding how they construct their sexuality. Information on adolescent knowledge about sexuality will give insight into how well informed adolescent men really are about sexuality. Previous literature showed that adolescent men seem to be more informed about contraceptives and their use when compared to adolescent women's knowledge about this issue. Knowledge regarding contraceptives and condom use will also be obtained through the use of the self-administered questionnaire.

1.4.3. Constructing a 'masculine' sexuality

The third objective will be to explore how adolescent men construct a masculine sexuality. By conducting individual interviews, I will be able to record in-depth stories and information regarding the way that adolescent men not only construct their sexuality, but also how they experience it. The goal is to interview at least 20 respondents. Both sexually active and non-active men will be interviewed. The reason for interviewing both sexually active and non-active participants is to address the lack of research focusing on the sexually non-active respondents in sexuality research. Such an approach will give more insight into why certain individuals are sexually active and others are not at such an early age.

The questionnaire that participants have to complete includes a request for research participants to volunteer for individual interviews.

1.5. Conclusion and outline of thesis

In this chapter I argued that an exclusive focus on researching young women's sexual behaviour to prevent the spread of HIV/AIDS or other STD's is a flawed strategy. I emphasised that more research is needed to understand how young men experience and construct their sexuality and sexual behaviour. In the South African context most studies pertaining to adolescent sexuality were conducted in the area of KwaZulu-Natal, with there is a lack of studies conducted in especially the rural areas of the Western Cape.

The research aim of the current study is to explore how adolescent men socially construct a 'masculine' sexuality in rural communities in the Western Cape. Secondary objectives will include:

- ➤ To determine the range and frequency of adolescent men's sexual behaviours in a rural community;
- To determine levels of knowledge rural adolescent men have regarding condom use and contraceptives, and the sources from which they receive their knowledge; and
- > To explore how adolescent men socially construct a masculine sexuality.

These objectives will be explored through the use of open and close-ended self-administered questionnaires and semi-structured individual interviews.

The outline of the rest of the thesis is as follow:

- Chapter 2: I discuss the social constructionist framework as a theoretical perspective through which informs this study;
- Chapter 3: I elaborate on a conceptual framework of masculinity in sexuality research;
- Chapter 4: This chapter will present a discussion of the methodological framework for this study and the procedures that will be followed to collect and analyse the relevant data;
- Chapter 5: Results of the quantitative method will be presented;
- Chapter 6: Results of the qualitative method will be presented; and
- Chapter 7: The concluding chapter includes a discussion and summary of the results, identifying limitations of the research; recommendations are made for further research in this field and HIV/AIDS prevention campaigns.

Chapter 2

2.1. Theoretical Framework: Social Constructionism

Research pertaining to human sexuality and sexual behaviour is conceptually underdeveloped (Okami & Pendleton, 1994). The Kinsey report of the 1940s and 1950s, which focused on the sexual behaviour of men and women, is considered to be one of the most influential works about sexuality (Brooks-Gunn & Furstenburg, 1989). Brooks-Gunn and Furstenburg (1989) argue that subsequent research failed to elaborate on and give new perspectives on human sexuality, and did not develop theoretical frameworks or adequate models to explain sexual behaviour.

In the following section I will briefly refer to one such model, the Health Belief Model, which is used to study reproductive health problems. I will argue that this model and other models similar to this one are ineffective for understanding why young men engage in high-risk sexual behaviour. I propose the use of a social construction epistemology as the best paradigm to understand young men's sexual behaviour.

2.2. The Health Belief Model

The Health Belief Model (HBM) is just one of many addressing reproductive health problems. The HBM rests on the survey instrument of the World Health Organisation's global programme on AIDS known as the Knowledge Attitude Belief Practice (KABP) survey instrument (Bremridge, 2000).

In essence, the HBM maintains that individuals must first develop a sense of urgency (expressed in 'worry', 'salience', and 'perceived vulnerability'), and the belief that they are capable of behavioural control (i.e., can regulate the activities that put them at risk of contracting the illness, expressed in a 'sense of efficacy'), before they will stop engaging in health-threatening behaviours or adopt and maintain practices that prevent HIV exposure (Brunswick & Banaszak-Holl, 1996: 44)

The HBM thus posits that, for example, the adolescent male must first be aware of risks of active sexual behaviour before a change in response can be expected. It is emphasised that attitudinal factors and social factors play a more powerful role than knowledge does for behavioural change to be effective (Brunswick & Banaszak-Holl, 1996).

However, in terms of adolescent sexuality and the increase of AIDS amongst adolescents, the KABP paradigm does not explain how behavioural change occurs or how adolescents construct their sexuality within different contexts. Karlyn (2003) states that unsafe sex still persists, even though individuals are aware of the threat of AIDS, know what precautions to take and are able to obtain condoms to prevent the transmission of AIDS. Within the HBM and other models using the KABP, human sexuality is universalised, and the individual's construction of his/her sexuality within his/her own context and from his/her perspective is ignored.

Carol S. Vance (1995) argues that sexuality should be approached from a social constructionist perspective, which examines the range of behaviour and subjective meaning among groups. In the next section I will explore and incorporate the social constructionist paradigm as relevant to this study.

2.3. The social constructionist perspective

2.3.1 Defining social constructionism

The Middle Ages were renowned for claiming that pure knowledge was regulated by the church, which distinguished the truth from false ideas (Durrheim, 1997). During the sixteenth and seventeenth centuries human intellect, reason and experience formed the basis of truth, which was mostly derived from the formal epistemology of 'positivist' empiricism. In essence, the social constructionist paradigm may best be defined as a "resistance to the institutionalised dominance of empiricism as the guiding philosophy of the human science" (Durrheim, 1997: 176).

The social constructionist paradigm rejects the essentialist ideology that social phenomena are inevitably universal and biologically determined. (De Lamater & Hyde, 1998). Bohen (1993: 13) states that we will never know with certainty what the nature of reality is, for "what we purport to know, what we see as truth, is a construction, a best understanding, based upon and inextricably intertwined with the context within which it is created." Social constructionism does not deny that truths do exist, but argues that all facts are arbitrary (Durrheim, 1997:177) Reality is based on our shared experiences with other people. In this process language is used to interpret new experiences and help us make sense of the world we live in (DeLamater & Hyde, 1998; Lesch, 2000). According to Durrheim (1997: 177),

truth can only exist within the milieu of socially shared understandings, as truths and facts are always "perspectival interpretations".

In understanding how phenomena are socially constructed, social constructionists endeavour to explicate the process by which people come to explain, describe or otherwise account for the world in which they live (Gergen, 1985). What makes the social constructionist paradigm unique is that it is not a homogenous or unitary paradigm, but consists of different overlapping disciplines ranging from psychology, political science, sociology, anthropology, cultural studies and literary criticism.

Loosely speaking, social constructionism refers to any social influence on an individual experience. Betty M Bayer (1998: 4) gives an excellent summary and definition of social construction from a psychological perspective when she states:

Contrary to the aims of "pinning" down subjects and subjectivities, social construction has largely kept with its initial impetus to participate in meaning making and to see meaning making as a participatory process from which emerge psychological subjects and subjectivities. As social construction's emphasis is placed on the ways we negotiate the meaning of our lives, so its practices have for the most part stressed language as history's and culture's agent in fashioning psychological subjects.

Social constructionism can thus be defined as a unique movement which articulates the historical, social and contextual influences on human experience. It emphasises difference in different contexts and also how researchers should try to understand people making meaning of their everyday lives in different context. In the next section I will give the basic principles of the social constructionist movement.

2.3.2 Principles of social constructionism

The fundamental principle of social constructionism is that your "reality is socially constructed" (Berger & Luckmann, 1966, cited in Burger, 2000; De Lamater & Hyde, 1998). According to Berger and Luckmann (1966), reality is constructed through "moments" called (1) externalisation, (2) objectification, and (3) internalisation (as cited in Rogers & Rogers, 2001). Externalisation refers to how different cultures, societies and social groups make sense of the world. These constructed realities are then perceived to be real, natural and thus objectified. Through a process of enculturation and socialisation,

individuals incorporate a reality that has been socially constructed into their own understanding of the world: i.e. internalisation (Rogers & Rogers, 2001).

Social constructionism basically argues that we cannot know with certainty what the nature of reality is. Reality can only be a product of social exchanges and interactions between people. The same argument holds for knowledge. What is usually referred to as knowledge can only be what we "agree to call truth" (Bohen: 1993: 13). Greer (1997: 91) states that

[w]hat counts as knowledge or truth (in a local sense) is governed by a variety of social and cultural boundaries, networks of social communication and interchange, and influential social practices (such as science and mass media) which shape and give context to understanding.

Thus, social constructionism should not be regarded as a theory which makes predictions or as a means to validate one or other perspective, but social constructions should be regarded as a product of people's social interactions (Gergen, 1985; Greer, 1997; Lesch, 2000).

2.4. The social construction of gender

The sex role paradigm has come under increasing criticism for specifying how biological males and females are socialised and forced to fit into a static container (Kimmel, 1989). This paradigm ignores the relational aspects of gender, that is, the historical and social aspects of gender. Kimmel (1989: 14) argues that "although both masculinity and femininity are socially constructed within a historical context of gender relations, definitions of masculinity are historically reactive to changing definitions of femininity".

Bohen (1993) argues from a constructionist perspective and states that gender should not be viewed as a trait of the individual, but should be accepted as a construct that is identified through particular transactions which are appropriate to one's sex. Gender is thus constructed in those interactions that are construed as gendered and is not resident in the person. Therefore, we can argue that what counts as masculine or feminine is based upon socially agreed upon definitional terminology that is reproduced in the social process of interaction and participation. West and Zimmerman articulate the socially interactive construction of gender when they state that "[one] does not have gender; one does gender" (1987; cited in Bohen, 1993: 3). What counts as gender is not the biological sex of the

person, but the particular transaction and factors within that situation where the performance occurs, that can be considered as masculine or feminine.

An everyday misconstruction of gender is that the social construction of being masculine or feminine, or showing gender-typed attributes, is only the product of a process of socialization (DeLamater and Hyde, 1998). Essentialists will argue that gender is just a trait of the individual. On the contrary, social constructionists believe that gender is a process that is external to the individual. Gender should be defined and understood as a process of interaction between people, by the discourse between cultures and language. Gender should be understood, in the social constructionist perspective, as a set of performances and practices that is formed through discourse and language and as characters of a political system (DeLamater & Hyde 1998; Tolman, Striepe & Harmon, 2003).

In the context of the AIDS epidemic in South Africa, feminists have taken a critical look at male sexuality. Feminist researchers in South Africa and America have emphasised that the gendered meanings associated with women's and men's sexuality are socially constructed to sustain the political system of white heterosexual, upper- and middle-class male privilege (Salo, 2002; Tolman, Striepe & Harmon, 2003). Within a gendered approach to understanding sexuality, the focus of feminists has predominantly been on female sexuality, ignoring male sexuality. Researchers like Pleck, Sonnenstein and Ku (1994) shifted their focus to male sexuality and found that boys accept the hegemonic or dominant form of masculinity by taking sexual risks in order to demonstrate a dominant form of heterosexuality and rejection of femininity and/or homosexuality (Tolman, Striepe & Harmon, 2003). In the next section I will review the social construction of sexuality.

2.5. The social construction of sexuality

Sexuality is a complex concept to define and there are different factors that play a contributing role in the existence of one's sexuality. This complexity of the concept of sexuality is emphasised by Guggino and Ponzetti (1997), who perceive sexuality to be an interaction of socio-cultural, biological and experiential processes. They further add that attitudes, emotions, sexual drives and sensory pleasure all play a contributing role in the first sexual intercourse. Guggino and Ponzetti's (1997) understanding of sexuality is supplementary to, and adapted from, Aron and Aron's (1991) definition; the latter tried to formulate a broad acceptable definition of sexuality (Aron and Aron, 1991: 27):

Sexuality is the constellation of sensations, emotions [and] cognitions that an individual associates with physiological sexual arousal and that generally gives rise to sexual desire and/or behaviour.

Aron and Aron (1991) were focused on formulating a 'neutral' definition and therefore left out of account the fact that sexuality as a concept is much more comprehensive and broader than merely its physiological aspects (De Lameter, 1991; Oliver, 1996; Lesch, 2000).

In my search for an accurate conceptualization of sexuality, I found that most researchers adapted the social constructionist paradigm to understand sexuality. In Jeffrey Weeks's (1986) construction of sexuality, the subjective meaning and experience of the individuals' sexuality is emphasised. Weeks (1986: 15) argues that sexuality should be defined as a historical construct, but also adds that sexuality

bring[s] together a host of different biological and mental possibilities – gender identity, bodily differences, reproductive capacities, needs, desires and fantasies – which need not be linked together, and in other cultures have not been. All the constituent elements of sexuality have their source either in the body or the mind, and I am not attempting to deny the limits posed by biology or mental processes. But the capacities of the body and the psyche are given meaning only in social relations.

Sexuality is thus multifaceted and is "produced" by society. Gagnon (1973) argued that people are not born sexual; they learn how to be sexual and they receive their signals from the context in which they live. This is emphasised by Holland *et al.* (1990: 339), who state:

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

It seems that as a concept, sexuality encompasses everything that can be described as sexual matters. In this study I argue that the sexuality of young men should be understood as a variable of an individual's social, cultural and historical circumstances that shape his sexuality. Sexuality incorporates an individual's subjective feelings (i.e. the psychology of the mind, body and spirit) and the construction of sexual identities according to the norms and context of one's society and peers' construction of one's sexuality. Thus, in understanding the

sexuality of the young man, one needs to understand the physiological, biological and psychological factors that lead to the expression of sexual desire and behaviour. This also includes the knowledge and recognition of the social, cultural and historical circumstances that shape one's sexuality in different contexts.

In the conceptualization of sexuality it seems that sexuality needs to be contextualized to fully understand the sexual behaviours and experiences of the individual. Contextualising the individuals' construction of his or her sexuality entails acknowledging that the individual is an active participant in the structuring of his/her own reality, which is mediated through culture and history. Thus concepts such as sexuality or masculine sexuality are the historical and cultural consequences of people constructing them as meaningful and significant (Rogers & Rogers, 2001). People construct meaning socially through their social interaction and the language they use to understand these constructs (Rogers & Rogers, 2001; Bremridge, 2000). Sexuality is thus a construct that can be constructed and reconstructed within different contexts.

In the exploration of a coloured adolescent male sexuality, the researcher needs to understand the social context in which the research participants live. This context involves research into the participants' gender, race, historical background and socio-economic circumstances as well as the culture that mediates the construction of meaning making for these individuals.

2.6. Coloured adolescent male sexuality in rural areas in South Africa

Research into coloured adolescent male sexuality in rural areas from a social constructionist perspective implies that the researcher acknowledges the social context within which young men live. This entails taking into account the young male participants' subjective feelings, socio-economic circumstances, political, historical and cultural influences that might have an influence on the participants' construction of their sexuality. In order to obtain the best overview of the young man's construction of his sexuality, the social constructionist epistemology also requires that the context of the researcher¹ should be acknowledged in order for us to be aware of the interchange of meaning between the research participants and the researcher (Bremridge, 2000).

¹ In Chapter Four I give an overview of my own background and my context in the self-reflexivity section.

Rural areas in South Africa are usually plagued by extreme poverty, unemployment and welfare dependency. Lindegger and Wood (1995) argue that HIV has increased rapidly in those areas which have few resources and are the poorest communities. Young adolescent men are usually forced to obtain part-time jobs in order to help their families financially. In addition, school drop-out rates are usually higher in these areas and young men participate in risk-taking behaviour such as excessive alcohol use and multiple sexual relationships. Crothers (2001: 7-8) notes that

[i]ssues of poverty, entitlement and access to food, medical care and income, the power-imbalanced relationships between rich and poor in society, the viability of different forms of rural production, the survival and coping strategies of different types of households and communities, all impinge upon the ways in which the AIDS pandemic affects societies and economies [and young adolescents].

The apartheid legacy of South Africa places another great burden on young coloured adolescent men's construction of a masculine sexuality. The young coloured man may feel marginalised in the South African context and have a need to achieve hegemonic masculinity. This form of masculinity might only be achievable by participating in multiple heterosexual relationships². It has been found that male sexuality is often thought of as being unrestrained (Rivers & Aggleton, 1999). Thus, if a young coloured man can demonstrate that he is sexually active, has multiple partners and sexual experience, he achieves a sense of hegemonic masculinity and power within relationships. This might be a means to evade the fact that he is marginalised in the South African context and, instead of feeling disempowered, he feels powerful.

2.7. Conclusion

This chapter explored the social constructionist paradigm which informs this study. In following this paradigm in exploring masculine sexuality, I hope to contribute more insight into and understanding of the construction of coloured male adolescent sexuality at the epicentre of the HIV/AIDS pandemic. In understanding the subjective feelings of the young adolescent man's construction of his sexuality within his context, intervention programmes can be more effectively developed and implemented in the prevention of the spread of the HI-virus

In the next chapter I discuss how gender intersects with sexuality. More specifically, I look at how masculinity is constructed within sexuality research.

² In Chapter Three I discuss in detail the masculine construct in sexuality research.

Chapter 3

Literature Review: Adolescent Sexual Behaviour, KABP Studies and the Gender (Masculine) Construct in Young Men's Sexuality

3. Introduction

In this chapter I review the literature on adolescent sexual behaviour and the social factors that influence the construction of a healthy adolescent sexuality. In what follows I will (1) conceptualise adolescence; (2) give a brief overview of adolescent sexual behaviour in South Africa; and (3) highlight the significant contributions of KABP studies as well as their flaws. I discuss the influence of social factors such as young men's perceived vulnerability to contracting the HI-virus, the influence of media campaigns and parental/adult influences. Peer (male) network relations are then discussed as an important denominator in the construction of gender (masculinity) and sexuality. Finally, I will discuss the construction of masculinity/masculinities and the impact this has on young men's construction of a healthy sexuality. Here the focus will specifically be on achieving or constructing masculinity in (hetero)sexuality as well as on homophobia and the masculine (homo)sexual construct.

3.2. Adolescence and adolescent male sexuality

Van Dijk (2002)³ highlights the different words that are used to describe young people, which include teenagers, adolescents, minors and youths. In 1997 the National Youth Commission of South Africa delivered its first National Youth policy to government (National Youth Commission, 1997). In this policy young people are referred to as 'youth' in the age group 14 to 35. Adolescents, usually refers to those young people between the ages of 12 and 19 (Van Dijk, 2002). In this dissertation the terms adolescents and youths will be used interchangeably, although adolescents is used predominantly. Adolescents will specifically refer here to young people between the ages of 12 and 25.

Adolescence literally means 'to grow' and is derived from the Latin verb 'adolescere' (Olivier, 1996). This is a period in which young people experience dramatic life changes, and explore their social, political and sexual identity (National Youth Policy, 1997; Olivier, 1996). This is the period in which young people develop interest in the opposite sex, or even in same-sex partners, and hence experience the desire for sexual activities (Van Dijk, 2002).

 $^{^3\} http://www.socsci.kun.nl/maw/cidin/publications/papers/op109.pdf$

Sexual maturation occurs during this period for both boys and girls. For boys, for example, this is the period in which sexual awakening comes about with the first spontaneous erection and ejaculation (Van Dijk, 2002).

Zani (1991) found that the awakening of boys' sexuality is a silent event during which they experience their first ejaculation, which is usually associated with intense sexual pleasure and masturbation. Furthermore, the adolescent male's first experience of ejaculation and pleasure becomes the first sign of masculinity, and thus the belief that sexual contact should always result in orgasm develops (Gagnon and Simon, 1973).

Ignoring adolescent male sexuality and discouraging young men from talking about their initial experience of ejaculation means that the needs of boys and young men in general are neglected and as a result "the adverse impact of [these] patriarchal attitudes and norms on young men are not appreciated" (Ramakrishna *et al.*, 2003: 3). Wight (1994) argues that there are too many inconsistencies in the dominant norms of adolescent male sexualities and an ignorance surrounding the vulnerability of young men regarding their sexual identities. In the following section I will give an overview of adolescent sexual behaviour, devoting particular attention to young men's sexual behaviours in South Africa.

3.3. Adolescent sexual behaviours

Sexual intercourse can be defined as penis-vagina penetration in heterosexual intercourse and penis-anal penetration in male homosexual intercourse (Dacey and Kenny, 1997; Bremridge, 2000; Nielsen, 1998). In exploring research on adolescent sexual behaviour, it was found that researchers focus more on the heterosexual mode of intercourse.

Statistics indicate that adolescents participate in their first heterosexual intercourse as early as, or younger than, 14 years old in South Africa, with an increase in prevalence rates by the age of 16 years (MRC, 2002). A national survey among 15- to 24-year-old young people found that the median age of first sexual intercourse in this age group was 17 years (Pettifor *et al.*, 2004). On the whole, this national survey done by the Reproductive Health Research Unit of the University of Witwatersrand indicated that 67% of young people in this age group were having or have had sexual intercourse (Pettifor *et al.*, 2003). There is a high probability that at least 50% of young people in South Africa participate in sexual activities by the age of 16 years, with an increase to 80% by the age of 20 years (Eaton *et al.*, 2003).

It is further repeatedly reported that males are more sexually active than females (Oliver & Hyde, 1993; De Gaston & Weed, 1996). Eaton *et al.* (2003) indicate that more boys show earlier participation in sexual intercourse than girls, with black adolescents in South Africa more vulnerable to early sexual intercourse than any other ethnic group (Eaton, *et al.*, 2003). Pettifor (2003) and colleagues showed that there is a significant difference between young men and women, with more young men reporting first sexual intercourse at 14 years of age than young women (12% and 5% respectively). The MRC (2002) study indicates that nationally 50.1% of young men participate in sexual intercourse (34.1% females) in South Africa, 45.1% young males in the Western Cape are sexually active and 41.2% of the young coloured males nationally engage in sexual intercourse.

It is difficult to conclude what differences there are between urban and rural South African youths initial participation in sexual intercourse from previous studies, as there are contradictions in the findings of two specific and current research reviews (Varga, 2000; Kelly & Ntlabathi, 2002). Varga (2000) found that it was not possible to distinguish urban-rural differences regarding boys' sexual debut, though in one of the studies reviewed it was indicated that urban boys' sexual debut is much earlier than their rural counterparts (14.5 years for urban boys and 15.2 years for rural boys). What is significant in the review of Kelly (2002) and colleagues is that the ages of adolescents in rural areas at first sexual intercourse are much lower than those in urban areas.

It is reported that the first sexual intercourse not only occurs at an early age for South African adolescents, but also that it entails the non-use of contraception and/or condoms. According to Kau's (1991) sample of young men, only 24% of the 78% who were sexually active reported using condoms. In addition, Kau (1991) found that casual sex was practised by most of these young men and sexual partners were seldom one steady girlfriend of the respondent.

The 2001 national survey done by the Kaiser Family Foundation in South Africa among 12-to 17-year-old youths reported that one out of four youths (43% boys) believe that sexual intercourse without the use of a condom is more enjoyable. In rural areas 44% of youths state that buying a condom is embarrassing. Nineteen percent of boys agreed with the statement: "I do not wear a condom when I have sex with my partner; it is her responsibility to take precautions." In 2003 Pettifor *et al.* (2004) found that 52% of sexually experienced youth reported using a condom at their last sexual intercourse. No significant differences could be

found between sexually experienced men and women in the 15- to 19-year-old category regarding condom use. However, young women in the age group 20-24 were less likely to report condom use in their last sexual intercourse experience (44% women vs. 57% young men) (Pettifor *et al.*, 2004). Overall, Pettifor (2004) and colleagues found that the majority of the youth (87%) reported that they were without doubt able to access condoms when they were needed. According to Tillotson and Maharaj (2001), who studied adolescent males in the Durban area, the use or non-use of condoms is determined by the level of trust in the dating relationship.

In conclusion, the high prevalence rate of the non-use of condoms among especially adolescent males is a great concern for researchers. Rural studies in the Transkei and Bophuthatswana regions in South Africa show high prevalence rates of sexual intercourse and low use of prevention methods (Kau, 1991). Research data on Western Cape rural adolescent males are difficult to find. More research is thus needed in this area for a better understanding of rural youth sexual risk-taking behaviours.

These statistics further indicate the high risks that adolescents take in early participation in sexual intercourse. Adolescent males are especially vulnerable to HIV/AIDS or other sexually transmitted diseases, as they are usually the initiators in sexual relationships and engage at a younger age in sexual intercourse than female adolescents. However, there is a need to collect more accurate data on the age of first sexual intercourse of rural adolescent males and the range and frequency of their sexual behaviours.

Most studies conducted thus far used the KABP method to explore adolescent sexual behaviour. In the next section I will give an overview of the studies conducted in South Africa and the results of these studies.

3.4. Attitudes to, and knowledge and perceptions of, HIV/AIDS and sexually transmitted diseases

According to a review of Leclerc-Madlala (2002) on the present situation of HIV/AIDS and youth research in South Africa, most of the studies conducted in the 1990s were survey based. The studies reviewed were predominantly focused on determining the levels of knowledge, condom use and assessment of the prevalent attitudes towards HIV/AIDS (Leclerc-Madlala, 2002). Researching adolescent vulnerability in sexual risk-taking behaviours, most South

African studies have adapted the widely utilised Knowledge Attitude Belief Practice (KABP) method (Tillotson & Maharaj, 2001). Over one hundred KABP studies have been conducted in South Africa thus far (Kelly & Ntlabati, 2002).

Although the majority of studies conducted thus far researched the KABP of young adolescents relating to HIV/AIDS and sexuality, relatively few studies took as their unit of analysis specifically young men or adolescent males. In Kau's (1991) study her primary objectives were to understand the attitudes of adolescent men towards contraception, their use of contraceptives and their attitudes towards premarital pregnancy. Richter and Swart-Kruger (1995) were particularly interested in ascertaining the knowledge, attitudes and behaviours of adolescent men and street children relating to HIV/AIDS.

Research reviews and other studies indicate that, although adolescents and young people are aware of the HIV/AIDS epidemic and the prevention methods that go with it, their specific knowledge about HIV/AIDS was unconvincing (Varga, 2001; Eaton, Flisher & AarØ, 2003; Kaaya, Mukoma, Flisher & Klepp, 2002; Levine & Ross, 2002; Leclerc-Madlala, 2002). Although adolescents are well informed about the general aspects of HIV/AIDS, there is still confusion among adolescents regarding the difference between HIV and AIDS, with fewer than 50% who know how HIV and AIDS are related to each other (Varga, 2001; Eaton *et al.*, 2003). Levin and Ross (2002) found that even young people in tertiary institutions were not well informed about the technical details about HIV/AIDS, but were more aware of the means of prevention through the media, 'ABC' campaigns and peer group information.

AIDS myths are also commonly found among adolescents. Varga (2001) reports that young people still believe that mosquito bites and the sharing of utensils can lead to infection. Misconceptions among adolescents include the beliefs that condoms are re-usable and that they can disappear into the woman's body with penetration and lead to serious repercussions (Eaton *et al.*, 2003). Eaton (2003) and colleagues further emphasise the denial that also exists, particularly in rural communities, relating to HIV/AIDS.

In conclusion, the reviewed studies indicate that, although adolescents are well informed about the transmission of HIV/AIDS and other sexually transmitted diseases, there is still a great need for education programmes to be enforced in training adolescents about what HIV/AIDS entails and the best means of prevention. Additionally, Varga (2001: 188) also

argues that "there is a clear need for greater attention to elucidating whether and why gender differences in HIV/AIDS knowledge and awareness exist among African youth." Furthermore, there is a great need to explore male adolescents' knowledge pertaining to the sexual and reproductive health consequences of risky sexual behaviours, as well as their beliefs regarding such behaviour (Varga, 2001).

3.5 Social Influences

Instead of just focusing on risky sexual behaviours, knowledge, perceptions and attitudes regarding adolescent sexual behaviours and related diseases, researchers also started concentrating on the social factors that influence adolescent sexual behaviours (see MacPhail & Campbell, 2003; Salo, 2002; Harrison, Xaba, Kunene & Ntuli, 2001).

In a research study in Summertown, KwaZulu-Natal, MacPhail and Campbell (2001) explored how adolescents construct their sexuality, with the emphasis on social factors/influences that make young people susceptible to HIV infection, and also to comprehend the context within which prevention programmes will be implemented. The social factors that were investigated include the perceived risk of HIV infection, peer norms around sexuality, the availability of condoms, the economic context within which adolescents live and the role of gendered power relations (MacPhail & Campbell, 2001). The focus on context and gendered relations is also evident in a current study by MacPhail and Campbell (2003), where the aim was to increase the understanding of the influences on adolescent masculine sexuality in terms of HIV prevention in Gauteng, South Africa. MacPhail and Campbell (2003) highlight a number of factors, including individual-level perceptions of health and vulnerability, community-level factors such as peer and parental pressures, and wider social influences such as the social construction of male sexuality and gendered power relations. In addition, this research also highlights the role of socio-cultural and economic constraints on adolescent masculinity in South Africa.

In the next section I will discuss some of the social influences that were explored by previous researchers. Specifically, I will be focusing my attention on the impact of these social influences upon young adolescent men's construction of a masculine sexuality.

3.5.1 Perceived vulnerability

Eaton (2003: 157) and colleagues argue that "[l]ow perceived personal vulnerability is a risk factor because it reduces the motivation to take the necessary precaution" to protect one from acquiring HIV/AIDS or any other sexually transmitted diseases.

Researchers have shown that young men perceive their risk of becoming infected with the HI-virus or other STDs as very low (Eaton *et al.*, 2003; MacPhail & Campbell, 2003; Nxioka, 2001; Harrison, 2002). Harrison (2002: 46) argues that adolescent boys' perception of being at low risk is due to "a feeling of invincibility." Nzioka (2001) showed in his study in Kenya that, although boys fear being infected with the HI-virus, having a sexually transmitted disease for a short period of time is linked to proving their masculinity and being sexually active. Nzioka (2001) further argues that boys use erroneous strategies to prevent them from acquiring the HI-virus. These include having sex with young schoolgirls, avoiding flirting with 'loose girls', identifying HIV-carriers by their weight as being too thin and avoiding having sex with any prostitutes (Nzioka, 2001).

Furthermore, South African young men tend to view HIV/AIDS as a disease of the 'other' (MacPhail & Campbell, 2001). MacPhail and Campbell (2001) argue that by 'othering' the disease, young men identify out-groups, such as homosexuals and prostitutes, who are more likely to carry the disease. In addition, adolescent men also deny the existence of the disease in their communities (MacPhail and Cambell, 2001). This can also be assigned to the stigma surrounding the disease, especially in rural areas. This psychological defence leads to young men perceiving themselves as being invulnerable and not at risk of being infected with the HI-virus (MacPhail & Campbell, 2001).

Gupta (2000) argues that both men and women are vulnerable to being infected with the HI-virus. With the focus on males, Gupta (2000) asserts that men are vulnerable because:

- 1. Prevailing norms about masculinity, which includes men being informed and experienced when it comes to sex, put them at risk of being infected;
- 2. Men's participation in multiple sexual relations is a further risk indicator;
- 3. The stigma surrounding homosexual men, homophobic attitudes and behaviours as well as violent sexual domination over women increase their risk of infection;

4. Finally, men's self-reliant socialisation and behaviour that prevent them from expressing their emotions and seeking help, if needed, put them at greater risk of becoming infected.

Forman (1999) indicates that women's 'vulnerability' is due to limited opportunities to protect themselves, while men refuse to protect themselves and are thus 'at risk' (cited in Becker, 2001).

Thus, the South African literature indicates that changes in sexual behaviours are linked to a higher perception of vulnerability and personal risk (Eaton *et al.*, 2003). However, the *loveLife* survey done among 12- to 17-year-old youths in South Africa shows that only 33% of youths reported that their chances of being infected are low or very low (Kaiser Family Foundation, 2001). Pettifor *et al.* (2004) show that nationally 35% of the survey sample indicated that they were at no risk of being infected with the HI-virus, while more young women (18%) reported that they were at high risk of being infected in comparison to young men (11%). In addition, the MRC (2002) reported that nationally 13.7% of young men in South Africa indicated a chance of becoming infected with the HI-virus. In the Western Cape 14.9% of adolescent males indicated a chance of their becoming infected with the HI-virus (MRC, 2002).

loveLife emphasises that there is a doubt among adolescents of any personal risk of their being infected with the virus (Kaiser Family Foundation, 2001). Participation in high-risk sexual behaviours increases the risk of South African adolescent men becoming infected with the HI-virus or STDs, negating their unrealistically low perceived vulnerability and risk of being infected.

3.5.2. Media interventions

The South African media, especially through television programming, should be applauded for their endeavours in targeting and educating young adolescent men and women on issues pertaining to sexual and reproductive health. Programmes that have been successful thus far include: (1) *Soul City*, which through the medium of television reaches more than 12 million South Africans, (2) *Soul Buddyz*, also via television targets children younger than 12 years and, (3) *loveLife*, using a multidimensional approach from television, radio, billboards and

many more reach and educate their target group of 12- to 17-year-old adolescents (SAHR, 2000).

However, these educational programmes, and especially *loveLife*, have been receiving criticism in the past two years. LeClerc-Madlala (2002) argues that, although *loveLife's* endeavours are praiseworthy, many youths admit that the messages that *loveLife* conveys are not easily interpretable and also confusing. She further argues that these messages and the "style of the campaign is too sophisticated to be useful to the average South African young person in need of clear, straightforward information on sexual matters" (LeClerc-Madlala, 2002: 27).

In addition, Templeton (2003) argues that *loveLife's* construction of gender in their campaigns is too narrow and problematic. Women are constructed as the passive sexual victims who are in need of empowerment and men are sexually dominant and active beings with uncontrollable sexual urges. Templeton (2003) further argues that *loveLife's* 'heteronormative' value system does not allow one to explore the social context within which sexual relations occurs or the impact of the socio-economic context on sexual relationships.

Changes in social context, for example, the media's display of sexuality, influence adolescent sexual behaviour (Dacey & Kenny, 1997). *loveLife*, according to the reviews mentioned, does not allow for any exploration of individual sexual identities and ignores the structural inequalities that exist within sexual relationships. It should be emphasised that adolescents in poor rural areas sometimes lack the necessary resources to receive any form of sexual and reproductive health education via any form of media display. Eaton, Flisher and Aaro (2003) express the need for other alternative campaigns to reach these disadvantage adolescents.

3.5.3. Parental and adult influence and communication

The *loveLife* study (Kaizer Family Foundation, 2001) reported that most parents are concerned about the spread of HIV/AIDS among young adolescents. However, the majority of parents in South Africa do not necessarily agree that open communication about adolescent sexual and reproductive health will increase safer sexual behaviours (*ibid*, 2001) Brooks-Gunn and Furstenberg (1989) argue that parents and adolescents are uncomfortable about discussing issues pertaining to sexual behaviour. Poor communication between parents and adolescents is thus associated with a high increase in risky sexual behaviours.

Adolescents also reported that the use of contraceptives is usually done secretively in order to avoid their parents finding out about their sexual activities. Kau (1991) reported in her study with male adolescents that 63% of the respondents never discussed the use of contraceptives with their parents. Some of the respondents in Kau's (1991) study even avoided raising the issue to avoid being punished. MacPhail and Campbell (2001) concur with Kau (1991) that adolescents do avoid discussing contraceptive use and sexual matters with parents out of fear of punishment. MacPhail and Campbell (2001) argue that adolescents' fear of parents finding out about their sexual behaviours not only reduces the use of contraceptives, but also increases their high-risk sexual behaviour. In addition, it is indicated by young adolescent men that the use of condoms is a waste of time (MacPhail & Campbell, 2001). It is further reported by adolescent men that they do not use condoms because parents and adults disapprove of adolescent sexual behaviours (*ibid*, 2001).

Lower rates of condom use and increased sexual activities among adolescents are further reported in especially the rural areas (Eaton *et al.*, 2003). Eaton and colleagues (2003) reported that mothers in rural areas are unable to control their daughters' sexual behaviour and thus put them on injectable contraceptives. Young people also receive advice from staff at health clinics to go on injectable contraceptives or the pill, ignoring the risk these adolescents run of contracting the HI-virus or other STDs. Simultaneously, young people report low privacy and confidentiality in public clinics in small communities. It is argued that health officials in small communities usually gossip, scold or mock young people for requesting condoms and they are further embarrassed in front of everyone (Eaton *et al.*, 2003).

Thus it seems that, although parents and adults do acknowledge the risk of HIV/AIDS to adolescents, parents and adults still choose to ignore the fact that adolescents do participate in risky sexual activities. Parents and adults use gossip and punishment to constrain adolescent sexual activities. Due to the restrictions adolescents experience regarding their sexuality, and the vague injunctions they receive from parents, adolescents participate secretively in high-risk sexual behaviours.

3.6. Gender (masculine) influences

3.6.1. Peer pressure and gender (masculine) norms

Mac an Ghaill (1994) argued that the networks of young men's peer groups are one of the most contesting arenas in which masculinities are regulated and produced. Exploring young masculinities in a British secondary school, Mac an Ghaill (1994: 97) found that "the problematic nature of young men's heterosexuality manifested itself in terms of peer group pressures, ambiguities, confusions and contradictions." Young men's sexuality becomes the operative target of verbal abuse as sexuality is systematically selected within male peer groups as the critical component in achieving a 'respectable' masculinity (Mac an Ghaill, 1994).

Studies that focused on peer pressure in South Africa were mostly done among black youths (Eaton, Flisher & Aaro, 2003). Young adolescent males are under enormous pressure to prove their masculinity through their sexual prowess. This entails being heterosexually active and having multiple sexual partners (Eaton, Flisher & Aaro, 2003; MacPhail and Campbell, 2003; Kungu *et al.*, 2003). Gender discrepancies among peers further allow approval of men having multiple sexual partners, but restrict women to only one steady partner. Young men who prove to be sexually active also thereby attract a form of admiration and status among their peers (Eaton *et al.*, 2003; Hyde, 1990). Non-sexually active adolescent men may feel isolated and thus pressured into initiating sexual activities in order to be part of the in-group when peers are discussing their sexual activities and experiences (Macleod, 1999; Lesch, 2000; Hyde, 1990). Leach (2002) argues that boys who are pressured to conform to a dominant heterosexual form of masculinity not only coerce young females sexually, but also increase their likelihood of becoming infected with the HI-virus.

Adolescent males are also inculcated with negative peer norms and values that make them vulnerable to be infected with the HI-virus or other sexually transmitted diseases (MacPhail and Campbell, 2001). MacPhail and Campbell (2001) illustrate in their study in Summertown, KwaZulu-Natal, how the use of condoms with a casual partner was permissible within peer groups, but discouraged in steady relationships.

Thus it seems that much of the literature emphasises the 'negative' influences of peer pressure and norms on adolescent men's initiation into risky sexual behaviours. The achievement of a

dominant masculinity within peer groups is highly valued and thus makes young men vulnerable in exploring risky sexual behaviours at an early age. Pursuing and thus proving a heterosexual masculinity becomes the ultimate goal for the developing adolescent man. However, it is also argued that positive role models within peer groups and among the adult population can prevent adolescents from participating in early risky sexual behaviours.

3.6.2. Constructing a masculine heterosexuality

[S]exual performance is one of the crucial arenas in which masculinity is enacted, and because ... heterosexual masculinity hinges on demonstrable sexual orientation and distancing from perceived femininity, performance can challenge the essence of masculinity, can confront men with the possibility that they are not 'real men' (Kimmel, 1989: 19).

Central to young men's struggle to be masculine is their sexuality (Holland *et al.*, 1994; Jaffe, 1998). In the above quotation Kimmel (1989) emphasizes the importance of sexual performance for young men in achieving a heterosexual masculinity. Wight (1994), for example, showed that vaginal sexual intercourse was constructed by his respondents as a core element of masculinity. For young men, proving a heterosexual masculinity is further intensified with the HIV/AIDS epidemic through which young men publicly label themselves as heterosexual instead of being stigmatised and discriminated against as being gay. Shefer and Ruiters (1998: 39) quote Mcfadden (1992) who states that "[h]eterosexual sex is essential in the realisation of maleness, in the social mobility of the male from boy to man, to father, to head of household, to decision-maker, to man." In a similar vein, Forrest (2000) argued that proper manhood entails having sexual competencies in sexual intercourse with women. Thus, being a 'real man', it seems, means not being homosexual or feminine but, instead, performing in heterosexual intercourse.

The achievement of a masculine status among peers for young men, and the importance of heterosexual intercourse in their endeavours to become masculine, led theorists to study the construction of masculinity in more detail (see Connell, 1995, 2000; Morrell, 1998, 2001). It is only in recent years that gender/feminist theorists and queer theorists have started to problematize the concept of masculinity (Reddy, 1998; Holland *et al.*, 1994). The interest in heterosexual masculinity/masculinities was stimulated by the dramatic increase of HIV/AIDS

among especially young women⁴. The importance of a heterosexual status and performance are indicative of how gender (masculinity) intersects with sexuality and vice versa. A deeper understanding of masculinity, especially its construction, is thus needed.

Gender, and thus masculinity, is socially constructed. In other words, boys are not born men; they become men (Kimmel & Messner, 1989). Connell (1995: 71) argues that:

Masculinity [...] is simultaneously a place in gender relations, the practices through which men and women engage that place in gender and the effects of these practices in bodily experiences, personality and culture.

At the same time, masculinity is constructed differently in various cultures, contexts and historical periods (Connell, 2000). In a multicultural society such as South Africa, multiple constructions of masculinity can be expected (Connell, 2000), especially in institutional contexts such as school settings. In addition, masculinity issues in South Africa are powerfully connected with the history of our country (Morrell, 2001). The integral role history plays in the construction of different masculinities, especially in South Africa, is evident in the book edited by Robert Morrell (2001) *Changing Men in Southern Africa*. Multiple masculinities have thus become the reference point of most masculine studies.

Although there has been a surge in studies that explore adolescent sexuality within South African schools, a limited number of research studies actually explore how gender and especially masculinity is constructed among boys (Morrell, 2001). Gendered identities are predominantly shaped through school processes, notwithstanding the fact that masculinity is not produced in a deterministic and direct fashion within schools, but entails a process of negotiation, acceptance, rejection and ambivalence (Mac an Ghaill & Haywood, 1997). Masculinities are produced due to the schools' interrelation with other institutions such as the family and religion. Morrell (2001: 140) asserts that "[there] is a danger in seeing schools simply as Althusserian state apparatuses fulfilling a class and gender reproductionist function". During the South African apartheid period, for example, schools were the driving force behind the downfall of the apartheid system (Morrell, 2001).

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⁴ UNAIDS (2004) estimated that by the end of 2004, for example, 2.3 million people in Sub-Saharan Africa died of AIDS and 3.1 million people were newly infected. It is estimated that 6.9% of women and 2.2% of men were living with HIV in the age group 15 to 24. In South Africa, of the 5.3 million people infected, 2.9 million people are women (UNAIDS, 2004).

What is evident, Mac an Ghaill (1994) argues, is that masculine subjectivities are developed within the school context, where they are practised as transitional sexual and gendered identities. In this process of developing gendered and sexual identities, groups start to define the meaning of their masculinity above others, hence creating the domination-subordination dichotomy (Mac an Ghaill, 1994).

In acknowledging the existence of multiple masculinities, Connell (1995) coined the term 'hegemonic masculinity.' The notion of 'hegemony' is derived from Antonio Gramsci's classical analysis of class relations in which cultural dynamics are used by one group in order to sustain power within that society. Connell (1995: 77) defines hegemonic masculinity as:

[T]he configuration of gender practice which embodies the currently accepted answer to the problem of the legitimacy of patriarchy, which guarantees (or is taken to guarantee) the dominant position of men and the subordination of women.

Morrell (1998: 608) concurs with Connell (1995) that hegemonic masculinity emphasises the co-existence of multiple masculinities and is thus indicative of the power and privilege that is bestowed upon men who adopt it and affirm it as their own. Hegemonic masculinity is at the epicentre of women's subordination. It is also in pursuing a hegemonic masculinity that young men use heterosexual intercourse to ascend from boyhood to manhood (Connell, 1995; Shefer & Ruiters, 1998).

The hegemonic form of masculinity is not static, but is always contestable. Connell (1995, 2000) identifies three other forms of masculinity that are oppressed by hegemonic men in one culture, yet are also privileged through the existence of a hegemonic masculinity, i.e. the mere fact of being a man. These other forms of masculinity include: complicity, marginalisation and subordination. Complicity in relation to the hegemonic masculine involves those men who privilege from the patriarchal dividend and thus gain from the hegemony of men and the subordination of women. In general one can argue that all men are advantaged due to the subordination of women. But such an argument will be naïve and many feminists will highlight women of power, thus indicating a complication in power relations (Carrigan, Connell & Lee, 2002). Exploring, for example, adolescent sexuality in a coloured township in the Cape Flats, Salo (2002) indicated that coloured women were in relatively powerful

economic positions vis-à-vis coloured men in the apartheid era due to the racialised regional economy of the Western Cape. But although coloured men were economically disempowered, they still benefited from the existence of the hegemonic masculine status and the patriarchal dividend. These men are never at the frontline of the enactment of a hegemonic masculinity, but enjoy the comforts of being a man and are thus complicit (Connell, 1995).

Marginalised masculinities refer to the relations between masculinities in subordinated and dominant ethnic groups (Connell, 1995). Connell (1995) highlights the integral role that race plays in the dynamics of masculinities. The coloured men in the South African context have always been politically and economically marginalised, which in turn, according to Moolman (2004: 110), "influenced the construction of a violent, sexualised masculinity" on the Cape Flats. The majority of South African men were marginalised in the apartheid era due to the positioning of dominant white heterosexual males (Salo, 2002). Yet, coloured men's position was always ambivalent, even in the new South Africa. The historical first democratic elections in South Africa, questioned the coloured identity, and even more so, the coloured vote in the Western Cape⁵. In essence, coloured men and women were subjugated both in the apartheid and post-apartheid era of South Africa to stereotypical racism (Salo, 2002). Salo (2002: 406- 407) asserts that:

[D]ominant racial meanings of colouredness equated coloured women's sexuality with degraded, immoral, undisciplined sexuality commonly associated with 'racial impurity'. Coloured men and women were seen as emasculated, promiscuous, thieving, drunken, amoral, and unable to support a family (sic)

This stereotypical racism still haunts many coloured men and women today. Within this context young coloured men who grow up in predominantly coloured communities need to grapple with the idea of being marginalised in a country where freedom is promised to all.

Finally, as hegemony relates to cultural dominance in any society, subordination to any dominant group is expected. In this category homosexuals usually fall into the subordinate

⁵ See Wilmot, J., Caliguire, D., Cullinan, K. (1996). Now that we are free: Coloured communities in a democratic South Africa. IDASA, Cape Town. In this book the position of coloured communities in the new South Africa is discussed and debated by various well-known South Africans, including Peter Marais and Ebrahim Rasool. Coloured identity and coloured consciousness are especially under the spotlight. These debates came after the Western Cape was won by the National Party instead of the African National Congress. As coloured people are the majority in the Western Cape, this surprising vote for the party that oppressed them lead to the debates around coloured identity. In the apartheid era coloureds were classified as being 'black' and in the new South Africa coloureds were surprisingly seen as 'white' and were viewed as part of the oppressors instead of the oppressed.

group of masculinities (Connell, 1995, 2000; Kimmel, 2000). This also finds expression in the sexual verbal abuse that young men receive from other dominant men in schools, namely being called a 'wimp' or a 'sissy'. In the South African coloured vernacular the term will be 'moffie' for men who act in ways that is not regarded as masculine. Young men who are not homosexuals, but display effeminate behaviour or do not subscribe to the dominant view of masculinity in that culture and institution might also be situated in the subordinate masculinity category. In the next section of this chapter I explore gay masculinity in more detail and look at how a masculine gay/homosexual identity are perceived in the African context

This chapter has highlighted how important heterosexual intercourse is for young men or men in general to prove their masculinity. The elements at play, as mentioned by Mac an Ghaill (1994), in the construction of a (dominant) masculinity include compulsory heterosexuality, homophobia and misogyny. Young men prove their masculinity in performing and "engaging" in heterosexual intercourse. The pressure to prove one's masculinity impacts negatively on women's sexual health and leads to misogynist young men. In the process young men who do not conform to the masculine expectations of that community or culture might be ridiculed and verbally sexually abused and be the victims of homophobic reactions. Coloured men's marginalised status in the South African context makes them vulnerable to having to prove their masculinity in other ways, such as heterosexual intercourse and gang violence, which might be options out of the situation they find themselves in. Thus, when exploring young coloured men's construction of a masculine sexuality, the historical and cultural dimensions of the construction of masculinity and sexuality should be borne in mind. There are only a limited number of studies on coloured men's constructions of masculinity and there is thus a need for further research.

3.6.3. Masculine homosexuality and homophobia

Oppression positions homosexual masculinities at the bottom of a gender hierarchy among men. Gayness, in patriarchal ideology, is the repository of whatever is symbolically expelled from hegemonic masculinity (...). Hence, from the point of hegemonic masculinity, gayness is easily assimilated to femininity. And hence - in the view of some gay theorists - the ferocity of homophobic attacks (Connell, 1995 78-79).

Someone who is homosexual prefers to have sexual interaction, intimacy and interpersonal relationships with members of their own sex (Dacey & Kenny, 1997). Men are usually

identified as gay and women as lesbians. Homosexual behaviour can be defined as sexual behaviours in which the individual is sexually attracted and sexually aroused by members of the same sex (Dacey and Kenny, 1997).

In the 1993 Janus report in the United States Cynthia Janus surveyed 3000 adults, of who 22% of males answered yes to having had at least one homosexual experience. In the US almost half of the adolescent boys had engaged in some homosexual activity, of which 8% were exclusively homosexual (Dacey & Kenny, 1998). According to DeLamater and Friedrich (noted in Dacey & Kenny, 1998), 5-10% of American adolescent men have already participated in one homosexual experience. In South Africa studies focusing on adolescent homosexual behaviour are scarce, even non-existent (Nel, 2003).

Bujra (2002) argues that men's key challenge in achieving a hegemonic masculinity is homosexuality. In African countries governments insist that "homosexuality is an alien and non-African 'perversion'" (Bujra, 2002: 216). In countries such as Uganda, Zimbabwe and Kenya homosexuality is viewed as a criminal act (Bujra, 2002). In South Africa homosexuality has been legalised in line with the new democratic South African government's Constitution (Reddy, 1998). The dominant heterosexuality is thus open to be freely challenged and heterosexism is now publicly contested. However, what constitutes homosexual/gay masculinity is still unclear.

Reddy (1998) gives one possible interpretation of what gay masculinity is all about. Reddy (1998) states that:

One possible interpretation is that gay masculinity hints at a collection of ideas, attitudes and assumptions which culturally determine the way gay men view themselves as *men.* ... Put simply, gay masculinity in South Africa is a gender issue; if sexism is a problem, then heterosexism is a related problem (*emphasis added*).

Connell (1992) highlights the fact that for many people (men especially), homosexual men negate the ideal of masculinity and are thus regarded as unmasculine or effeminate. Kimmel

⁶ This public challenge and fight for homosexual rights is evident in the recent Bloemfontein ruling that gays and lesbians have the right to get married under the Constitution of South Africa. Refusing homosexual weddings discriminates against people on the basis of their sexual orientation.

(2000) concurs with Connell (1992) and argues that homosexuals are usually viewed as gender 'nonconformists' and lesbians are regarded as butch/masculine and gay men as feminine. The argument that one's sexual behaviour, whether gay, straight or bisexual, plays an integral role in the construction of one's masculinity, just emphasises again how sexuality intersects with gender and how one's sexuality actually confirms one's gendered identity (Kimmel, 2000). Constructing a masculine or gay homosexuality is further complicated by homophobic reactions.

Homophobia is usually associated with the fear of male homosexuality, but is not a classified mental illness (Lehne, 1989). Lehne (1989) argues that homophobia can be viewed as a form of intimidation used by society in order to impose social conformity on the male role and thus police or control what is considered as acceptable masculine behaviour. According to Plummer (2001), homophobia in the school context targets those boys who do not conform to their peers' collective construction of a dominant masculinity. Homophobia, according Plummer (2001), is gendered. This might be due to the power relations within the male peer cultures intended to regulate masculine behaviours.

Nel (2003) explored the experience of homosexual learners in schools in the Gauteng area of South Africa. He concluded that South African society and schools, on a macro level, are homophobic, patriarchal and heterosexist (Nel, 2003). Nel (2003) further add that hegemonic constructions of manhood among boys that are proven through sexual dialogue are misogynist and homophobic in nature. Connell (1992) argues that homophobia was historically produced along with heterosexual masculinity.

In conclusion, Reddy (1998: 70) states that, especially in the South African context, "gay masculinity challenges the dominant view of masculinity not by opposing it, but in the way it allows gay people to mediate relationships between individuals, and among the social and political institutions that are legitimised through the Constitution." Although these political perspectives of a gay masculinity might be applicable to gay adult men in South Africa, these perspectives do not help young men in schools who are gay or confused about their sexuality to establish or achieve a 'respectable' masculinity. In schools masculinity can only be achieved through heterosexual intercourse and performance. Those young men who deviate from the norm are vulnerable to homophobic verbal and physical attacks. Connell (1992: 737) states that most gender theorists miss the significance of a gay masculinity and adds that:

In our culture, men who have sex with men are generally oppressed, but they are not definitively excluded from masculinity. Rather, they face structurally-induced conflicts about masculinity – conflicts between their sexuality and their social presence as men, about the meaning of their choice of sexual object, and in their construction of relationships with women and with heterosexual men.

Adolescent men experience a lot of degradation and humiliation and usually have problems in understanding their own sexuality if they are the recipients of homophobic attacks or verbal sexual abuse. These adolescents are usually ignored in studies of adolescent sexual behaviour, which only further perpetuates gender discrimination in sexual research. In this study I attempt to gain an in-depth understanding of how both sexually active and non- active adolescent men construct their sexuality. It is usually non-sexually active men who are on the receiving end of homophobic attacks, because they do not participate in early heterosexual intercourse. An understanding of how these young men construct adolescent male sexuality is thus needed.

3.7. Conclusion

Adolescent male sexuality is innately secretive; nevertheless, adolescent men's sexual behaviour is currently under public scrutiny and is being problematised. Early adolescent men's participation in sexual intercourse and the low levels of condom use in these sexual interactions make young men and women vulnerable to contracting the HI-virus. The risk of being infected is further increased by the pressures of achieving and performing a masculine sexuality. As highlighted by Mac an Ghaill (1994), the pursuit to achieve a hegemonic masculinity by young men ultimately includes elements of homophobia, heterosexism and misogyny. The aim of this study is to understand how young men in rural areas construct a masculine sexuality. In the next chapter, I will delineate the methodology that was used in this study to explore the sexuality of adolescent men.

Chapter 4

Research Methodology

4.1. Research aims

The main purpose of this study is to explore and understand how young rural coloured men construct their sexuality in a rural community in the Langeberg district of the Western Cape.

4.2. Secondary research aims

- 1. To determine the range and extent of sexual behaviours that young men engage in;
- 2. To explore the high-risk sexual behaviours adolescents engage in;
- 3. To explore the sexually active men's experience and construction of their sexuality and sexual behaviour;
- 4. To explore non-sexually active men's experience and construction of their sexuality.

4.3. Research Design and methods

This research was conducted between April 2004 and October 2004 in a community in the Langeberg district of the Western Cape, South Africa. The aim of the study, as mentioned before, was to explore how young adolescent men construct their sexuality in a rural community. Various methods were incorporated in order to understand this sensitive and delicate issue. With a quantitative approach, self-administered questionnaires were used to explore adolescent sexuality. This was followed up with a qualitative method using semi-structured interviews to explore the subjective experiences and constructions of sexuality by sexually active and non-active adolescent males.

Adolescents are at special risk of being infected with the HI-virus. In fact, the UNAIDS (2003) reported that adolescents in South Africa are the most vulnerable in the world to being infected with HIV/AIDS. The adolescents selected in this study were enrolled in a public secondary school in a rural community in the Langeberg district of the Western Cape, South Africa.

The focus was on young coloured adolescent males. There is a shortage of information in the South African literature that focuses especially on coloured adolescents' sexuality. Reviewing the literature regarding adolescents' knowledge pertaining to HIV/AIDS in South Africa, Eaton and Flisher (2000: 109) found that studies that focused on "White only or Coloured only groups were uncommon."

In the following section I first elaborate on the use of the quantitative method in this study. This is followed by a detailed discussion of the qualitative method used in this research.

4.4 The quantitative research paradigm

The quantitative approach continues to dominate behavioural and social science as a paradigm of 'positivism'. The quantitative methodology is used when one begins with a hypothesis or research question and tests for confirmation or disconfirmation of that hypothesis or research question with empirical data that can be statistically analysed (Newman & Benz, 1998; Reaves, 1992). The procedure of quantitative methods is thus a deductive method of theory testing. Researchers using a predominantly qualitative approach criticise the quantitative approach for emphasising that there is a common reality on which people agree and for insisting that the researcher approach the object of studying in a supposedly objective and neutral manner (Bremridge, 2000; Newman & Benz, 1998). Another great limitation of this approach is that, although it does not deny people's personal experiences, the significance of the richness, depth and individual meaning of personal experience of the people who live them may be sacrificed.

In understanding a delicate topic such as sexuality, quantitative methods enhance privacy and anonymity under appropriate conditions, for example, using self-administered questionnaires, and it is also inexpensive in group situations (Catania, Gibson, Chitwood & Coates; 1990). In the following section I will discuss self-administered questionnaires as a quantitative method in exploring the range and frequencies of adolescent coloured men's sexual behaviour and sexuality.

4.4.1. Quantitative method: Self-administered questionnaires.

Sexuality and sexual behaviour are core issues in HIV/AIDS and reproductive health matters. Researchers struggle to obtain valid and reliable information regarding people's sexual behaviour, due to the sensitive nature of this topic (Gribble, Miller, Rogers, & Turner 1999;

Nichols, Durrheim & Tredoux, 1994). Consequently, researchers in this field are left with the self-reporting of participants' sexual behaviours.

Instead of using self-reports in face-to-face interviews in sex research, it has been suggested by a plethora of researchers (e.g. Nicholas, Durrheim & Tredoux 1994; Cantania *et al.*, 1990) that self-administered questionnaires be used as a means to obtain more accurate responses from participants. A self-administered questionnaire allows the participants to answer questions in the privacy of their own homes, and knowing that the information given is confidential and anonymous increases the reliability and validity of the research.

Reliability, Mouton (1996) argues, could be viewed as a synonym for consistency and stability over time. This means that the same research instrument should be able to capture identical responses at different times from different research participants. Reliability should be viewed as a precondition for measuring validity (Mouton, 1996). Validity can be viewed as a synonym for the 'best approximation to the truth' (Mouton, 1996).

The aim of this chapter is to identify measurement errors that could contaminate the validity and reliability of this research. In the following sections I will first discuss why I used a self-administered questionnaire and then I discuss how I increased the reliability and validity of this self-administered questionnaire.

4.4.1.1. Why self-administered questionnaires?

Self-administered questionnaires (SAQs) allow respondents to pace themselves and allows them more privacy, confidentiality and anonymity in answering the questionnaire, as well as greater flexibility in deciding on the information. It also allows them to feel more at ease and not threatened by how people might judge them for any deviant behaviour.

A disadvantage of SAQs is that the researcher cannot make appropriate adjustments when respondents refuse to answer questions or report inconsistent information. In addition, some respondents may not understand the 'skip patterns' designed to elicit information from certain individuals only (Wagstaff *et al.*, 2000; Gibble, Miller, Rogers & Turner, 1999).

In the tradition of previous researchers, I developed a self-administered questionnaire after I consulted various sources and relevant literature on this topic (Bremridge, 2000; Cleland, 2003;

De Gaston, Weed & Jensen, 1996; Lesch, 2000). The questions were translated from English to Afrikaans and were divided into sections, which included demographic information, questions pertaining to the person's sexuality, and also questions about personal opinions they might have about their sexuality, gender and norms. The questionnaire included open-ended questions, multiple-choice questions and close-ended yes or no questions. The open- and close-ended questions, as well as the multiple-choice questions are formulated to elicit information regarding the respondents' knowledge and beliefs about their sexuality, the range and frequency of their sexual behaviour and their contraceptive use (Bremridge, 2000; Cleland, 2003).

As this is a newly developed questionnaire, no validity and reliability studies have been conducted to ensure that measurement errors do not contaminate this research study. Instead, a pilot run of the questionnaire was conducted in April 2004 in a similar rural community to increase the reliability and validity of the information received. In addition, I applied certain measures that will minimize the effect of any confounding variables that might influence or contaminate the research results. In what follows I give a summary of what validity and reliability entail and the effect this has in research on sexuality. I also discuss the procedures I followed in order to minimize measurement errors in this study.

4.4.1.2. Reliability of the self-administered questionnaire

Researchers are particularly concerned about the reliability of self-reported measures in studies pertaining to human sexual behaviour, due to the secrecy and confidentiality of this topic (Cantania *et al.*, 1990; Upchurch, Lillard, Aneshensl & Fang Li, 2002). "On the whole, researchers have concluded that self-reports of sexual behaviours are reliable, particularly when the recall period is short and individuals are asked to recall salient behaviours. However, an uncritical treatment of individual's reports of a sexual behaviour may be unwarranted" (Wagstaff *et al.*, 2000: 31).

In order to increase the reliability of this study, I adopted certain procedures that were followed by previous researchers (Alexander, 1993; Bremridge, 2000; Lesch, 2000). These procedures include administrating a pilot run of the questionnaire in a similar community and thus ensuring that the participants understood the terminology of the questionnaire. This required explaining the purpose of the research to the participants. I informed the pupils that the research is done independently of their school and that neither the principal nor the teachers will have access to the completed questionnaires.

In addition, ample space and physical arrangements of subjects in, for example, school settings, and the administration of SAQs may discourage sharing of information and reduce inconsistencies in self-reported sexual behaviour (Alexander *et al.*, 1993). The questionnaires were administered in small classrooms by me, the researcher, in order to ensure that the context was the same for all the participants (Bremridge, 2000). Ensuring that (1) the context in which the self-administered questionnaire are filled in was the same for all participants, (2) the participants understood the purpose of the research and (3), the information received will be managed confidentially and anonymously, hopefully increased the reliability of this study.

4.4.1.3. Validity of the self-administered-questionnaire

As research in sexuality in the majority of cases consists of self-reported sexual behaviour, data available are of an unknown validity. Self-reports are a reflection of individuals' sexual experiences. Alexander *et al.* (1993) report that vigorous assurance of confidentiality and anonymity of data received might be a means to obtain more valid data from adolescents. In what follows I comment on the measurement indices that Cantania *et al.* (1990) discuss that might influence the validity of the questionnaire.

4.4.2. Measurement error in self-reported behaviour

Measurement error will usually hamper prevention efforts of HIV/AIDS, causing misidentification of at-risk populations and biased estimates of the prevalence of high-risk sexual behaviours (Cantania *et al.*, 1990). Measurement errors include under-reporting, refusal to answer questions, over-reporting and respondents admitting performance, but still under-reporting actual frequency.

4.4.2.1. Over- and under-reporting

Due to the sensitive nature of this topic, adolescents usually over- or under-report the frequency and range of sexual behaviours according to what is socially desirable in the society they live in. For example, males might have the tendency to over-report their sexual behaviour as a means to prove their masculinity or just to be macho. Cantania *et al.* (1990) report that males' over-reporting of their sexual exploits may also be due to developmental factors. One of these factors might include the need for males to be macho and sexually active, as this might be highly regarded in cultures that attach strong values to machismo.

There is currently no accurate validity index to measure when respondents are over- or underreporting their sexual behaviours or sexual frequencies. The operating assumption is that if bias occurs in sexual behaviour studies, it is more likely to be in a downward direction. This assumption originates in the United States (as well as in South Africa), where people view sexual activities as secret, private and "bad behaviour that one should either not be doing or not be doing much of" (Cantania *et al.*, 1990:342).

Cantania *et al.* (1990) further indicate that researchers use different data-collection modes to detect if any over- or under-reporting does occur. In this study self-administered questionnaires were used with face-to-face interviews as a comparison method. In addition, it is emphasised that under- and over-reporting errors are not unique to sex research, but are also found in other health-related fields such as smoking and dietary studies (Bremridge, 2000).

It is suggested that researchers working with adolescents' self-reports of their sexual behaviour use a bogus pipeline in order to minimise over- or under-reporting in their study. This entails informing the participants that, if they lie in any way in the questionnaire about their behaviour, the researcher will be able to detect this in the questionnaire. In order to minimise over- or under-reporting in this study, I informed the students that I will be able to detect when they are telling the truth or when they are not telling the truth.

4.4.2.2. Refusal rates

Refusal rates are the most reported index of measurement error that can occur in sexuality surveys and self-administered questionnaires (Lesch, 2000). Cantania *et al.* (1990) differentiate between those participants who usually complete the questionnaire (the respondents) and those who usually do not complete the questionnaire (the non-respondents). The non-respondents usually include those people who are sexually more inhibited than respondents. Non-respondents also have a lesser degree of sexual experience, are older and have very low levels of comprehensibility (Cantania *et al.*, 1990).

Cantania *et al.* report that refusal rates in self-administered questionnaires completed by adult samples range from 6% - 13% in the assessment of vaginal intercourse. Upchurch *et al.* (2002) report that 5%-12% of adolescents decline to reports on sexual intercourse and this percentage usually varies by race and gender. For items of masturbation the refusal rates range from 6.7% - 19%; they reach an average of 6% in the assessment of number of sexual partners in the past

year (Cantania *et al.*, 1990). In addition, Rogers and Turner (1991) found that in self-administered questionnaires on sexual behaviour male-male contacts were not completed by 19% of males in a General Social Survey, which was conducted by the National Opinion Research Centre (cited in Gribble *et al.*, 1999).

In order to minimise refusal rates in this study, I informed participants how important it is that they should complete the whole questionnaire. The pilot test helped me clarify concepts that participants did not understand and also to identify questions that participants might find embarrassing and thus decline to answer. Giving participants a questionnaire that they fully understood and in which questions are not so direct that they decline to answer increased the completion rate of the full questionnaire by the participants. Of the 231 parental consent forms received out of the 382 consent forms that were given out, 223 learners (96%) of the learners completed the questionnaire and 3.4% either refused to answer the questionnaire or were absent on those days that the questionnaire was administered. The refusal rates for the different sexual behaviours that respondents reported are indicated in the different tables in Chapter Five.

4.4.2.3. Test/re-test reliability

The test/re-test is a means to establish the stability of people's estimates of their sexual behaviour over some interval of time (Cantania *et al.*, 1990). Respondents are given the questionnaire on two different occasions with no changes made to the questionnaire.

Cantania *et al.* (1990) refer to Rodgers's (1982) assessment of tests and re-tests done for adolescence and found that the correlation for items such as masturbation and intercourse were moderately high. In Rodgers's (1982) study inconsistencies were reported and were highest for American Black men relative to their total sample (23% for intercourse and 26% for masturbation in comparison with the total sample which was 7.8% for intercourse and 8.3% for masturbation) (Cantania *et al.*, 1990).

In order to increase the reliability of this study, questions referring to range and frequencies of sexual intercourse and certain sexual behaviours, such as condom use, were asked twice in one questionnaire at two different points in the questionnaire.

4.4.2.4. Respondents' influence on measurement error

Respondent variables usually include properties of the person that influence the task of giving of information. Respondent variables include elements of recall, motivational issues, self-presentation bias and the ability to comprehend what is being asked (Cantania *et al.*, 1990). Memory error usually reflects inconsistencies and invalid data. In what follows I discuss the memory errors that could contaminate the validity of this research.

4.4.2.5 Respondents' memory and recall

The vividness and personal salience of a sexual experience for a person blur over time and thus influence the reported sexual encounter. Cantania *et al.* (1990) reported that individuals with large numbers of sexual partners and varied sexual behaviour repertoire may find it difficult to recall specific sexual acts.

With increases in the length and frequency of occurrence of behaviour, respondents make use of inferential methods in order to compute behavioural estimates (Cantania *et al.*, 1990). Cantania *et al.* (1990) report that *decomposing* and the *availability heuristic* are used to estimate behavioural frequencies of sexual events. Decomposing entails multiplication of a derivative rate of occurrence over a specific time period in order to arrive at a total figure for a longer period of time. The availability heuristic suggests that memories that are stronger and vivid tend to be perceived to occur more recently than in fact they have.

In addition, the longer the distance from the sexual event, the more important role personal salience plays in shaping that which is being reported. Alexander *et al.* (1993) also argue that despite the short recall period, some respondents might have difficulty retrieving information about their sexual behaviour. "It has been suggested that questions demanding enumeration of specific events (for example, life-time sexual activity) often tax the respondents' limits of recall and can result in inconsistent information" (Alexander *et al.*, 1993: 470). In order to decrease the possibility of memory or recall error, I decreased the time-lapse in requesting information on their last sexual intercourse or the frequency of sexual behaviours to the preceding three months.

In addition, I argue that the subjects of this study are still very young and the recall of such a significant event (such as first sexual intercourse) is a more recent event in their lives. Young adolescent males recall this event with ease as it plays an integral role in their lives and is also an important event in proving or maintaining their masculinity.

4.4.2.6. Respondent emotions

Emotional issues may also have a great effect on the accuracy of the reported behaviour. Depending on the positive or negative emotion that the event is associated with, a person's recall of specific sexual episodes may bias the report. Apparently, situations which are associated with positive feelings are usually more likely to be recalled (Cantania *et al.* 1990).

Alexander *et al.* (1993) emphasise the important role the emotional context plays in the reporting of age at first sexual intercourse and the number of sexual intercourse events. It is also to be noted that some adolescents' first sexual experience might have been captured in a sexual abuse incident (incest) or in a form of coercive sexual intercourse. Alexander *et al.* (1993) suggest that adolescents should be asked at what age they first had sexual intercourse *willingly*.

The respondents' first sexual experience is still fresh in their mind, due to the significance of this event for the individual. I argue that, in the reporting of the individual experience, respondents who had positive or negative feelings with their first sexual experience will be willing to share this information due to the fact that the information received is confidential and anonymous and that no one will know what the respondent actually felt with his first experience.

4.4.2.7. Motivation

Upchurch *et al.* (1990) argue that respondents who are highly motivated will put in greater effort to answer and understand the questions than less motivated adolescents, who may 'skim/skip' questions and give more inconsistent answers. Cantania *et al.* (1990) concur that highly motivated participants may try harder in understanding and answering the questions in comparison to less motivated respondents, who will give less thoughtful answers and may skip questions. At present, no reliable information exists in understanding a participants' degree of motivation and the role a respondent's motivation may play as a source of measurement error (Cantania *et al.*, 1990).

The participants in this study all volunteered and I motivated participants by informing them of the importance of this study for the community they live in. In explaining the purpose of the research, I told participants that the research is about sexual behaviours, which will include questions about sexual intercourse, oral sex and masturbation. Respondents got a chance to learn more about the sexual behaviours of men and, if there was anything on the questionnaire that the respondents did not understand, they could write a note on the last page of the questionnaire and

I would inform them what the specific behaviour is all about after the session, without anyone knowing who asked that specific question. In addition, I encouraged participants by telling them that this is a whole hour off their normal school day, and that there will be no teachers in the room that we are using. No students were forced to complete the questionnaire and still had the right to refuse to participate in answering the questionnaire. Those individuals who refused to answer the questionnaire could hand in a blank questionnaire after the completion of the administration of the questionnaire without anyone knowing that they did not complete their questionnaires.

4.4.2.8.. Self-presentation bias

Cantania *et al.* (1990) argue that more significant research is needed on the socio-structural differences in self-presentation bias associated with specific sexual behaviour. Socially deviant behaviour, ethnic differences, sexual orientation and specific sexual behaviour (such as anal sex between heterosexuals or masturbation) may lead respondents to over- or under-report these behaviours due to social and cultural constraints (Cantania *et al.*, 1990).

In order to reduce participation bias, it is suggested that sexual questions be presented in a non-judgmental fashion, with familiar wording included, and response format open-ended (Cantania *et al.* 1990). Bremridge (2000) notes that in her study with young adolescent males participation was more influenced by the respondents' curiosity during administration of the questionnaire and perhaps because they had a break from the normal school routine. In order to reduce participation bias, respondents were continuously informed that participation is voluntary, and that they may refuse to answer or stop participation by handing in an incomplete questionnaire at the end of the session without being noticed.

4.4. Instrument variables

Instrument variables usually include the structure of the questions, terminology, question order and wording. (For a detailed analysis of instrument variables, see Cantania *et al.*, 1990.) The comprehension of the language plays a critical role in describing sexual behaviour and is an important factor in preventing measurement error. The respondents and the researcher should assign the same meaning to the sexual terminology of the instrument otherwise the answers received from the respondents will reflect a high level of measurement error (Cantania *et al.*, 1990).

In order to prevent or minimize confusion of the questions in the questionnaire, many researchers suggest that pre-testing should be done in parallel target populations (Bremridge, 2000; Alexander *et al.*, 1993; Lesch, 2000; Cantania *et al.*, 1990). Alexander *et al.* (1993) suggest further that more intensive focus groups may give greater insight into misconceptions about definitions of, for example, sexual intercourse and the lay terms that might be ascribed to it by adolescents. For the purpose of this study, pre-/pilot testing was done in a similar community as the target population, and the respondents in this pre-testing had an opportunity to discuss which questions or terminology puzzled them and what they understood by these terms with the researcher. In addition, extra definitions of certain terminology that puzzled the respondents in the pilot study were added in the questionnaire for further clarification.

According to Cantania *et al.* (1990), the order of the questions has little influence on measurement error in SAQs. In the final section of this paper I give a brief description of the procedures that were followed in this study.

4.5. The procedure

In discussing the procedure that I followed in order to increase validity and reliability of the study, is it important to take note of the ethical considerations that might have had an influence in this study.

4.6.1. Ethical procedure

Mouton (2001) emphasises that all subjects involve in research studies have basic rights which researchers should respect. These basic rights include:

- 1. The right to privacy (including the right of refusal to participate in the study);
- 2. The right to confidentiality and anonymity;
- 3. The right to informed consent and full disclosure about the research; and
- 4. The right not to be harmed psychologically, physically or emotionally in any manner.

As adolescents fall under the vulnerable group and are more at risk in research studies, special attention should be given to these rights and should be well explained to the participants.

In previous research studies conducted by Bremridge (2000) and Lesch (2000) concerning adolescent sexuality, permission was granted by the Ethical Committee of the University of

Stellenbosch on the condition that informed consent forms (see Appendix C & D) were given to the pupils and that they should be read and signed by each participant. In addition, the Western Cape Education Department (WCED) highlights in circular 0249/2003 that permission should be requested from the Department before any research can be conducted in any public school in the Western Cape. A proposal and a copy of the questionnaire that was used in this study were sent to Dr R.S. Cornelissen at the WCED. Permission was granted to do research in the Langeberg district on condition that parental consent forms (see Appendix B) should be given out that inform the parents of the details of the study.

Thus, following the WCED's request, I received permission from the parents to conduct the study within the school. As mentioned before, 382 parental consent forms were given out and 231 parental consent forms were returned granting permission for their sons to participate in the study. I also received permission from the principal of the relevant school to conduct the study within the school and the timing when the study will be conducted within the school was arranged.

I followed the ethical procedures as requested by the University of Stellenbosch and explained to the participants what the study was all about. This explanation of the study was presented twice, once during a school assembly and again in class before the questionnaires was administered. The young males were constantly reminded that participation in the study was voluntary and that they could refuse to complete the questionnaire. A consent form was included for the respondents (see Appendix C) that was attached at the back of the questionnaire. I read through this consent form and explained the details of the questionnaire. Respondents were again asked for their permission to participate in the study and then requested to sign the consent form, if they did agree to participate in the study. At the end 223 completed questionnaires were received.

4.6.2. The quantitative research procedure

As mentioned before and acknowledging the rights of participants that Mouton (2001) emphasises, I explained and discussed the goal of this research with the participants. I informed the participants of my credentials as a researcher. The participants were informed that the research is being done independently from the school and that no employee of the school will have access to the information received.

Confidentiality and anonymity were guaranteed and emphasised. The village name and that of the learners who participated in the study are kept confidential. The name of their school is also kept confidential. Questionnaires were placed in a box and the consent forms, which had their names on them, were removed after the questionnaires were totally completed. Respondents were identified by a number on their questionnaire which they had to remember for the second round. The number was called out and their name, as presented on the consent form attached to the questionnaire, was then confirmed. The students were informed of their rights as a research participant and that they can refuse to participate in the research at any time they wished.

Students were arranged in such as way that they were sitting far from each other, leaving ample space between respondents to ensure privacy. The questionnaire was set up to be completed within 45 minutes. I was informed by the teachers and principal of the relevant school that the young people's literacy skills were unfortunately very low. Consequently I read the questionnaire to the participants slowly and in the process defined words that were not so clear for the respondents. Defining of words and giving the meaning of concepts were consistent in all classes. The questionnaire was completed in two different phases in the school's cycle. One Life Orientation period within a two-week cycle was set aside for the research study to be conducted. The questionnaire was divided into two sections, as mentioned before. The average time for the completion of the questionnaire was 90 minutes.

In addition, it was requested on the questionnaire that respondents had to indicate if they were willing to have an individual interview with the researcher. On these consent forms respondents had to indicate how the researcher could contact them. No teachers were allowed into the room where the questionnaires were administered and only those students who handed in parental consent forms were allowed to participate in the study.

4.7. The qualitative research paradigm

The motivating purpose for the qualitative researcher is theory building. From a social constructionist paradigm and contrary to quantitative ideologies, the qualitative researcher believes that reality is a social construction (Newman and Benz, 1998; Morse & Richards, 2002). The aim of a qualitative, naturalistic approach is the developing of a theory that explains what the individual experience. Denzin and Licoln (1994: 2) stated that:

Qualitative research is multi-method in focus, involving an interpretive, naturalistic approach to its subject matter. This means that qualitative researchers study things in their natural setting, attempting to make sense of, or interpret phenomena in terms of the meanings people bring to them. (...) Accordingly, researchers deploy a wide range of interconnected methods, hoping always to get a better fix on the subject matter.

The qualitative method is inductive and the researcher enters the research setting without any existing expectations. Contextual and subjective processes of interpretation are emphasised in the qualitative methodology. Simultaneously, the researcher is expected to understand situations and issues from the participant's perspective and to recognise the difference in context between the research participant and the researcher. The research participant and the researcher are thus active participants in construction of meaning and theory building.

Thus, qualitative methodology is essential for exploring the subjective experience of individuals' construction of their sexuality. In the following section I will explore the qualitative method that will be employed in this research

4.8. The qualitative method: Semi-structured interviews

4.8.1. Interviewing adolescents

Reinharz and Chase's (2003, cited in Reinharz 1992b: 19) fundamental assumption is that "interviewing offers researchers access to people's ideas, thoughts, and memories in their own words, rather than in the words of the researcher". Although this assumption is fundamentally referring to giving women a voice in research, it is also applicable when it comes to interviewing adolescents or young children (Eder *et al.*, 2003). I used interviewing as a primary qualitative data-collection method in assessing young adolescent men's subjective experiences and constructions of their sexuality.

Interviews have become the most common method to use when the subjective experience of adolescent gender constructions, sexuality and bodily issues are explored (Eder & Fingerson, 2003). In most research studies that explored adolescent gender and sexuality constructions, both individual interviews and focus groups were used as qualitative data-collection methods (see, for example, Szasz, 1998; Nzioka, 2001; MacPhail & Campbell, 2003; Phoenix, Frosh & Pattman, 2003). MacPhail and Campbell (2003), for example, used a combination of individual interviews and focus groups to explore how young males construct their masculine sexualities in rural KwaZulu-Natal. Eder and Fingerson (2003) further emphasize that using multiple methods

when collecting data from young people ensures a richer and valid response, which strengthens the research study.

Some researchers, however, felt that individual interviews allow the researcher to explore the subjective feelings of their research participants more fully (see Bremridge, 2000). Studying the masculinities of boys in schools for example, Phoenix, Frosh and Pattman (2003) found that boys felt more comfortable about speaking to the interviewer and reflect more openly about their experiences in schools in follow-up individual interviews when they were more comfortable with the interviewer's presence. It is further indicated that the young boys who received both individual and group interviews in the study of Phoenix *et al.* (2003) preferred the individual interviews to the group interviews. The boys in the latter study reasoned that they were able to speak more freely about personal and serious things without listening to the other boys' banter and laughter (Phoenix *et al.*, 2003). The study by Phoenix *et al.* (2003) indicates that researchers should be respondent or 'subject' sensitive when collecting subjective experiences of young adolescents' constructions of their sexuality and gender. This can be achieved by eliciting sensitive information through individual interviews instead of group interviews.

Although research participants might agree that they prefer having individual interviews rather than group interviews (Phoenix *et al.*, 2003), other researchers (e.g. Eder & Fingerson, 2003) emphasised using multiple methods for richer and more valid data. Primarily, I used individual interviews as a qualitative data-collection method in this study. However, Eder and Fingerson (2003) suggest that when studying sensitive issues such as sexuality, it will be best to conduct group interviews first before in-depth individual interviews are done. This method will empower the respondent to feel more comfortable with the researcher and allow the researcher to understand the language and cultural context of the respondents (Eder & Fingerson, 2003).

Thus, with the aim of collecting rich and valid data, I conducted informal focus groups with the research respondents in natural classroom settings during school periods. The aim of the focus groups was to allow the respondents to feel more comfortable when communicating with me as a researcher and consequently feel more relaxed when some of these participants were selected for individual interviews. Only three of these informal focus groups were recorded and were not transcribed and analysed for the purpose of this study. The aim of these informal focus groups was to establish rapport with the research participants. In the next section I discuss the procedure that I followed in collecting interview data.

4.9. Collecting interview data through respondent narratives and interview questions

Seidman (1998) argues that the researcher should allow the interview respondents to convey their individual experiences related to the research topic by formulating them in a story. Riessman (2003: 333) states:

Storytelling is a relational activity that encourages others to listen, to share, and to empathize. It is a collaborative practice and assumes that tellers and listeners/questioners interact in particular cultural milieus and historical context which are essential to interpretation.

Narrative theorists will argue that by using narrative inquiry, the researcher comes to understand the respondents' constructions of their experiences through the respondents' autobiographical narratives (Phoenix *et al*, 2003; Riessman 2003; Mishler, 1986). Narrative inquiry has become a common method used by researchers to explore the subjective experiences of adolescents' construction of their sexuality and their gender (Bremridge, 2000; Phoenix *et al.*, 2003; Lesch, 2000).

In this research study I used semi-structured interviews to explore and motivate the young adolescents to relate their experiences to me through the use of their personal stories. The use of narrative inquiry or story telling from the participants was especially encouraged in the first five interviews. This allowed me, the researcher, to follow up in subsequent interviews with more targeted information to explore patterns or themes that arose in previous interviews (Morse, 1994). Banister *et al.* (1994: 51) state:

[S]emi-structured interviewing, as a more open and flexible research tool, can document perspectives not usually represented (or even envisaged by researchers), and hence the approach can empower disadvantaged groups by validating and publicizing their views (...).

Semi-structured interviews allow one to respond to and clarify issues that the interviewee may raise that might elicit confusion in later analysis. An interview schedule (see Appendix E) was followed as a guiding tool during the interview session for the researcher (Banister *et al.*, 1994).

When interviews are conducted, meaning is jointly constructed between the research interviewer and the interviewee. Reflexivity reminds us that there are multiple realities and in order to gain a joint construction of meaning out of the interview data, one needs to have a clear idea of the researcher's own experience and motivation for conducting this research. In the tradition of qualitative research and the social constructionist framework, I will give an overview of my experience and motivation for doing this study in the next section.

4.10. Reflexivity of the researcher

The basic premise of qualitative research is "that reality is not objective and given", but that it is socially constructed through social interaction and different constructions of experiences (Lyons, 2000: 271). In accordance with the social construction perspective, the research participant and the researcher are active participants in the construction of meaning and theory building. Banister *et al.* (1994) state that it is important when using interviews as a qualitative data-collection method that the researcher makes use of reflexivity. This entails reflecting on one's own involvement in the research process, what motivated the researcher to undertake this research study, the role the researcher plays in the study, the interviewee's perception of the researcher or the research study and the reflection of the researcher on the interview and the interviewee (Banister *et al.*, 1994). In compliance with the criteria of good qualitative research and the social constructionist framework, I will endeavour in this section to give an overview of my personal experiences and my reasons for exploring this specific research topic.

I am a middle-class 25-year old coloured man from a Christian-Moravian background. I was born in Cape Town in the Western Cape and spent most of my childhood years in the Langeberg district, where I visited my grandparents. I received my primary education up to Grade 9 at a predominantly coloured school under apartheid regulations. I further pursued my secondary education at a predominantly white Afrikaans school and received my BA degree at an Afrikaans university, where I am still currently enrolled for my Masters degree in Gender Studies.

As a child I was uninformed about apartheid legislation. Riots and anti-apartheid demonstrations occurred around me as I grew up, but my parents only diverted my attention, this from cruel acts of violence, and urged that I should not pay attention to them. I assume that my parents' goal was to bring me up in an environment where I did not need to feel stigmatised or outcast due to the colour of my skin. My father only educated me about the history of South Africa and the new changes that would occur with the release of Mr Nelson Mandela.

My interest in gender and sexuality probably developed from my personal experience as an adolescent in my high school years. At the tender age of 13 I lost my father and was raised by a single working mother. My father and I never had the father-son relationship most sons my age enjoyed and appreciated. Being a timid, short teenager, I found it difficult to engage in sports

that were regarded as masculine, for example, rugby and soccer. I seldom interacted with young men my own age and found conversations with girls a comfort. Although I classify myself as a heterosexual male, I was intrigued at how the dominant young men were so easily able to feel confident in their sexual endeavours in romantic approaches to young women. Although my mother did her best in raising two boys and tried to inject the necessary (masculine) behaviours expected from a boy my age, the necessary guidance from my father was sorely missed.

Sexuality was a taboo subject in our family and when topics of sexual intercourse were mentioned, my mother always reiterated that we should use condoms if we practiced sexual intercourse. This would usually be followed by a statement along the lines that it is unbecoming to have sexual intercourse before marriage and that if we conceive a child with any girl we should take responsibility for that child. As a young man, accountability and being responsible for my actions were thus instilled in me as important values.

My interest in male sexuality increased in my tertiary years, where young men started exploring heterosexual behaviour and young gay men were coming out with total confidence. It was further increased when my brother, who was sixteen at the time, conceived a child with his girlfriend. He was responsible enough to get a part-time job, finish his high-school education through a correspondence course and is now enrolled at a tertiary institution doing a BComm degree.

My aim in this study is to explore and understand how young men construct a masculine sexuality. This aim, some readers of this dissertation will now argue after reading the above, is a personal aim instead of the goal of research - to gain knowledge. On the contrary, although it might seem personal, I believe that exploring young masculine sexualities is an important step in understanding why young adolescent men participate in high-risk sexual behaviours. The knowledge gained from the research participants can inform further prevention programmes in this district in our fight against the HIV/AIDS epidemic and other sexually transmitted diseases.

4.11. Selection of interview participants

I followed an ethnographic selection of research participants to be interviewed in this study. Participants were requested to indicate in the self-administered questionnaire whether they were interested in participating in the second half of the research study. Everyone was informed that

the second half of the research study involves participating in individual interviews with the researcher. Thus, participation was again on a voluntary basis.

After the completion of the self-administered questionnaires, research participant questionnaires that indicated respondents would like to participate in the second half of the research study were separated from the rest of the questionnaires. The selection criteria for participants to be interviewed were as follows:

- 1. The adolescent man had to be 14-years and older to be interviewed;
- 2. Both sexually active and non-active participants were selected to be interviewed;
- 3. The young man had to be a coloured man.

These criteria lead the researcher to purposively select the research participants who were individually interviewed for the research study. I endeavoured to persist in my collection of data from research participants until saturation occured (Babbie & Mouton, 2001; Denzin & Lincoln, 1994). At the end I conducted 24 individual interviews, of which 21 were recorded and transcribed. A month after the data were collected, I returned to the school where I did 8 follow-up interviews. The follow-up interviews excluded final-year students at the school. Due to heavy rains, most of the students from the surrounding farm areas were absent on those days that the interviews were conducted.

4.12. Data analysis: Thematic content analysis

Krippendorff (2004: 18) defines content analysis as "a research technique for making replicable and valid inferences from texts (or other meaningful matter) to the context of their use." Text in this regard can refer to any written form of communication, for example, magazine reports, or it can refer to visual images like any art form or maps (Krippendorf, 2004). Krippendorff (2004) emphasises that a text should convey a form of meaning to the researcher and the reader, as it is produced by someone with the intent to convey meaning. In this research study I qualitatively analysed the transcriptions (my text) of the interviews that I conducted with research participants. I used a form of thematic content analysis to analyse the data received.

Krippendorff (2004: 110) argues that thematic content analysis or "thematic distinctions" are usually very productive and rich in information as they also "preserve the richness of textual

interpretations." Aronson (1994) argues that thematic content analysis allows the researcher to focus on patterns of behaviour and patterns of living, while identifying themes that come out of the text that is being analysed. Aronson (1994) gives a pragmatic view of how thematic analysis should be conducted and identifies five steps of analysis, which include: (1) collecting data, (2) identifying similar classified patterns in the data that already exist, (3) combining those patterns that relate to each other into sub-themes, (4) building an argument, and (5) developing a storyline by formulating theme statements. Krippendorff (2004) warns that researchers should also be aware of the reliability requirements and should attempt to satisfy these requirements in their research.

In what follows I will delineate the steps as set out by Aronson (1994) that I followed in my research procedure and I will also discuss the techniques that were implemented in this study to ensure reliability and validity.

4.12.1. Research procedure

Aronson's (1994) first step in doing thematic content analysis entails the collection of data. Research respondents who volunteered to be individually interviewed in the third phase of the research process were contacted at school. The researcher informed the interviewee when and where the interview would occur. The interview schedule was followed as needed and the researcher did his best to establish a rapport between the researcher and the interviewee. Before the start of the individual interviews, informal class groups were used to establish a rapport between the researcher and the research participants. The individual interviews were on average thirty minutes, although no specified time was allocated for the interview.

The tape-recorded interview was transcribed immediately after the interview took place. Qualitative researchers emphasise that the researcher should do the transcription of the interviews him/herself (Riessman, 2002; Henning *et al*, 2004). Transcribing the interviews myself allowed me to stay close to the data and identify emerging categories and themes that might emerge out of the data (Riessman, 2002). It is argued that transcriptions of interviews should be "verbatim accounts" of what respondents try to convey in their interviews (Henning *et al*. 2004: 163).

After collecting the data and transcribing them in text form, the second step in the process of thematic analysis is to identify similar classified patterns in the data that already exist (Aronson, 1994). Thematic analysis is an exploratory process with the aim to understand what the interviewee is trying to convey in his interview or story. Throughout the transcription the researcher will become familiar with repetitions, phrases, words, lines or paragraphs that might occur through most of the interviews. This forms part of the coding process in the data analysis. Martin and Kelly (1999: 143) state:

In coding, we break down a body of data (text domain) into labelled, meaningful pieces, with a view to later clustering the 'bits' of coded material together under the code heading and further analysing them both as a cluster and in relation to other clusters.

According to Martin and Kelly (1999), coding is never a final and unchanging process; as themes are developed they can also later change into sub-themes. Thus, in this process of identifying themes and inductively understanding the data that have been collected, I initially tried to understand the text by coding it and identify the patterns that emerge in it.

The next step by Aronson (1994) is to develop themes and sub-themes that emerge from the data and see how these patterns are related to each other. This will finally lead to developing an argument and storyline by representation of the themes that emerged from the data and the experiences of the interviewees.

4.12.2. Advantages and disadvantages of using thematic analysis

Thematic analysis provides rich and complex texts that are organised and structured. In addition, thematic analysis allows the researcher to inductively analyse the data and develop a theory that is relevant to the data collected. Thematic analysis has been criticised for its lack of rigour in the analysis and the fact that it is time consuming.

It does seem that the advantages outweigh the disadvantages. However, it is still necessary to ensure that issues of validity or reliability are being addressed. This I will do in the next section.

4.13. Validity and reliability

Although face-to-face interviews have become the best means to explore sensitive issues, such as sexuality and gender, this certainly does not mean that the data collected are in every case valid or reliable. Breakwell (2000) emphasises that self-reported information received from respondents can be flawed with confounding variables that may influence the validity

and reliability of the interview data. Problems that might influence the validity of the interview data collected include respondents' motivation to lie, their dislike of or inability to trust the researcher, they might want to sabotage the research study, feel embarrassed or experience problems understanding the researchers' or interviewers' questions (Breakwell, 2000).

In order to increase the validity of the interview data collected, Breakwell (2000) suggests that the researcher should complement the interview data with other types of data-collection methods. Denzin and Lincoln (1994:2) concur and state that

the use of multiple methods, or triangulation, reflects an attempt to secure an indepth understanding of the phenomenon in question. (...). Triangulation is not a tool or a strategy of validation, but an alternative to validation.

In this research study I incorporated both self-administered questionnaires (a quantitative method) and individual interviews (qualitative method). In addition, class focus groups were also employed. According to Babbie & Mouton (2001), the best means of enhancing validity and reliability in a qualitative research study is by making use of triangulation.

Breakwell (2000) further argues that another means of increasing validity in the collection of interview data is to have repeated sessions with the interview respondents. After the initial interviews were conducted, saturation of interview data took place and they were then transcribed and analysed. I *member checked* the information received with the interview respondents. These *member checks* were conducted during the follow-up interviews with the eight individuals. Babbie and Mouton (2001: 277) argue that the aim with checking with members the data received and analysed is to

assess intentionality of respondents, to correct for obvious errors, and to provide additional volunteer information. It also creates an opportunity to summarize what the first step of the data analysis should be and to assess the overall adequacy of the data, in addition to individual data points.

Member checking the information received from the interview respondents allowed me to clarify data received that raised confusion in the analysis stage of the research and also empowered the interview respondent to become part of the research process and the important role he played in the process.

Breakwell (2000) also adds that researcher effects and interviewee effects should also be acknowledged in studies conducting interviews. In these cases the characteristics of the researcher and the interviewer (e.g. gender, race, socio-economic background and sexuality) might have an influence on the outcome of the research data collected. In order to control the confounding variables, it is suggested that the same interviewer be used during all interview sessions, if it is a small-scale study (Breakwell, 2000). Although the same interviewer may produce different effects over different respondents with different characteristics, the differences can be noted with the interviewer writing extensive notes after each interview conducted. In this study I conducted the interviews and analysed them. In addition, I transcribed the interviews straight after the interview occurred and wrote extensive memos or notes on the interview conducted. In a previous part of this chapter I aimed to give an overview of my own background and characteristics. The reader will note that my gender and race corresponds to that of the interview respondents. This does not in itself validate the information received, although everything was done to ensure the validity and reliability of the information. In addition, I have to add that during the informal class focus groups, I found myself feeling powerful and in control of these young males. For the first time I actually felt superior and in a sense related to the *hegemonic masculine* construct as described by Connell (1995). I acknowledged these feelings in the informal class focus groups and did much reflection in order to ensure that this feeling did not influence the outcome of the data receive in the individual interviews. Thus, although my gender and race correspond to those of the interview respondents, my feelings, my educational status and my own sense of what a masculine sexuality means to me (the researcher effects) were taken into account during my preparation for the individual interviews.

To ensure that the data collected and analysed were valid and reliable, additional methods were employed. Babbie & Mouton (2001) argue that for qualitative information to be valid and reliable or objective, qualitative data should be transferable, credible and dependable. Lyons (2001) argues that transferability is just another name for generalisability, where findings can be applied in other context, in another time frame, with other respondents and under different conditions (Babbie & Mouton, 2001). Guba and Lincoln (1994, cited in Babbie & Mouton, 2001) argue that transferability is about having a thick or detailed description and selecting participants purposively. In this study research participants who were interviewed were selected purposively and a great effort was made to ensure detailed information and data were collected in this specific context (Babbie & Mouton, 2001).

In addition, confirmability is ensured through the use of triangulation as discussed above. Babbie & Mouton (2001: 278) argue that confirmability entails delivering findings that are "the product of the focus of the inquiry and not of the biases of the researcher." Triangulation will not only ensure confirmability, but also the credibility of the research study. Credibility will be further increased through the use of member checks, as indicated above and also through peer debriefing. In this case, a colleague of mine with a similar status to mine and with a general idea of the research, but who was outside of the research context, was selected to play 'devils advocate' in the analysis of the data collected and analysed (Babbie & Mouton, 2001). In addition, the data were also reviewed by my supervisor and an external supervisor. Finally, an audit trail is kept to ensure dependability of the data collected and analysed (Morse, 1994; Babbie & Mouton, 2001). This, according to Babbie and Mouton (2001: 276), entails:

giving all your theoretical ideas, notes, raw data, interpretations and what else you may have, over to an independent examiner who then studies it all in great depth. Such an examiner would then point out biases, flaws, and other problems in your study (this is not unlike your supervisor).

My supervisor was thus informed of all the procedures I followed throughout the research process, the data I collected and the means of analysis.

Thus, in order to ensure the validity and reliability of the qualitative data collected, measures were employed that, I hope, increased the reliability and validity of the research study. These measures, as discussed above, included establishing a rapport with research respondents through the use of class focus groups, using various methods (triangulation) to collect and interpret data and going back to the research participants and doing member checks. In addition, the researcher endeavoured to ensure transferability through purposive selection of interview participants, and writing extensive detail in the dissertation on the data collection, sampling and analysis (thick description) stages. Triangulation techniques were implemented to ensure that this research study is confirmable, credible and dependable.

4.14. Conclusion: Summarizing the research process

The research process that was followed in this study was multi-method in focus. Both quantitative and qualitative methods were employed to explore the sexuality of these young adolescent men.

In the quantitative section of this research study I developed a self-administered questionnaire after consulting various resources. This self-administered questionnaire consists out of openand close-ended questions. The questions explored (1) demographic information of the participants, (2) knowledge of contraceptives and condom use, (3) range and frequency of sexual behaviour, and (4) young males' opinions on gender issues. Participation in the completion of the questionnaire was voluntary and completed informed consent forms as well as parental consent forms were a requisite. At the end 231 parental consent forms were received and 223 questionnaires were completed. Data were analysed using the Statistical Package for the Social Sciences (SPSS) software, version 12. The focus was on descriptive statistics and frequencies were often used.

The second phase of the research study entailed having natural class setting focus groups with the research participants. The aims with these focus groups were to establish a rapport with the research participants and to win learners' trust. It was also to ensure that research participants felt more comfortable when speaking to the researcher in one-to-one sessions. These informal focus groups also assisted the researcher in understanding the lingo and slang these adolescent males use.

The third phase of the research process involved collecting individual interview data. Participants who were interviewed in this study were purposively sampled and interviews commenced until saturation occured. Those who were selected for the research interviews had to comply with the interviewee criteria (see section **4.11** of this chapter). Interview data were tape-recorded and transcribed immediately after the interview took place. A thematic content analysis procedure was followed to analyse the data. In the next chapter I will present the result and findings of the quantitative data collected.

Chapter 5: Quantitative results

Profiling rural male sexual behaviours

5. Introduction

The aim of this chapter is to analyse and present the quantitative data collected. Participation in the study was voluntary. The WCED requested that parental consent must be obtained before the study can be conducted in this particular school as well as consent from the learners participating in the study. Of the 382 parental consent forms that were distributed, no more than 231 (58%) parental consent forms were received. The low percentage of parental consent forms received can be an indication of the conservative nature of South African families, especially rural families, when sexuality and sexual behaviours are discussed.

The questionnaires were completed by 223 (96%) of the learners. The other 8 learners were either indicated as absent on the two days the questionnaires were administered or their questionnaires were incomplete. Those questionnaires that were incomplete can also be an indication of the research participant's choice not to participate further in the study.

The quantitative data presented will be discussed under the following main themes: (1) socio-demographic data; (2) family household and characteristics; (3) profile of sexually active respondents; (4) sexual behaviours/ practices of young adolescent males; (5) sources of sexuality and communication with significant others; and (6) gendered opinions on sexual relationships.

5.1. Socio-demographic data

Table 1: Current school grade (n = 223)

School		Percentage
grade	n	(%)
8	48	21.5
9	74	33.2
10	51	22.9
11	19	8.5
12	31	13.9
Total	223	100

The mean age of the respondents was 15.59 with a median of 15 years (n=223). The age range of the respondents was from 12 to 20 years. Table 1 indicates that almost 78% of the participants were from Grades 8 to 10, while the minority of the research participants were represented by the Grades 11 and 12, groups with 8.5% and 13.9% respectively (n = 223).

Table 2: Failing a grade (n=223)

Largest category	n	Percentage (%)
Yes	100	45.0
No	122	55.0
No response	1	0.4

Descriptive statistics shows that of the total sample, 45% of the participants failed a grade before. The high percentage of young males failing a grade can be attributed to the lack of resources that are available to rural coloured schools and the impact of apartheid in South Africa on the education system. Economic constraints in rural areas and the low socioeconomic circumstances, under which the people in these areas live, can also be a contributing factor to the young males' apathy about academic performance or the vision of further education in tertiary institutes. It is also possible that there is a lack of parental discipline and involvement in the young males' school performance can be a causal factor behind the high fail percentage.

The majority of the research participants (66.8%) were from the community in which the study was conducted, while 11.2% were from nearby communities and 19.7% were from surrounding farm areas, where there were no public secondary schools to attend and they therefore had to travel to attend this secondary school.

2. Family household and characteristics

Before discussing the family household structure, it is no be noted that according to the Census data, 2001, approximately 85% of the population in the Langeberg District are so-called Coloureds. It was further reported that the average household size is three to five people, and the majority of household's income ranges between R 401 and R 1 600. It was further indicated in the Census data that almost 43% are not economically active in the Langeberg District, 8% were classified unemployed and 49% tend to be employed, working for low wages. In the next section, the focus is on household characteristics. The Census information just provided should thus be kept in mind, when the data presented are perused.

The mean number of people living in the same household was 5.56 (n =221, with two or 0.9% not responding), with a median of five. Household were comprised out of a minimum of two people and a maximum of seventeen people. The average number rooms per house for each household were 5.06, with a median of five and a median of two bedrooms. Of the total sample, 18.8% of the respondents indicated that there were no bathroom facilities in their house and only 1.3% of the respondents indicated a lack of electricity in their house.

Table 3: Family household characteristics (n = 223)

Household		Percentage
characteristics	n	(%)
Parents married	130	58.6
Father live in same house	123	62.8
Mother live in same house	184	85.2
Never see father	26	13.4
Never see mother	7	3.1

From the total sample (n=223), 58.6% of the young males who participated in the study indicated that their parents are still married (see Table 3). No significant differences were found between those adolescent males who were sexually active (54.2% reported yes) and those who were not sexually active (61% reported yes). To the question as to whether the father stays in the same household, 37.2% indicated that their father does not stay in the same household as they do, and 13.4% of the respondents reported that they never see their father (n = 223). This high percentage for an absent father is also an indication of a high percentage of single motherhood and single-mother rearing practices in rural areas. One could argue that the absence of a father figure in the household of these young males may encourage them to act out this father figure role. This may place a great responsibility upon them to try to always be in control and portray the masculine ideal role of provider and protector of the family. This might also be part of their 'perceived' idea of what it means to be a man, because they have no one who models this father-figure role.

Table 4: Employment status of household members (n=223)

		Percentage
Employment status	n	(%)
Mother unemployed	76	35.8
Father unemployed	25	14.3
Participant employed	80	36.4

Respondents reported that 14.3% of the fathers were unemployed, while 35.8% of the mothers were unemployed. The majority of the respondents reported that their parents were employed in general work or work that required no tertiary education. This usually ranged from the father being employed as a construction building worker or a manual municipality labourer and the majority of the mothers were usually employed as domestic workers. This indicates that the majority of the respondents come from low socio-economic circumstances. This is also emphasised by the fact that 36.4% of the respondents indicated that they do have a part-time job and started at a mean age of 13.65 and a median of 14 years to increase the income of these households.

The respondents in this rural area come from low socio-economic circumstances. It can be argued that for youths growing up in low socio-economic circumstances, issues pertaining to a healthy sexuality are not a first priority. Instead, these individuals might consider income generation or religion as a first priority. Individuals might participate in high-risk sexual behaviours because they are ignorant of the dangers involved and did not receive the necessary education to express a healthy sexuality. In the next section I will give a profile of those youths who indicated that they are sexually active.

3. Profile of sexually active respondents

3.1 Participation in sexual intercourse

Table 5: Participated in sexual intercourse (n=223)

	n	Percentage (%)
Sexually active	83	37.9
Not sexually active	136	62.1
No response	4	1.8

In the current study sexual intercourse was defined as penis-vagina penetration in heterosexual intercourse. Table 4 indicates that 37.9% of the respondents reported that they had had heterosexual intercourse before, while 62.1% reported negative to heterosexual intercourse. These results are much lower than the statistics presented by Bremridge (2000), who indicated that 54.1% of the young semi-rural coloured males in her sample in the Stellenbosch area in the Western Cape were sexually active. The MRC (2002) argued that 45.1% of youth in the Western Cape, South Africa are sexually active, while 41.2% of young coloured males on a national level are sexually active.

The statistics of these sexually active young rural coloured males in the Langeberg District is much lower than the statistic presented by previous research. This might be an indication of a decrease in heterosexual intercourse amongst young coloured males in rural areas in the Western Cape. But this can not be validated as there are no comparable statistics on young rural coloured males in the Langeberg District of the Western Cape. In addition, methodological and contextual differences in other rural studies on young male sexual behaviours make comparison of these data with other reliable data difficult. It should also be noted that the young men who participated in this study ages ranged from 12 to 20, whereas the study of Bremridge (2000), for example, focused on young men between the ages of 15 and 21. This indicates that the age variations in different research studies, which focus on adolescent sexual behaviour, should be taken into account when comparisons are made regarding youths' participation in sexual intercourse.

Table 6: Age at first sexual intercourse (n=83)

		Percentage
Age	n	(%)
10 and		
below	9	10.8
11	9	10.8
12	9	10.8
13	15	18.1
14	8	9.6
15	12	14.5
16	12	14.5
17	4	4.8
18	3	3.6
19	2	2.5
Total	83	100



The mean age of first sexual intercourse as reported by the participants is 13.6, with a median of 13 (std dev. 2.537). By 15 years of age almost 75% of the participants had already experienced their first sexual intercourse (see Table 5). In this sample in the Langeberg district a higher percentage (37.9%) of sexually active participants were reported in comparison to the urban study conducted by Flisher (2003) and colleagues, and they also start having sexual intercourse at a much earlier age than their urban counterparts. In the research study on the sexual behaviours of Metropolitan Cape Town high school students Flischer, Reddy, Muller and Lombard (2003) found that at the age of 14, 23.4% of males were participating in sexual intercourse. At 19 years 71.8% of males had already participated in sexual intercourse (ibid, 2003: 537). The focus of this study was on "selected" forms of sexual behaviour with the predominant focus on heterosexual intercourse defined as "intimate contact with someone of the opposite sex during which the penis enters the vagina (female private parts)" (ibid, 2003: 538). The researchers of this local study were careful not to refer to sexual behaviour as a generic term that includes only sexual intercourse. Heterosexual intercourse was selected as one form of sexual behaviour that was the focus of this study. In doing so, these authors acknowledge the existence of other forms of sexual behaviour, but do not mention these other forms or make any reference to them.

The mean age reported by Bremridge (2002) of coloured semi-rural males in her sample in the Winelands district was 16. In the MRC (2002) national study it was estimated that young males are sexually active as early as, or younger than, 14 years with an increase in prevalence rates by 16 years of age.

The rural males in the Langeberg district reported that they are sexually active as early as 13 years and confirms Kelly's (2002) argument that rural males are possibly sexually active at a younger age than their urban counterparts. It could also be argued that rural males lack the necessary recreational activities and thus engage in sexual intercourse as a means of having fun.

3.2. Multiple partners

Multiple sexual partners can be defined as having sexual intercourse with different sexual partners at different times, while being intimately involved within a relationship with one specific sexual partner or having multiple casual partners without being in an intimate relationship (De Gaston, Weed, Jensen, 1995; Rodgers, 1996; The Kaiser Family Foundation, 2001). Studies in Kenya found that most boys engage in multiple sexual experiences and exploits, viewing sexual intercourse as an exciting experience (Nzioka, 2001). In the South African context, especially in the area of Gauteng, the practice of having multiple sexual partners among young heterosexual adolescent males was especially evident (MacPhail and Campbell, 2003). The Kaiser Family Foundation reports (2001) that 35% of young South African males reported that they had had more than two sexual partners in their lifetime. Bremridge (2000) found in her study that 76.3% of those rural males who reported being sexually active had had from 1 to 4 sexual partners in the preceding three months.

Table 7: Frequency of different sexual partners in the last three months (n=83)

No of sexual intercourse		Percentage
partners	n	(%)
0	31	40.3
1	25	32.5
2	8	10.4
3	6	7.8
4	2	2.6
6	3	3.9
7	1	1.3
15	1	1.3
No response	6	7.2

Table 7 indicates that the majority of rural adolescent males (almost 84%) had 2 or fewer sexual partners in the previous three months, with one respondent (or 1.3%) who indicated that he had had 15 sexual partners in the last three months. It is possible that the young man who reported having had 15 sexual partners in the preceding three months was boasting about his sexual experience and can thus be an indication of over-reporting in this study.

South African and African statistics are not very different from Western studies, for example, that of De Gaston, Weed and Jensen (1995), which found that 18.3% of their sample of adolescents had an average of 5 sexual partners. With no significant difference by race, gender or grade, the MRC (2002) reports that in South Africa the national prevalence rate indicates that 70.2% of adolescent males had had one or more sexual partners in the preceding three months.

One can argue that the prevalence rates of multiple partners are very high amongst adolescents. However, as Flisher *et al.* (2003) indicate, one should remember that adolescents participate in sexual intercourse infrequently and do not necessarily have long-standing or continuous multiple partners. In this study the number of different partners with whom the participant had had sexual intercourse in the preceding three months was requested. This direct type of questioning reduced any confusion that could have occurred due to memory loss. This method also ensured that the researcher was able to capture whether rural adolescent males in the Western Cape region do have multiple sexual relationships.

As the majority of young males had 2 or fewer sexual partners in the preceding three months in this community in the Langeberg district, the current research seems to indicate that young adolescents do participate in sexual intercourse infrequently and sporadically and that these young males do not necessarily have multiple sexual partners (Flisher *et al.*, 2003). In this sample 40.3% of the participants in this study had zero different sexual partners in the preceding three months, which indicates that young adolescent males are not as sexually promiscuous as the literature has shown thus far, or there has been a decrease in young rural males' participation in multiple sexual relationships. It should also be noted that the study by Bremridge (2000), which was carried out with young semi-rural coloured men, was conducted during the period of 1998 and 2000. Four years later national sexual prevention programmes, such as loveLife, had covered a lot of ground and the results reported by the young men in the Langeberg district could be the result of those intervention programmes.

In the next section I will explore the use of condoms and contraceptives among young rural coloured males.

3.3. Condom use and contraceptive behaviour

Condom use can be defined as a birth control method and also a method that protects individuals from contracting sexually transmitted diseases and HIV/AIDS, when body fluids mix during sexual intercourse.

Table 8: Condom/contraceptive use at first sexual intercourse (n =83)

Method used at first sexual		Percentage
intercourse	n	(%)
Condom	50	61.7
Contraceptive	5	6.2
Injection (female)	2	2.5
Withdrawal	12	14.8
Safe period	12	14.8
Missing	2	2.4
Total	83	

The majority of the respondents (61.7%) reported the use of condoms at their first sexual intercourse (see Table 8). Other methods used were the contraceptive pill (6.2%), the injection (2.5%), withdrawal or the removal of the penis from the vagina before ejaculation (14.8%), and the safe period (14.8%).

Table 9: Rate of contraception use (n = 83)

Use of contraception	n	Percentage (%)
Always	18	22.5
Sometimes	30	37.5
Never	32	40.0
No response	3	3.6
Total	83	

Table 9 shows that contraception uses in subsequent sexual intercourse experiences is scarce. Although almost 60% of adolescent males in this community always or sometimes use contraception during sexual intercourse, a disturbing 40% of these adolescent males never use any form of contraception. These young males are not only vulnerable to contracting a sexually transmitted disease or HIV/AIDS, but they are also vulnerable to impregnating a girl and becoming adolescent fathers when they are unprepared. This could be the product of an extra emotional socio-economic strain on both individuals involved as well as on the parents of both the adolescent mother and father.

Nzioka (2001) reports that the use of contraception, especially condom use among boys in Kenya, tend to be erratic and very infrequent. About 80% of the boys in this specific study in Kenya engaged in unprotected sexual behaviour at one or other time (*ibid*, 2001). The use of condoms among young males has increased in the South African context, compared to what the Kenyan study indicated (MacPhail and Campbell, 2003). Flisher, Reddy, Muller and Lombard (2003) indicate that 65.4% of their sample of adolescents who were sexually active in Cape Town, South Africa, used contraceptives in their last sexual intercourse experiment. It is further indicated that condoms were used by 67.7% of these adolescents and 43.2% used injectable steroids.

In addition to these statistics on the sexual behaviours of adolescent males, Buga, Amoko and Ncayiyana (1996) found that in 22 rural areas in Transkei, South Africa, 87.6% of boys (18 years old) had already experienced sexual intercourse, 76.1% of13-year-old boys already reported being sexually experienced, and only 62% of those boys reporting being sexually experienced ever used a condom.

The MRC (2002) study indicated that a staggering 30.4% of South African male youths do not use a method of contraception during sexual intercourse and that only 48.4% of young adolescent males used condoms during sexual intercourse. It is further indicated that 30.2% of Western Cape adolescent males do not use condoms and that 48.5% do use condoms.

Young rural males need to be informed of the dangers involved in having sexual intercourse without the use of a condom. The high percentage of young rural males who never use any form of contraception is of great concern. In the next section I will look at how vulnerable youths are to contracting the HI-virus and the prevalence of young males impregnating a girl.

3.4 Vulnerability to HIV/AIDS and the prevalence of pregnancy

Table 10: Preventing the risk of contracting HIV (n=83)

Largest Category	n	Percentage (%)
Yes	21	26.3
No	59	73.8
No response	3	3.6

In this sample 73.8% of the respondents reported that they were not able to prevent the risk of contracting HIV at first sexual intercourse (see Table 10). The percentage of young males reporting that they were not able to prevent the risk of contracting HIV or any other STD contradicts the data presented in Table 7, in which 62% of the respondents reported that they did use a condom at their first sexual intercourse. But this can also be related to the timing of communication about the use of contraceptives between the two sexual partners. Table 10 shows that only 28% of these young males and their partners communicated or made any reference to the use of contraceptives during sexual intercourse, while 6.1% of the respondents spoke about contraceptive use while having sexual intercourse and 12.2% made reference to it only after sexual intercourse already occurred.

Table 11: Communication between sexual partners (n=83)

Time of		Percentage
communication	n	(%)
Before sex	23	28.0
While having		
sex	5	6.1
After sex	10	12.2
Not		
applicable/never	44	53.7
No response	1	1.2

Two assumptions can be made with respect to the contradiction in these two tables (Tables 7 and 10): (1) the 6.1% who communicated with their partners about the use of contraceptives only used a condom after penetration already occurred, and (2) those respondents who did not respond on this question and who argued that this question is not applicable to them, might not have spoken with their partners about contraceptives at all and automatically used a condom. We can also argue that condoms are not viewed by these young males as a form of contraception. On the question as to what contraception is, the minority of sexually active young males (48%) agreed that it is a method used by females to prevent pregnancy. Thus, the young men in this sample might compare contraception with a method used by females, and view the condom as a male method to prevent the spread of HIV/AIDS.

Table 12: The best contraceptive method to use (n=83

		Percentage
Method	n	(%)
Injection	22	26.5
Condom	19	22.9
Contraceptive pill	10	12.0
Injection and		50
Condom	2	2.4
Do not know	18	21.7
Other	11	13.3
Missing	1	1.2

Table 11 indicates that 26.5% of the respondents believe that the injection is the best method and 12% believe that the pill is the best method of contraception. Only 22.9% indicated that the condom is the best means of contraception.

Table 13: Vulnerability to HIV/AIDS (n=83)

Concerns about		Percentage
HIV/AIDS	n	(%)
Very		
Concerned	24	29.6
Concerned	17	21.0
Not concerned	40	45.7
No response	3	2.4

The young males in this community in the Langeberg district thus use condoms infrequently and sporadically, and are thus vulnerable to the risk of contracting STDs or HIV/AIDS. The researcher requested from the young males if they were ever concerned that they might or are able to contract the HI-virus; more than 50% responded very concerned and concerned when grouped together (Table 12).

In this sample 29.6% of the respondents were very concerned that they might contract the HI-virus, while 45.7 % believed that they were not concerned or gave no response (3.7%).

Table 14: Incidence of pregnancy (n=83)

Ever conceived a child with a girl	n	Percentage (%)
Yes	7	8.4
No	74	89.2
No response	2	2.4

Table 13 shows that almost 8% of the young male respondents (8.4%) in the Langeberg district reported that they had already conceived a child with a girl. These statistics are higher than the statistics presented by Bremridge (2002), who indicated that 2.6% of the young semi-rural coloured males in her study made a girl pregnant, but it is lower than the national statistics (which is 16.4%) as presented by the South African Medical Research Council (2002). The MRC (2002) further indicated that 11.4% of young coloured males in South Africa had already conceived a child with a girl.

Table 15: Handling of pregnancy (n=7)

		Percentage
Largest category	n	(%)
Unsure	1	14.3
Abortion	2	28.6
Had the baby	2	28.6
Currently pregnant	2	28.6

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⁷ On the questionnaire, participants were wrongly requested to answer not concerned/not applicable to me. The results in these two requests were grouped together under one 'not concerned' umbrella.

Table 15 indicates that 28.6% of the respondents reported that they had the baby, 28.6% of the young males' partners terminated the pregnancy, 28.6% are currently pregnant, while 14.3% of the young males are unsure what happened to the baby. Macleod (1999) argues that there is a paucity of research on the male counterparts' role in teenage pregnancy. The fact that 14.3% of these respondents (see Table 15) are unsure of what happened to the baby is an indication of the peripheral or even non-existent role young males still play when they are involved in teenage pregnancy. The social construction of gender in our society places the responsibility for caring for new babies on the female, thus eliminating the need for young males to take ownership of, and responsibility for, their behaviour (Campbell, 1995). This type of gender construction within societies encourages young males to participate in high-risk sexual behaviours without protecting themselves or their sexual partner.

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5. High- risk sexual behaviour

Table 16: Participating in high risk sexual behaviour (n=83)

High risk sexual behaviours	Perce	0
	Yes	No
Anal sex	7.2	92.8
Oral sex	15.7	84.3
Sex in a group	15.7	84.3
Sex with more than		
one woman at once	13.3	86.7
Sex with an older		
woman by five		
years and more	21.7	78.3

High-risk sexual behaviour, whereby HIV/AIDS can be contracted if the necessary precautions are not taken, include anal sex, oral sex, sex in a group, sex with multiple partners at once and sex with a women five years older and more. These sexual behaviours are seldom explored in sexuality research studies amongst adolescents in South Africa. Table 15 indicates that 7.2% experienced or had anal sex before, 15.7% already had oral sex, 15.7% already had sex in a group, 13.3% had sex with multiple partners at once and 21.7% already had sexual intercourse with a woman five years older and more. With almost no comparable data for these high-risk sexual behaviours, Bremridge (2000) reported that, of the young semi-rural coloured males in the Winelands area in the Western Cape, 78.8% of the respondents had never experienced oral sex before. This percentage is much lower than the statistics for the young rural coloured males in the Langeberg district. This indicates that there is an increase in young males participating in other forms of high-risk sexual behaviours, except for sexual intercourse. Significant in this sample is the 15.7% of the young males who had or experienced sexual intercourse in a group.

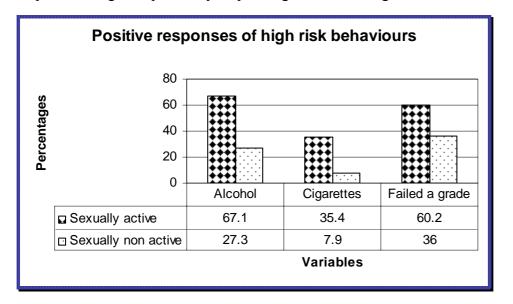
Table 17: Other high risk behaviour

Other high risk behaviour	Yes (%)	No (%)	No response
Alcohol:			
Active	67.1	32.9	ara robocaut cultu 1.2
Non-active	27.3	72.7	0.7
Cigarette:			_
Active	35.4	64.6	1.2
Non-active	7.9	92.1	0.7
Failed a grade:			
Active	60.2	39.8	0.0
Non-active	36.0	64.0	0.7

The statistics in Table 17 show that those learners who are sexually active are more prone to failing a grade than those who are not sexually active. It is indicated that 60.2% of the learners who are sexually active did fail a grade before in comparison to the 35.6% of the learners who were not sexually active and who have failed a grade before. Graph 1 gives a visual indication of the differences between the high-risk behaviours of sexually active and non-active adolescent males in the Langeberg district.

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⁸ Group sex is discussed in detail in Chapter 6.



Graph 1: Young men positively responding to different high risk behaviours.

Young males who are sexually active are more prone to using alcohol than their non-sexually active counterpart (67.1% vs. 27.3%) and those who are sexually active also smokes cigarettes more often (35.4% vs. 7.9%). When I asked what led them to have sexual intercourse for the first time, almost 10% indicated that they were under the influence of alcohol.

These statistics indicate that sexually active young males are more prone to participate in high risk behaviours such as the use of alcohol and cigarette smoking. The high percentage of especially sexually active males who use alcohol is a great barrier for intervention programmes which encourage healthy sexual behaviour. The use of alcohol among young adolescent males can also lead to a definite increase in sexual abuse of young females.

3.6 Consensual sex and tactics of sexual coercion

Holland *et al* (1990: 649) argue that males use different tactics to coerce their female friend or girlfriend to have sexual intercourse with them. These authors argue that:

...men's behaviour can be sexually non-aggressive, using persuasion, seeking consensual sex, intermediate pressures could be regarded as sexually coercive, using social or emotional coercion, or verbally expressed demands for sex; at the other end, men's behaviour can be sexually aggressive and impelling, where they obtain sexual intercourse through threats or the use of force.

Table 18 gives an indication of young male participants who wanted to have sex with their partners, but their partners refused their request.

Table 18: Male participant wanting sexual intercourse (n=83)

Male participant wanting sex but		Percentage
partner refuse	n	(%)
Yes	29	35.8
No	52	64.2
No response	2	2.4

Bremridge (2000) reported that 17.9% of her sample of active adolescent males reported that they wanted sex from their partner, but the partner did not feel the same way. About 35.8% of young rural coloured males in the Langeberg district (as indicated in Table 18) reported that they wanted sex from their partner, but their partner did not want to have sexual intercourse. The two-fold increase in the young males' responses to this same question in this study can be related to the fact that the study was done in a totally different rural context that is kilometres away from the nearest urban city and conducted in a different period in time. It can also be argued that, although young males are still persistent in wanting to have sexual intercourse with their partners, young females are developing a sense of sexual agency within their relationships (Lesch, 2000).

There was a wide range of responses from the young males who wanted to have sexual intercourse with their partners. The researcher used content analysis to analyse the respondents' reported behaviours and reactions when their partners refused to have sexual intercourse with them. The variation in responses in how they managed the situation by either accepting the partners' refusal or forcing their partner to have sexual intercourse with them, confirms the findings of Holland *et al* (1990) on males' methods of sexual coercion.

Table 19 (next page) shows that 31% accepted their partners' refusal, while 24.1% were angry about their partners' refusal to have sex with them, but still accepted their decision.

Table 19: Young males' reaction to partners' refusal to have sexual intercourse (n = 29)

Young males' reaction to partners' refusal to have sex with them	n	Percentage (%)
Accepted partners refusal	9	31.0
Angry, but accepted no for an answer	7	24.1
Aggressive behaviour, no sexual engagement	3	10.3
Verbal manipulation/ persuasion to		
have sex	4	13.8
Forced sex	2	6.9
Ended relationship	4	13.8

Almost 55% of this sample accepted and respected the girl's decision, but the rest of the respondents used tactics of sexual coercion to either change their partner's mind to have sex with them or played on the emotions of the female partner. Of the respondents, 10.3% used aggressive behaviour and had no sexual intercourse while 13.8% of the respondents ended their relationships. Other tactics of sexual coercion that were used were by verbally manipulating and persuading the girl to have sex with him (13.8%) or by forcing her to have sex with him (6.9%).

The current statistics reflects the loveLife statistics in which 19% of the boys between 12 and 17 in South Africa agreed that they will have sex with their girlfriend even if she does not want to. Yet 50% of the boys agreed that if the girl says no that it means no (Africa Strategic research corporation and the Kaiser family foundation (2001). Dacey and Kenny (1997) cite Davis, Peck and Storment (1993) who indicate that 60% of American high school students think that it is acceptable for a boy to have sexual intercourse with a girl whom he has been dating for some time, or with whom he had sexual intercourse in the past, even if she does not want to. The statistics presented of the young rural males in the Langeberg district is much lower than those for the American high school learners.

However, it should be noted that healthy sexual behaviour is freely chosen, not coerced, and that it is about the individual's choice to engage in individual sexual behaviours with a partner (Dacey & Kenny, 1997). Sexual coercion can broadly be defined as "sexual touch or intercourse involving pressure or force" (Struckman-Johnson & Struckman & Johnson, 1994; cited in Fiebert & Osburn, 2001).

Almost 80% of the respondents in the Langeberg district reported that both they and their partners agreed that they wanted to have sex at their first sexual experiment. Although in their first sexual experience, only 1.2% of the respondents reported that they were forced to have sex at that time, subsequent sexual intercourse experience indicates that 32.9% of the young male respondents have experienced some form of force to have sexual intercourse.

Table 20: Young males reporting sexual coercion and by whom (n=26)

Largest category	n	Percentage (%)
Yes	17	65.4
No	9	34.6
Girlfriend	15	65.4
Female friend	11	34.6

Table 20 shows that of the 26 participants who reported being forced to have sexual intercourse, 65.4% of these respondents had sexual intercourse with the perpetrator. In the majority of cases reported, the perpetrator was either a girlfriend (65.4%) or a female friend (34.6%). Fiebert and Osburn (2001) studying 452 Californian college students reported an increase in sexual coercion experienced by young males in heterosexual relationships. In this sample 42% of males (38% of females) agreed with the statement "a man/woman have sexually touched my body when I did not want him/her to" (*ibid*, 2001). In addition, 27% of males (23% of females) indicated that they were pressured to have sexual intercourse without them wanting to. This is also evident in the MRC study in South Africa where 14.4% of adolescent males indicated that they were assaulted by a girlfriend and 8.1% indicating that they were forced to have sex with the girl. This study and other comparative studies indicate that more and more young males are enduring silently sexual coercion that goes unnoticed due to the gender scripts and patriarchal beliefs that young men should be tough.

In the next section I will be looking at the sexual behaviours that adolescent males participate in and also at significant differences in certain behaviours between sexually active and non-active males.

4. Sexual behaviours/ practices of young adolescent males

Table 21: Participation in non-coital sexual behaviours (n=223)

Behaviour	Never	Monthly	Weekly	Daily	No response
Dating	46.8	27.5	17.6	8.1	0.4
Going out with friends Leaving party with	49.8	27.9	14.2	8.2	1.8
stranger	78.4	15.8	3.6	2.3	0.4
French kiss	20	33.2	26.4	20.5	1.3
Kissing, petting (physical intimacy)	42.1	29	17.2	11.8	0.9
Touch and hug/hold	33.5	27.5	20.6	18.3	2.2
Masturbation alone Masturbation with	57.4	28.7	12.1	1.8	0
friends	83.1	9.1	5.5	2.3	1.8
Sexual fantasies	38	36.7	17.1	8.1	0.9

During this research process the researcher seldom found non-coital sexual behaviour being explored in adolescent sexuality research (see Eaton *et al.*, 2003; Flisher *et al.*, 1993). The frequency of non-coital sexual behaviours is especially neglected when it comes to the sexual activities of those who have not engaged in sexual intercourse. Table 21 gives an indication of the non-coital sexual behaviours young males participate in.

Of the total sample of young males participating in this study, 46.8% reported that they never went out on a date in the last three months, while 27.5% go on dates on a monthly basis. When I group the monthly, weekly and daily categories together, I found that just over 50% of young males engage in social activities with their friends on a regular basis. 78.4% of this sample will never leave a party with a strange female. Requesting how frequently participants (French) kissed in the preceding three months, only 20% of the sample reported that they never kissed someone in the past three months, while 42.1% reported that they never kissed, petted or had physical intimacy with someone and 18.3% reported that they touch and hug their partners daily. Although 57.8% of the sample reported that they never masturbated in the

preceding three months, more than 42% did employ self sexual stimulation in the preceding three months, while 83.1% of young males never participated in group masturbation practices. The majority of the of the respondents reported that they experienced or had sexual fantasies in the preceding three months, with only 38% reporting never experiencing this form of sexual behaviour

It seems that young males (French) kiss someone on a regular basis, while physical intimacy is not experienced so often. In addition, young males do go out on dates and socialize with friends on a monthly basis. These young males reported that they will never leave a party with a stranger and never masturbate in a group with other friends. In the following sections, I will look at certain specific non-coital sexual behaviours that young males engage in which include dating behaviour and masturbation.

4.1. Dating behaviour

Bremridge (2000) defines dating as participating or engaging in any type of social activity with a partner in whom the individual have a sexual or romantic interest. Dating is a crucial activity for many adolescents in exploring their sexuality and a fundamental part of healthy sexual development. This is the time when adolescents acquire the social skill to be sexually intimate and emotional with a partner and also develop sexual identities (Nielsen, 1998). Dating usually involves sexual behaviours such as necking, fondling, hugging and kissing that usually precede sexual intercourse. I will define dating as the interaction of two or more individuals participating in any social activity with the intent of exploring one's own sexuality as well as the individual by whom one is sexually and emotionally aroused (Nielsen, 1998; Bremridge, 2000).

Table 2: Age at first date (n=223)

Age at first		Percentage
date	n	(%)
7	1	0.6
8	2	1.1
9	4	2.3
10	13	7.3
11	14	7.9
12	25	14.1
13	38	21.5
14	31	17.5
15	22	12.4
16	13	7.3
17	8	4.5
18	3	1.7
19	3	1.7
Total	177	100
No response	46	20.6

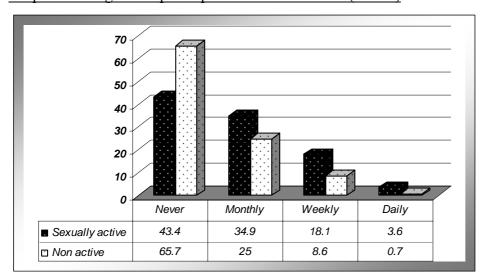
The mean age of respondents' reported first date in Table 22 is 13.31 with a median of 13. The age at first date ranged from 7, with an increase between 12 and 15, and a decrease at 19 years of age. Of the respondents, 20.6% did not respond on this question, which can be an indication that these respondents had not been out on a special date before. It can also be an indication of young males exercising their rights not to respond to some questions.

Bremridge (2000) reported that the young coloured males in semi-rural areas in the Western Cape went on their first date at 14 years of age. Buga, Amoko and Ncayiyana (1996) studied the sexual behaviours of young black adolescents in the Transkei area of South Africa and found that young black males go on their first date as young as 13 years old. Western studies of undergraduate students in Washington indicate that males initiate dating behaviour as young as 14.3 years of age, while females go on their first date at the young age of 14.9 years of age (Guggino & Ponzetti, 1997). Zani (1991) reports that 63.3% of high school males in Italy reported that they desire to have a partner during adolescence. Nielsen (1998) argues that by 15, most American adolescents had one dating experience and by 18 they had evolved to experiencing the steady, more serious romantic relationship with either one or multiple partners.

The current research study of young males in rural areas in the Langeberg district presents similar statistics to those by Buga *et al* (1996) and confirms that young males in rural South Africa participate in sexual behaviour at an earlier age than their American counterparts. Referring back to Table 21, we find that 46.8% young males never went out on a date in the preceding three months. Yet more than 50% indicated that they were out on a date in the past three months either on a monthly, weekly or daily basis. Thus, dating behaviour under young males is an increasing activity and should be regarded as an integral component in sexuality research and intervention programmes.

4.2. Masturbation

Very little research on the understanding of masturbation can be traced (Oliver &Hyde, 1993). Masturbation for the adolescent male can be defined as a form of sexual behaviour that involves the touching and rubbing of the penis for the purpose of self-stimulation and/or self-gratification (Chakrabarti, Chopra, & Sinha, 2002; Lesch, 2000; Oliver and Hyde, 1993). Oliver and Hyde (1993) found significant gender differences in masturbation, with males dominating in this area. Gagnon and Simon (1973, cited in Oliver and Hyde, 1993: 46) noticed that during the period just after puberty boys masturbate much more than girls as "boys' sexuality is focused on masturbation" (Oliver and Hyde, 1993: 46). With an increase of sexual activity during this period, sexual behaviour usually occurs in privacy, secrecy and alone. From this perspective one can argue that the meaning of sexuality for adolescent males is totally focused on individual pleasure and satisfaction.



Graph 2: Young men's participation in masturbation (n=223)

Graph 2 gives a visual indication of the differences between young sexually active and non-active males' participation in masturbation. It is obvious that those males who are sexually active are much more inclined to masturbate than those who are not sexually active. 65.7% of non-sexually active males reported that they have not masturbated in the preceding three months, while only 43.4% agreed with this response. Almost 57% of the sexually active respondents reported that they have masturbated in the past three months.

The Kinsey report of 1948 reported that 97% of adult males masturbated regularly. Masters and Johnson argued in 1966 that masturbation usually starts as early as 4 years old, is discouraged, and restarts at an average of 14 years (Dacey & Kenny, 1997). It was found in an American college that 40% of college males recall masturbating before puberty (cited in DeLamater and Friedrich, 2002). In addition, DeLamater and his colleague argued that most males masturbate between the ages of 13 and 15. In comparing these Western statistics with a South African study, I notice that the age at onset of masturbation is the same in Western and South African studies. Bremridge (2000) found in her study of semi-rural South African adolescent males that 12.3% masturbated daily, 9.5% masturbated at least once a week and 14% masturbated at least once a month. In addition, Bremridge added that 59.8% of adolescent males reported that they never masturbated.

This high percentage of non-active adolescent males reporting non-participation in masturbation in the current research study and that of Bremridge (2000) could be ascribed to the stigma, shame and embarrassment that are attached to masturbation as a form of sexual release. Wight (1994) argues that masturbation is an embarrassment for young boys and is usually perceived as the inability of a boy to seduce any girl to have sexual intercourse. It could be that those young males who reported that they do masturbate on a regular basis feel comfortableabout reporting this because they had already experienced sexual intercourse. The fact that they have already experienced sexual intercourse negates any stereotypes that might be attached to masturbation. In general, this private form of sexual behaviour does occur amongst young adolescent boys and is in need of further exploration.

5. Sources of sexuality issues and communication with significant others (N=223)

In this section I will briefly refer to the sources of sexuality and communication with significant others about sexuality issues. It is to be noted here that the current research lacks exploration of specific sources of sexual information such as the media and teachers. Nationally, 70.3% males reported ever receiving HIV education in their lifetime, while 81.8% of coloured males in South Africa reported receiving HIV education in their lifetime (MRC, 2002). Although the media play an integral role in the lives of young people, with the loveLife campaign in South Africa dominating this domain, rural youths are still inadequately informed about sexuality issues and the gender categories that is associated with it.

Table 23: Communication and sources of sexual information (n = 223)

	Never	Monthly	Weekly	Daily	No response
Friends	14.9	29.9	19.9	35.3	0.9
Girlfriend	43.2	21.6	17.1	18	0.0
Parents	52.3	23.9	14	9.9	0.4
Pornographic magazines	31.2	44.3	14.9	9.5	0.9
Pornographic videos	19	42.5	27.6	10.9	0.9

In Table 23 I give an indication of the sources from which young rural males receive most of their information on sexuality from. It is evident that most young males do read pornographic magazines (only 31.2% said never) and only 19% never watched a pornographic video in the past three months. The majority of youths (52%) never discussed sexuality issues with their parents. This is problematic, since parents should play a prominent role in the construction of young males' sexuality. It can also be that, due to the high percentage of young males in this sample who have not seen their fathers or who grow up in single-mother households, they prefer not to discuss issues pertaining to sexuality with another female, like their mother, and thus choose to receive (false) information elsewhere. Only 42% of the parents in the loveLife study indicated that open communication about adolescent sexual behaviours can reduce the risk of young adolescents being infected with the HI-virus (2001). In addition, more than 43% of young males in the current sample (Table 23) do not speak with their girlfriends about sexual intercourse or sexuality, which is again an indication of the lack of communication that do exists in young adolescent sexual relationships.

The lack of parental communication with adolescent males about sexual issues and the lack of communication in sexual relationships increase young males' vulnerability to receiving inadequate sexuality education and hence their search for information in other sources such as pornographic magazines and videos increases. This can make young males susceptible to receiving false information and this in turn increases their chances of contracting the HI-virus.

5. Gendered opinions on sexual relationships

5.1 Sexual permissiveness

Table 24: Sexual permissiveness of young rural males (n = 223)

Sexual permissiveness	Totally agree	Agree	Unsure	Disagree	No response
Its in order for boys and girls to kiss hug and touch each other	10.4	35.1	34.2	20.3	0.4
I believe there is nothing wrong for unmarried boys and girls to have sex if they love each other	11.3	27.9	27.5	33.3	0.4
A boy and a girl must have sex before they get engaged to see if they are meant for each other	6.8	16.2	22.1	55	0.4
It is ok for boys and girls to have sex as long as they use contraception to prevent pregnancy	14	33.9	20.4	31.7	0.9
I believe you must love a person before you have sex with them	26	32.7	15.7	25.6	0

Table 24 explores young males' opinions on sexual permissiveness, more specifically, whether they agreed or disagreed on adolescents participating in certain sexual behaviours and whether they tolerate premarital sexual intercourse. In this sample 55% of young males disagreed that boys and girls must have sex before they get engaged and 27.9% agree that there is nothing wrong for unmarried males and females to have sexual intercourse if they love each other. At the same time 33.9% of young males agree that it is acceptable to have heterosexual intercourse as long as contraceptives are used. Almost 60% of youth agree that you must love someone before you have sex with them.

Kau (1991) explored young males' perceptions of premarital sexual intercourse and found that 47% of respondents argued that there is nothing wrong with premarital sexual intercourse. Kau (1991) grouped those who were unsure and disagreed together. If I follow the same methodology with the focus on unmarried boys and girls having sexual intercourse if they love each other, more than 60% of the respondents disagreed that premarital sexual intercourse is wrong. Only 31% of the young males in the LoveLife study agreed that "sex is only for married couples" (2001: 21).

The results for the young males in the rural areas of the Langeberg district differ significantly from those of Kau and the loveLife study. One can argue that this difference in thinking about sexual permissiveness is due to the different context and period in time in which this study was conducted.

5.2 Gender norms

Table 25: Gender norms (n 223)

		200			
Gender norms	Totally agree	Agree	Unsure	Disagree	No response
A boy won't have respect for a girl who agrees to have sex with him	8.2	24.1	39.1	28.6	1.3
Most girls who have sex before marriage regret it afterwards	29.9	46.2	14.5	9.5	0.9
Most boys who have sex before marriage regret it afterwards	17.6	32.4	22.5	27.5	0.4
I believe girls must stay virgins until they are married	35.1	35.6	14.4	14.9	0.4
Males need more sex than women It is ultimately the women's	13.9	23.8	36.8	25.6	0
responsibility that contraception is used properly	20.2	39.5	16.1	24.2	0

Qualitative studies revealed that gender norms and constructions of gender influence the sexual behaviour of young adolescents. Quantitative studies are not able to reflect these constructions in depth (Mouton, 2001). Table 23 gives an indication of the gender norms that young males subscribe to with regard to sexual relationships. This table indicates that 28.6% of young males disagree that a boy won't have respect for a girl who agrees to have sex with him, while the minority (8.2%) agree with this statement. In addition, gender norms and stereotypes are especially evident when these young males' opinions are solicited regarding whether boys and girls regret having premarital sexual intercourse. When the researcher grouped the totally agree and agree columns together, the research revealed that 76.1% of young males agreed that young girls regret having sex before marriage, while only 50% of young males regret having premarital sexual intercourse. The fact that more than 70% of young males believe that young girls should stay virgins until marriage reflect the gender scripts that exist in our society that young girls must retain their virginity until marriage and young men must be sexually promiscuous. The gender differences are also emphasised in giving women the responsibility for the use of contraception, where almost 60% agreed that it is the females' responsibility.

These data show that young males' perceptions of sexuality and their sexual behaviours are influenced by the gender scripts in our society that prescribe the behaviours of young men and women. The moment young men and women deviate from these gender scripts, they are usually labelled and seen as 'abnormal'. The influence of gender construction and how it intersects with sexuality can only be fully understood within a qualitative approach.

Conclusion

In this chapter the results of the quantitative data collected were presented. Further in-depth discussion is still needed on the findings of this chapter, which will be done after the qualitative data is presented in Chapter Seven.

In the next chapter I will discuss the detail of the interviews held with young sexually active and non-active males. In addition, I will analyse how gender constructions intersect with young males' sexuality.

Chapter 6: Qualitative results

Constructing a rural masculine sexuality

6. Introduction

The aim of this chapter is to highlight significant themes that came through in the qualitative interviews with young rural coloured adolescent men. During the thematic analysis of the twenty-one interviews that I conducted, I ended up being swamped with hundreds of codes. Following Aronson's (1994) advice, I combined related prototypes into sub-themes and derived the main points of discussion from these sub-themes. From the data received I focused my attention on those patterns that are already known within the literature pertaining to adolescent male sexuality, and I also looked at those themes that were unique in this sample of young rural men and that were not evident in the current literature.

In presenting the qualitative data, I used direct quotations from the participants and also kept their comments in their home language, Afrikaans, in order not to lose the lingo of these young coloured men. In addition, directly after the quotation, the participant is described with a fictional name to ensure anonymity, where the abbreviation **SA** refers to those who are sexually active and **NA** referring to those who are not sexually active. Directly after indicating the participant's sexual status, I also give the age of the participant.

Throughout the process of transcribing and analysing, I kept in touch with the literature on adolescent sexuality and wrote extensive memos even during the coding process. Aronson (1994) states that argument in thematic analysis is built upon frequently referring back to the literature, which ensures sensitisation of the topic on the basis of which to make inferences from the data received from one's own sample. In this chapter I first review the meaning that adolescent men attached to sexual intercourse. Secondly, I give an overview of rural adolescent men's sexual experiences and the risk behaviours involved. This is followed by the young men's constructions and feelings about homosexuality. Finally, I argue that young men are formulating a new generational construction of heterosexual masculinities due to the influence of sexual and health intervention programmes. The reader will notice that, throughout the process of understanding how these young rural coloured men construct a masculine sexuality, there are elements of misogyny and homophobia expressed by these young men that is similar to findings in research done both locally and internationally (Nel,

2003; Mac an Ghaill, 1994). However, it is within this process that young men also reconstruct their perception of what constitutes a masculine sexuality where being caring and sensitive plays an integral role.

6.1. Meaning of sexual intercourse

The meaning young men attached to sexual intercourse in this sample went beyond describing it as only penis-vagina penetration, although penis-vagina penetration was the only accepted form of sexual intercourse. The meaning attached to sexual intercourse was often derived from what they learned at school about sexual intercourse. In effect, sexual intercourse was given a rather general and biological reproductive meaning. These sentiments were shared by respondents in both the sexually active and non-active groups.

Seks beteken vir my, beteken nie eindlik wats wonders vir my nie... Dit beteken niks (Nico, SA, 17)

Dis maar baie algemeen, algemene kennis om seks te hê, ja. (**Eduan, NA, 15**).

Dis, dit is oor die algemeen. Dis, jy moet seks hê met 'n meisie... Jy moet seks het (met) 'n meisie... Hulle sê seks gaan uit die mode uit. Ek glo nie daaraan nie...Want die jongmense maak te veel kinders (**Petrus**, **NA**, **17**).

Op die laerskool het ek geleer oor seks... Seks is 'n man en 'n vroumens wat bymekaar kom en wanneer die mansmens sy penis by die vroumens se vagina indruk en dit is basies al. (Quintin, SA, 16).

Seks, seks, beteken eindlik vir my baie... Ek het baie geleer oor seks... Nee, ons het mos laas jaar het ons soe 'n hele blaai by die L.O. klas van die penis gekry en die baarmoeder en die (onduidelik) en die konsepsie en die vagina en wat ook... Seks is eindlik 'n, is nie 'n goeie ding nie... Want, meneer, baie, baie kinders word net gebore, jy sien. Dit is net, maar soos ek nou sien, waartoe die wêreld, wat tot nou toe in die lewe aan gaan, dan sien ek meisiekinders hier van 14 loop al met (babas) sien. Dis nie reg nie (Joseph, SA, 15).

Niks... Is maar net 'n gevoel wat kom en dan moet jy maar net jou behoefte bevredig met die meisie. Is 'n meisie gebruik... Sekere mans voel proud daaroor, maar ekke sal nie 'n meisie gebruik nie... Jy hoor altyd op die winkel se stoepe hoe brag die manne daaroor by die winkel. Hoe hulle die meisies- En as die manne nie kry nie, dan het hulle 'n sekere meisie waarna toe hulle gaan en dan gaan gebruik hulle haar om hulle behoefte te bevredig. (Robin, NA, 14).

The above excerpts highlight how an understanding of heterosexual intercourse is enforced upon young adolescents. Within the education system heterosexual intercourse is validated as the only acceptable form of sexual intercourse. Petrus articulates the importance of heterosexual intercourse when he says: "You must have sex with a girl." Joseph gives a brief indication of what they received in the Life Orientation classes. He further highlights

reproduction and how sex is actually becoming a problem for young people with more young women becoming pregnant. The uncontrollable urge for young men to release their sexual urges is also emphasised by Robin. He mentions how young men just use women for their own 'release' and how wrong this is.

However, for some of these respondents, sexual intercourse does not have a biological and reproductive meaning. There is more to sex for other young men than just the biological detail that they learn in school. For young men who have already experienced sexual intercourse, sex is just about having fun. For these sexually active young men, sex is just there to be enjoyed - to do the thing and get it over with. You do not necessarily have to know what meanings are actually attached to having sexual intercourse.

Dit beteken nou net, jy doen net die ding, dan is dit oor... Ek het, hoe kan ek dit nou stel? (silence) Ek het gehoor van seks en toe begin ek sommer die ding te doen en toe-... Ek weet nie eindlik wat dit beteken nie... Ek doen dit maar net... Want my tjommies, al my tjommies doen dit. Nou wil ek- ek probeer maar net in wees (Mark, SA, 15).

Seks is maar net 'n hobby vir my... Dit is net vir my lekker. Ek hou daarvan om dit te doen. (Mark, SA, 15)

Soos ek voel as ek vanaand ietsie wil hê (clap hands twice). Dan wil ek dit nou hê. Dit maak nie vir my saak waar ek is nie, maar ek soek nou op die oomblik. Kyk ek is mos soe, 'n man is mos soe, ek is soe. Ek raak gou gewoont aan 'n ding. As daai vroumens vir my miskien gewoont gemaak het aan 'n ding. As dit miskien nie op 'n Woensdag aand is nie, dan is dit miskien die Vrydag en die Saterdag . . . Lekker, dis lekker. Nei, daar is nadele en voordele (onduidelik). Op daai oomblik is daar Vigs wat rondt gaan, jy kan 'n meisie pregnant maak, jy kan 'lek' op tel... Lekker. Afkoel. Trots. Eerlikheid. (**Hugh, 19, SA**)

Both Hugh and Mark share the same meaning attach to sex, that it is all about the fun. For Mark, sex is like a hobby and for Hugh it is something that he is privileged to get. Hugh highlights the fact that sexual intercourse does have both pro's and cons, but why stop having fun. Sex is nice, relaxing, about pride and honesty. The traditional 'feminized' models of intimacy, which are associated with love and friendship (Kimmel, 2000) are not notable in the meaning that anyone attached to sexual intercourse. Hugh emphasises the importance of 'honesty' and 'pride' as components of sexual intercourse. Is he honest to himself, the girl with whom he has sex, the relationship or the sexual act itself? The 'pride' attached to sexual intercourse can be attributed to what can be called a 'manly' component of sexual intercourse. Having sexual intercourse for the first time and having multiple partners after that proves a

young man's heterosexual masculinity, hence the pride in having (hetero)sexual intercourse. This also relates to the notion of Holland and colleagues (1993) that sexuality is at the epicentre of young men's fight to be masculine. The emotional detachment from sexual intercourse, with more focus on conquest and the virility associated with the sexual act, is not only evident in this sample of young men, but was also shown in both local and international studies (Bremridge, 2000; Allen, 2003).

However, not all of these young men viewed sex only as a fun activity or just another part of human reproduction. For some of these young men sexual intercourse is more than just having sex for sex or just performing in what is expected of a man in terms of reproduction. There is a romantic side to these young men, who acknowledge love and intimacy as playing an integral role in their sexual relationships.

Want soos ek nou al gehoor het die rumors van party mense sê, seks is 'n lekker ding, seks is so, en party, is min, weinig mense wat sê maar seks is 'n ding wat, jy dra die waarde-iets van liefde. As jy rêrig lief is vir iemand. Jy seks nie sommer saam met enige een nie. Nou dit is hoekom ek was gefokus op haar toe ek seks gehad het saam met haar. Dit is amper soes ek wil my liefde uitstreel na haar toe. Ek weet nie of sy op die oomblik dieselfde gevoel het nie ... Seks is amper soos, dis die liefde tussen twee persone, wat hulle nog meer na mekaar toe bring of hulle deel dit saam mekaar hierdie liefde wat hulle het... Ek soek in seks iets amper soes in, iets wat ek net kan... Dit moet nie net vir seks wiesie, dit moet soos 'n ondervinding (wees) wat jy deurgaan. As (ek) miskien saam met iemand anders, saam met 'n ander persoon seks het, dan moet dit 'n ander gevoel wees. Want dit kan nie dieselle wees nie, want dan doen ek dit nie, dan doen sy dit miskien nie uit haar hart uit nie. Ek wil hê seks moet amper soes 'n, nie soes 'n droom nie, maar amper soes 'n DROOM wees wat moet WAAR raak. As jy nou seks het saam met die persoon dan moet jy amper, jy moet check jy is in die hemel! (Joey, SA, 20)

Joey is a very popular guy in school, rugby player, with 'macho' attitude. The meaning attached to what sexual intercourse meant for him is an indication of a different/alternative construction of what masculine sexuality is all about. That it is not just about those uncontrollable urges, but that it also entail sensitivity and sharing something that is wonderful between two consenting sexual partners. Joey's perception of what heterosexual intercourse entails and the meaning attached to it could be ascribed to the fact that he has been in this long-term relationship for almost two years. However, Joey's sentiment was also shared by other young men who viewed sexual intercourse as more than just having sex for fun or reproduction. Craig and Randall, for example, had sexual intercourse only once in their lifetime, and were not involved in a serious relationship, while Selwin is not sexually active

and is currently in a long, distant relationship, but will grab the first opportunity to have sexual intercourse.

Is net ah (sug) liefde tussen twee mense. Omgang tussen twee mense om intiem te verkeer (Craig, SA, 19).

Seks is eindlik vir mense wat regtig lief vir mekaar is. Is vir hulle gebedoel. Hulle sê voor huwelike seks is sonde. Wanneer jy getroud is, moet jy dit eindlik doen... Seks beteken liefde. As jy getroud is, dan partykeer, dan maak hulle, dan sê hulle "make love to me." Nou seks is eindlik deel van liefde (**Randall, SA, 14**).

Ek het eindlik gedink dit is net 'n woord, maar is iets wat baie mense nie; kom nie reg met dit nie... Baie mense kry seer deur seks, dis hoekom (Selwin, NA, 18).

Qualities including love, intimacy and pain that are deemed peculiar to women in sexual intercourse (Allen, 2003; Kimmel, 2000) are also notable among this sample of young men, resisting dominant discourses of male heterosexuality in which performance is considered the ultimate attribute of male sexuality. An alternative masculine sexuality is constructed, which deflects the predominant masculine construct described by Connell (1995, 2000), the hegemonic masculine, in which heterosexual conquest is the ultimate proof of performance and masculinity.

In the next section I will show how traditional constructions of male sexuality are apparent in the young men's sexual experiences and their risk-taking sexual behaviour. These traditional constructions of a masculine heterosexuality are further evident in the young men's homophobia. However, between these traditional constructions of a masculine sexuality, a new generational masculine sexuality is also emerging, which is evident in the latter young men's construction of a more 'feminine' perspective on sexual intercourse. Here I will show that within the struggle to prove one's masculinity through sexual prowess, young men also struggle to conform to gender and sexuality interventions in which equity and a responsible masculinity are emphasised.

6.2. Sexual experience and risky sexual behaviours

Ek was op daai tyd dronk gewees... En die meisie sien jy... Wag, ons kom toe van die (keuring) af sien jy. En haar ma sê vir my ek moet maar sorg dat sy by die huis kom, sien jy... En toe loep sy nou huis toe en ek is toe daar... En toe sit ek nou tussen vier klimmeide daar. Hier is vier meisies nou en ek wietie watter een moet ek nou chase nie, sien jy. Want al vier was nou op my case sien jy, en ek is al een tussen hulle daar... Maar die meisie is al lank al op my, man. Ek kom baie by haar, want my nefie gaan saam met haar suster uit. Toe ons huis toe gaan, toe slaap ek nou sommer by hulle in die huis. Die

ma wil toe nie hê ek moet huis toe gaan nie. Toe sê die aunty, maar ek moet sommer in die voorhuis slaap. Toe slaap hulle al, toe sê sy vir my, maar ons kan daar agter in die hokkie slaap. Sy bring die kombers en al... Nou drink ons verder 'n paar biere en ons drink nou die paar biere... OK en toe ek nou, toe ek nou - Sy't met my bymekaar geraak... Sy't by my, kyk hier, sy het begin, sy het eindlik die aanleiding gegee, sien jy... Sien, sy't teen my so gestaan – mekaar se geslagsdele, so- my penis teen haar vagina en ek het losgemaak en al die.... Daai tyd, daai tyd het ek nie gedink aan daai goed (voorbehoedmiddels) nie... Ek het nie! Ek het nie beplan vir die ding om te gebeur nie, sien jy. Toe kom (dit) net so uit. Toe is ek eindlik nou spyt op die einde van die dag, want ek wiet mos nou nie, nou eindlik haar verlede nie en so (Jeremy, SA, 20).

The above extract about Jeremy's first sexual experiment underlines many of the themes that will be discussed in young men's sexual experience and the risk that goes with it. Themes that can be highlighted in this extract include (1) use of alcohol during sexual intercourse, (2) the female initiating sexual intercourse, and (3) having unplanned sexual intercourse without protection. In addition, I will also highlight group sex as a high-risk sexual behaviour some of these young men participated in.

6.2.1. Alcohol and sex: "Then a man takes longer."

Alcohol use plays an integral role in these young men's lives. It is as if alcohol use is a replacement for the lack of recreational activities within this rural context. In a follow-up interview, I asked Mark what he did in the past month. His answer was simple:

(Laugh) Gewones, maar net die gewones... Loop (tavern), drink, seks (Mark, SA, 15).

Joey made it clear that alcohol use is a habitual weekend activity. There is no weekend without alcohol. Through observation, I found many young people (boys and girls) definitely under the legal required age, enjoying themselves in taverns, binge drinking.

Ahm, die afgelope tyd het ek geweldig gedrink. Dit is soos elke Vrydae aande, elke Saterdae aande. Daar is 'n tyd wat ek Sondae aande gedrink het. Voorheen was daar tye wat ek Woensdae en Donderdae aande gedrink het, en dan moet (ek) skool toe kom die volgende oggend... Ja, maar ek het nou afgeskiep, want ek en sy is nou meer close en die jol is nou leeg. Nou drink ek net Saterdae aande of Vrydae aande, is ek dronk nog altyd... Daar gaan nie 'n naweek verby nie (laugh) (Joey, SA, 20).

Alcohol use impacts negatively on the reproductive health of both young men and women. It is as a result of alcohol use that most young men participate in sexual intercourse at an early age.

Ek was 14 jaar oud, nei, 13... En ons het, ons was binne in Tavern⁹ gewees en ek was heelwat dronk gewees...En toe het sy my gelei na hulle huis toe, daar waar my broer hulle bly. Ek en hy eindlik alleen bly. En ek was, toe ek die volgende oggend op staan, toe lê sy langsaan my in my arms... (Mark, SA, 15).

The above extract is from a narration of Mark's first sexual experience. From the onset of Mark's sexual experiences, he had already started equating sexual intercourse with alcohol use. In addition, he does not always remember whether he used protection, as indicated in the extract below. In his first sexual intercourse, while under the influence, he noticed only the next morning that he did use protection.

Die kondoom was nog, was nog rond-om my penis. (Mark, SA, 15).

As ek drink, dan lus ek maar net vir seks. (Mark, SA, 15).

Dit gebeur maar net, sien jy. Jy het gedrink, sien jy, dan kom jy op die motjie af en die motjie staan so. Ek meen jy is 'n man. Jy, baie kere, dan kan jy net nie die dinge keer nie. Dan kan jy dit nie keer nie (**Hugh, SA, 19**).

Hugh emphasises how low a person's inhibitions are under the influence of alcohol. The sexual urges in relation with alcohol use become uncontrollable, something no man can hold back. If you are a man, according to Hugh, you will not be able to stop those sexual urges.

Alcohol use lowers a person's inhibitions and prevents one from making sound choices. Previously, Mark informed me that he cannot remember the last time he had sexual intercourse without the use of alcohol, but stated that it was sometime in the preceding year. The use of alcohol as a necessity for having sexual intercourse was also evident in a non-sexually active participant's narration of his near future plans to have sexual intercourse. Selwin is 18 years old and was adamant that he must have sexual intercourse as soon as possible. All his friends had already had sexual intercourse. Sexual intercourse, for Selwin, was easy and included picking a girl up at a local tavern.

Ek gaan yard (local tavern) toe... Kyk of ek nie daar vir my 'n meisie kry nie... Dan seks nou, dan seks nou kry... Dit gaan so maklik. Dit gaan so maklik (**Selwin, NA, 18**).

The young men in this sample also believed that being under the influence of alcohol also prevents one from ejaculating too soon. Throughout the process of building the sexual relationship with one of the girls, Hugh reasons that alcohol will prevent one from ejaculating

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⁹ Original name of pub omitted.

prematurely. The description focused on how he went about to have sexual intercourse with this girl and how alcohol played an integral role in this process.

Gaan jy nou (next naweek) of gaan jy maar nou probeer? En jy lat toe alkohol- En jy drink en meer drink, dan hou 'n man langer. Right toe, right die next Vrydag aand, toe ga't os net 'n stappie, ons gaan net 'n stappie verder. Vatterig 'n bietjie geraak en die Saterdagaand toe sit ek weer daar by hulle. Toe sy voel nou soe en soe, soe ons kan maar nou verder gaan. .. (**Hugh, SA, 19**).

Alcohol is not just used to delay early ejaculation, but is also used as a confidence stimulant when addressing women whom the young men are attracted to.

Ek kon nie juis gepraat het daaroor nie... Want ek was skaam gewees... Ek het nie guts gehad nie... Ek het dronk na haar toe gegaan... Want vir my was dit ons was te geheg, bevriend aanmekaar... En ek wou nie die vriendskap opbreek as ek (laugh) nugter is nie (Craig, SA, 19).

It is also through the use of alcohol that women are subjected to sexual abuse.

Dit het, voor dit gebeur het, ons was by 'n braai by ons huis. Ons het gebraai en ons het party gehou en daar was musiek alles. En toe het ek net die meisie aan die hand ge-agom die lyf gevat en kamer toe geneem... Ek het net om haar – sy was pap dronk gewees. Ek het haar net om haar lyf gevat toe loep ons kamer toe (Mark, SA, 15)

Mark, in the above extract, gave this account of a sexual experience he had while he and the girl were under the influence of alcohol. The girl did not give him any permission to have sexual intercourse, although Mark believed that she also wanted to have sex with him.

Exploring masculine constructions among young urban Ovambo men in Northern Namibia, Becker (2001) found that the use of alcohol was indisputably a male-defined attribute. Alcohol use by men was usually associated with violence.

Hugh delineates a subsequent sexual experience with an older married woman, while under the influence of alcohol. His description of this event is direct and emphasised how he coerced this woman to have sexual intercourse with him.

Ek sê toe, nee, maar dan gaan ek maar nou huis toe, jong. Dan kan jy maar vergeet van ons twee, jong, al is jou gevoelens ook hoe sterk. Ek sê vir haar nee, man, ek wil nou net daar wees en klaar. My punt is nou net, dis jou besluit nou. Hierso gaan ons twee nou besluit en klaar. Sy sê nee maar, man, soos sy praat, ek steur my nie, ek trek haar uit. So

aangegaan, so aangegaan, Sy sê nee, maar wat gaan die mense sê- Ek sê vir haar- jy moes dit gedink het voordat... Jy moes vir my gesê dit jou man kom huis toe net nou maa. Dis jou probleem, ek gee nie om nie. Is toe wat dit nou gebeur dat ek en sy seks toe het (**Hugh**, **SA**, **19**).

Alcohol use is not only evident among these young men, but has its roots within the family where violence was evident.

Ek het dit baie gedoen. Veral as ek gedrink was en ek sien 'n mansmens slaan aan 'n vroumens, dan gaan ek en dan gaan slaan ek hom... Dis nie my besigheid nie, dis (sigh). Ek het in soe 'n huis groot geword... Dit was nou nie my pa gewees nie. Dit was 'n ou wat my ma gehad het. En my ma het ook gedrink. Nou hy het dagga ook gerook en gedrink. Nou as hy daar van sy rondloop plek af kom, dan kom slaan hy my ma. Dan moet ons sit en kyk hoe hy dit doen. Ek het baie keer weggeloop. En ek weet nie of my ma van die ding se [houe] dood is nie, soos hy vir haar [geslaan] het nie (**Craig, SA, 19**).

In Friedman's (2001) data from the USA, problem drinking was a predictor of less condom use. In the South African context alcohol use has been shown to be related to young people's initiation into first sexual intercourse and also shown to play an integral role in lesser condom use (Fisher *et al.*, 1993; MRC, 2002). In exploring adolescent's perceptions of sexuality, Olivier's (1996) study perceived the abuse of alcohol and drugs to be highly related to an increase in sexual promiscuity. In the excerpt below, Hugh indicates how he was under the influence of alcohol and almost made the girl pregnant. They did not use protection while having sexual intercourse.

Daar was een oomblik toe ek dronk gewees het, toe is dit by die derde rondte, toe was ek hoeka daai aand gedrink gewees. Nee, nie gedrink nie, ek meen ek het alkohol in gehad. En ek en sy het so gesels terwyl ons besig was om te seks, toe gebeur dit. En ek was bekommerd gewees en sy was ook en gelukkig die Sondag toe raak sy siek (kry haar maandstonde) (**Hugh, SA, 19**).

The above extract indicates the risk young men and women take in having sexual intercourse without protection and under the influence of alcohol.

6.2.2. Group sex

Some of the young men in this sample described how they experienced sexual intercourse within a group setting. Craig's initial sexual intercourse experience was in a group situation.

Ek was sestien nou (die) eerste (keer toe ek) seks gehad het. (silence). Kon nie eindlik nou gekonsentreer het hoe die gevoel was nie, want my vriende het agter my gestaan. Dit was eindlik 'n beplande ding. Hulle twee, ons was drie...Ons al drie sou omgang gehad het met haar...Toe gee hulle vir my 'n kondoom. Toe moet ek nou eerste gegaan (het)...

Toe staan en maak hulle grappe agter my. Ek het nie gekonsentreer op wat ek nou ervaar het nie...dit was 'n groep ding gewees...Ek kon nie gekonsentreer het op wat ek ervaar het op daai oomblik nie. En die meisie wat onder is, het ook nie, wou ook nie eindlik met my omgang gehad het nie... Sy wou met een van my ander vriende omgang gehad het... Dit was op 'n Woensdagaand. Ek en sy was in die Katkisasie klas en toe wag hulle vir ons buitkant die kerk yard...Toe maak hulle die date daarso. Ek sou nie saamgegaan het nie... Die Woensdagaand by die kerk ja, toe kry, wag hulle daar buite, toe kom ek en sy uit en toe sê hulle maar hulle het 'n date gemaak, nou moet ek saamgaan...Sy weet daarvan. Sy het eindlik voorgeloop. Ons het agterna aangekom. Sy het gaan wag by die plek (Craig, SA, 19).

Craig highlights how impersonal his first sexual intercourse was for him. He repeatedly states how he could not concentrate on how it felt to have sexual intercourse. He adds that he did not want to have sex with this girl and that the girl also did not want to have sex with him. Peer pressure and what happens in a peer network play an integral role in this process. Simultaneously, the girls' reputation of being sexually active is also a factor before the group sexual play is acted out. In the abstract below, Cecil stresses how his friends told him how sexually active this girl was.

Ek het, ek het 'n meisie gebowl nê. Maar my tjommies wil ook by die meisie gewees het... Nou my ouens het mos nou al vir my gesê ja, maar sy seks soe baie en al die goete. Toe vra ek nou vir haar of sy seks. Toe sê sy-Toe vra ek of sy seks saam met my sal het. Toe sê sy ja, sy sal. Toe sê ek nee, maar ek maak net 'n joke. Toe sê sy nee, man, kom ons gaan. Toe dwing sy my tot daar. En ek het seks gehad saam met haar en my tjommies het ook gekom, Almal. En ek het tweede rondtes; almal het tweede rondtes gehad. En so het dit aangegaan. (Cecil, SA, 18)

The responsibility for the sexual act is placed on the woman. Cecil argues that the girl 'forced' him to have sex with her. This, according to Cecil, she did by repeatedly stating that they must have sex with her.

Girls also had to prove themselves by being sexually active with the young men in the group before they could be part of the group.

...Ek sal vir jou sê my tjommies, ons is gruwelik. Ons het baie dinge al gedoen al saam met vroumense. Die vroumense wat al saam met ons in 'n groep gewees het, sy moet eerste deur die hele groep gegaan het, en dan kan sy eerste in die groep gewees het...Ja, maar ek was altyd baie min by. Ek was net een keer by...Miskien vanaand nê, is sy by dié ou. Hy gaan vanaand nou die kind druk. Net vry, is nie nog-'right is oraait, vry jy vanaand'. Die ou wat nou eerste reg kom, hy's mos nou, hy is daar BO...Hy's die ou. Ja, daar was baie, maar ek het nie eindlik geworry nie, want die meisies wat hulle, hoe kan ek sê, hulle was vuil gewees. Ek hou nie van-...Nee, man, jare. Kyk hie nê, toe sy by ons, toe die meisie by ons groep aangekom het nê. Toe het sy al voorheen, sy's jonk gewees, maar sy het al 'n ou man gehad. En sy was'ie, sy drink. Ek hou nie van 'n vroumens wat drink nie man, veral nie baie drink nie. Sy kan drink nê, maar sy moet haar darem nie oor

haar limit drink'ie. Net 2, 3, 4 biere. Sê ses biere op die meeste, dan is sy moeg. Nou daarom voel ek soe. Nou volgens daai, as sy nou my meisie was en dan sê ek sommer sy is sommer sleg (**Hugh, SA, 19**).

In the above depiction of group sexual behaviour, the girl first needs to prove herself before she can be part of the group. In this process, a hegemonic masculinity is also achieved. Hugh highlights how the moment one of the young men first had sexual contact with a new woman in their group, then he is perceived to be the 'man' ("die ou"), because he had the first sexual contact with this woman. Again, Hugh also excluded himself from this behaviour, arguing that he does not like being part of these actions. Craig also earlier on argued that he did not want to be part of it, but still went along.

What is also evident in Hugh's depiction of the girls, who do participate in these sexual acts, is how he describes them as being dirty and 'sleg' ('bad'). Although the sexual act already occurred, Craig also degraded the woman with whom he experienced his first sexual experience.

Agterna was ek nog vir 'n week skaam vir haar, maar na daai- Want sy gie 'watsenaam' vir sommer drie vier ouens op 'n aand... Vir my was dit prostitusie, want ek was nie weer naby haar nie. (Ek het) maar net nou daai aand gegaan (Craig, SA, 19).

The women are immediately degraded for participating in such a sexual act and for using alcohol. Simultaneously, the young men who participated in this sexual act are put on a pedestal and complimented for their sexual behaviours, even when the man is under the influence of alcohol. Even within the group context, young men, it seems, are given higher status when the action occurs in front of everyone or everyone knows about it. The sexual double standard is thus emphasised in these young men's narrations of their sexual experiences.

Craig also emphasised that he was unable to concentrate while having his first sexual intercourse in this group situation, due to his friends' banter. But, although he had a choice of not going ahead with the sexual intercourse, he also just wanted to prove to his friends that he is a man, even if it means having sexual intercourse with a girl they organised for him, in front of them.

Toe sê hulle ma', dis nie, hulle het my nie nog geforseer om nog steeds deel van die groep te wees nie... Maar ek het net- Op daai oomblik het ek net gevoel ek gaan my vriende verloor as ek nie nou die... Want hulle almal praat daaroor, oor seks en al die

goed. En eks 'n virgin en al die klomp goed...: Ek het uitgevoel ja... Ek weet- Ek kon dit net nie meer vattie man (Craig, SA, 19).

The pressure of friends on young men to have sexual intercourse and prove their masculine heterosexuality has a great influence on the risk-taking behaviour the young man will participate in to prove his masculine status. Exploring gang rape on the Cape Flats, for example, Moolman (2004) argued that through gang rape, male gang members achieve power and control by capitalising on women's bodies and hence validate their masculinity as gang members. The young men in the sample of the Langeberg district did not view the group sex activity as a form of rape, but argued that the women who participated in this sexual act gave permission for the act to occur, and they are afterwards degraded by these young men.

6.2.3. I'm a man! She's a slut!

In the section above it was seen that women who participated in the group sex activity were degraded and labelled as being 'dirty'. The double standard of sexuality and sexual behaviour will be emphasised in this section in which young men are commended for their sexual prowess and for participating in multiple sexual relations, while women are degraded and labelled as 'dirty' or 'sluts' when participating in the same sexual behaviour.

Dan wil jy (onduidelik), jy's man. Jy voel jy's 'n (merc), dan jag 'n motjie vir jou, nie jy vir haar nie... Want baie keer is dit nê, vroumense is slette... Ja, want hulle jag baie keer... Ek, ek is so 'n persoon nê, ek vind eerste uit oor 'n meisie. Moet ek haar nou 'n kans gee, al het sy niks gedoen nie. Sê, ek vind uit nei, die meisiekind het al te veel rondgegaan, sy jag my, dan gaan ek sê, hey, jy's 'n SLET (beklemtoon).... Maar nou, vra ouens baie keer, daar is mos baie meisies wat ook in beheer wil wees... Sy's 'n Class speler. (Hugh, Sa, 19).

Want dit gaan swaar wees vir my... Want sy het, sy het ervaring en ek het nog nie ervaring nie... Want sy's 'n CLASS speler, soos die manne sê (**Petrus, NA, 17**).

Soes in miskien nou weet om vroumense te bowl en te praat, hy weet nog nie dit nie. Nou gaan die vroumense dink, naai, hy's te stadig, ek overpower hom sommer (**Joey, SA, 20**).

In the above excerpts the young females' sexual experience is labelled in two distinct ways: (1) girls who are hunters and have a vast amount of sexual experience are classiefied as 'sluts', and (2) girls who have a lot of sexual experience and always want to be in control are considered 'Class players.' The differentiation between these two types of girls is to indicate that girls who hunt men do not receive a lot of respect from these young men. And those girls who want to be in control within the sexual relationships, who do have the experience, are, in

a sense, more respected. Simultaneously, those girls who are 'Class players' and who know what they want in a sexual relationship also make it difficult for those young men who do not have a lot of sexual experience. These two types of girls contradict the gender (sexual) script that is the socially accepted ways of doing things and are thus challenging dominant discourses of female sexuality by being sexually active and risk the loss of a so-called respectable 'feminine' reputation. In contrast to the degradation of an overt female sexuality, the young men who demonstrate sexual performance and are known to be sexually active are commended as masculine and even respected among peers.

Net gewys (dat) ek is die ou (Randall, SA, 14).

Ek is nou net daai ou!...(laugh)...: Ek wiet ek gaan uit en iewers daar buite gaan ek miskien nou seks gou bietjie het. Ek wiet ek gaan uit om te drink en om myself te geniet (Mark, SA, 15).

En ek het meer vroumense eindlik toe gekry want ek het ook mos nou al die experience hoe om te praat saam met vroumense. En ek was self skrikkerig om vir my eie meisie daai tyd vir 'n verhouding te vra, want ek het nie geweet hoe nie. Maar toe het ek mos nou ondervinding gekry en toe voel ek ek het ook mos nou ondervinding gekry. Ek kan saam met vroumense praat ...Dit was, sieker maar nou so, ek het begin rond kyk vir ander meisies. En ek het gevoel dat my gevoel het gedaal vir haar, maar dit was nie so nie, daar het net ander belangstelling (opgekom). Amper soos nou op die rugbyveld. Ek en sy is nou bymekaar, maar daar is nog ander opponente wat ek nog kan aanvat. En dit het my nou 'n bietjie laat afdwaal van die verhouding af en dit was verkeerd op ons verhouding (Joey, SA, 20).

For a young man, having sexual experiences gives him confidence to pursue more sexual relationships. However, the moment a young man knows that the girl with whom he is going to have sexual intercourse is more sexually experienced than he is, this makes him nervous and in a sense he feels that the girl is exposing him because of her previous experience. This previous sexual experience does not necessarily have to be having had sexual intercourse, but also just being seen with a lot of boyfriends.

Ek was skrikkerig, op my nerves, ek wietie wat om te doen nie. En dit was vir haar ook die eerste keer, maar sy het al... sy het my blootgestel, sy is al gewoont al aan hierdie dinge (Joey, SA, 20).

Nou ek is, ek is skrikkerik, want ek meen, sy het meer experience as wat eke (het) (**Hugh, SA, 19**).

Sy het al voorheen die dinge gedoen en ek weet daarvan. En toe-Sy wil ook seker saam my seks gehad het (Quintin, SA, 16).

The above excerpt from Quintin also shows that the moment a young man knows that a girl is sexually active, it is also just assumed that she is available for sexual intercourse with anyone, anytime, and that she obviously wants to have sexual intercourse. The young women referred to by this sample of young men, although they were degraded if they had too much sexual experience, are also given a lot of sexual agency in which it is usually the women initiating the sexual intercourse.

Ek het agtergekom dat as sy haar, sy sy ah - sy soen my met 'n oop mond. Ek het nie dit geweet nie, toe het ek net begin oop mond soen en toe druk ek my tong in haar mond in... (**Eduan, NA, 14**).

Daar in die pad gespeel en toe kom sy ook daar verby en toe roep sy my. Toe vra ek vir haar wat is dit. Toe vra sy vir my of ek nie belangstel in haar nie. Toe sê ek, wel ek sal maar dink oor die saak. Daarvandaan het ons mekaar aanmekaar raakgeloop en toe het ons nou beginne, ons het mekaar beginne leer ken. Baie gesels en ek het baie by haar huis gekom ook en soe het dit gebeur (**Justin, NA, 16**).

Ek en die meisie nê, ons het uitgegaan. Ek en die meisie het uitgegaan nê. Right en die aand nê, toe- Nou my vrinne het so gebrag by my van ja, (hulle) maak soe, hulle seks soe lekker en wat wat, en toe is die meisie ook nou – en wat sê sy sy wil ook nou seks hê en al die goete, maar toe wil, - maar ek is nie sommer 'n ou wat uit my eie uit na 'n meisie toe gaan en saam met haar seks het nie. Sê sy nou vir my maar ja,ons kan seks het en wat wat. Toe sê ek vir my tjommies maar ja ek gaan nie nou twee keer dink'ie, want dit gaan dan nou my eerste keer (wees) wat ek ook nou gaan (seks het). Toe gaan ek mos maar nou en seks gehad (Cecil, SA, 18).

The young men in this sample reporting that women show more sexual agency in sexual relationships contradict the conclusions drawn by Lesch (2000) in a study on young women in semi-rural Western Cape, which argued that women lack sexual agency. It is reported here by these young men that women do initiate sexual activities and are sometimes even the ones who are the teacher within the sexual relationship (for example in Eduan's case). However, one can also assume that the young men in this sample do not want to take responsibility for their actions and thus shift the responsibility to the women who apparently initiated the sexual act.

6.2.4. She's a virgin, she does not have AIDS: Condoms is bad luck

En daar was nie...Daai tyd was daar so 'n gesegde wat rondloop "gaan jy Kaap toe" maar dit is eindlik die teken gaan jy nou seks het. En toe, maar net vir die fun het ek toe die versoekie gestuur aan haar, ons gaan Vrydag Kaap toe. Maar toe was dit nou nie eindlik die Vrydag nie, nou Dinsdag, toe het ons nou dit beoefen. Ons was skrikkerig, ek was selfs op my nerves.Ons altwee was gestres na dit. Het ek, was dit vir my so amper: Het ek nou kind gemaak? Wat gaan aan? En sy was self geworried. Sy was nog nie blootgestel

aan sulke goed nie en ek het begin om te worry en gedink, moet ek uit die skool uit gaan, moet ek gaan werk? Sy het self gesê sy weet nie wat om te doen nie, want sy het net begin'te bloei en dit was skokkend, want dit was nie haar tyd nie, die maand van haar periods nie. Later aan toe vind ons uit maar sy's nie preggies nie, want sy het toe weer normaal siek geraak. En toe het ons maar besluit ons gaan dit safe oefen. Maar aanmekaar as die gevoel opgekom het vir seks, dan het ek nie safety gehad nie, dan moet ek dit maar uit ruk metode gebruik (Joey, SA, 20).

In the above extract Joey depicts his first experience of sexual intercourse. Without going into the feelings of how it felt, the consequences of that first inexperienced sexual event is immediately highlighted. Joey remembers in more detail how they were worried after the sexual intercourse occurred because they did not use any precautions. However, even though they were stressed, wondering if his girlfriend was pregnant and whether he now has to leave school to support his girlfriend, this did not prevent them from having subsequent sexual intercourse without protection. The withdrawal method was repeatedly used in subsequent sexual intercourse events. The non-use of condoms and the use of the withdrawal method were repeatedly mentioned by both young sexually active men, and also evident in the discourse of non-sexually active men.

The non-use of condoms was indicated by the majority of young men in this sample who were sexually active.

Want ek het nog nooit kondome gehad nie (Quintin, SA, 16).

Ons worry nie oor voorbehoedmiddels nie (Hugh, SA, 19).

Ek weet dit is veilig, maar as ek nie een het nie dan worry ek nie (Mark, SA, 15).

Néé, daar was nie kondome betrokke nie (Nico, SA, 17).

Sy is ook dan 'n virgin...Vir wat is die kondoom nou nodig?... Sy het ook dan nog nooit seks gehad nie. En ek het ook dan nog nooit seks gehad nie. Waarvoor is die kondoom dan nou nodig?... Sy het ook dan nog nooit seks gehad nie. Sy sal mos nou nie siekte het nie of soe nie (**Selwin, NA, 18**).

Although Mark knows that the use of a condom is safe, if there is no condom available, he does not worry about it. Selwin, who did not have sexual intercourse yet, argues that it is unnecessary to use a condom if both he and the girl are virgins. The withdrawal method was emphasised by these young men as the most used form of preventing pregnancy.

Nee, as jy mos nou - hoe kan ek nou - As jy mos nou voel dat jy gaan nou kom, dan ruk jy mos gou uit (Nico, SA, 17).

Sodra my, sodra ek voel ek kom dan ruk ek uit (Mark, SA, 15).

Dan haal ek uit (Quintin, SA, 16).

It was more important for these young men to prevent pregnancy than prevent contracting HIV/AIDS or any other STD. It can also be assumed that the young man's own sexual satisfction was more important than that of the young woman's.

In addition, sexual myths pertaining to prevention strategies as reported by Varga (2000) were also evident in this sample of young men as reasons for not using condoms.

Want, as ek - Somtyds loep ek met die kondome dan kry ek nie seks nie en my tjommies sê vir my dis altyd badluck as jy met 'n kondoom in jou sak loop (Mark, SA, 15)

Want ek het nog, want ek het mos nog gedink sy is mos 'n virgin... En wat ek gedink het, virgin, dan kan sy miskien nie Vigs het nie. Toe het ek maar seks gehad met haar (Cecil, SA, 18).

Daar kan miskien, die kondoom kon miskien nie reggewees het nie. Miskien het ek nog kind gemaak of so. Ek het haar net gevra (of) ek kind gemaak (het), toe sê sy ha-ah(nee) (Randall, SA, 14).

Dis ahm, as ek vroeër seks het, sal ek 'n kondoom gebruik. Dit is beter. Dis, voor die huwelik, troue, jy maak 'n kind by 'n ander meisie, dan die vrou waarmee jy moet trou gaan nie lekker voel nie... Maar kondome is nie 100% nie. Nie alle kondome nie. Die wat jy by die hospitaal kry is nie 100% nie. Dit skeur gou... Want my tjommies vertel my dit skeur gou... Hulle moet drie of vier gebruik? (Robin, NA, 15).

A young man's decision to use contraceptions or condoms in this sample is based upon whether the girl is perceived to be a virgin or not and his friends' perceptions of the use of condoms. These young men reported that their friends perceive that carrying of condoms prevents one from attaining sexual intercourse and they are thus bad luck, and condoms tear easily and are thus not 100% safe.

The young men in this sample tend to identify girls who are on contraceptions and with whom they do not have to use condoms with:

Daar is baie meisies wat op die inspuiting is, maar wat nie eindlik seks nie... Ek ken mos al baie kinders. Die meisiekinders in die dorp, dan, nou ek en my tjommies, ons is altyd by die kliniek soos vir sy ouma-hulle te gaan pille haal, my ma-hulle, pa-hulle ens. Nou dan vra ons vir die kinders wat kom maak hulle by die kliniek, dan sê hulle, ja, maar hulle kom haal inspuitings wat voorkom dat hulle nie kinders moet kry nie (**Selwin, SA, 18**).

Injectable hormones, it seems, are the most often used method by the young women in this rural community, as reported by Cecil. Except for identifying girls at the clinics, the young men in this sample, and as also reported in other related South African studies (Tillotson & Maharaj, 2001), added that trust within a relationship is an important factor for not using condoms within the relationship.

Nee, ek het nie geworry nie. Omdat sy het vir my gesê en as dit gebeur dat sy swanger word, dan gee sy nie om om van my te verwag nie, want ten minste, sy sê die ander mans, kan nie werk nie. Hulle kan nie die goed doen wat ek doen met my hande nie. Ja, en sy trust my volkome. Sy gee ook nie om as sy pregnant is van my nie. Sy gie ook niks om daaroor nie, want sy is daar by my (**Hugh, Sa, 19**).

Betroubaar aan haar gewees en alles die... Ek het geweet nou nie een van ons twee sal vir mekaar Vigs gee nie. Ons kan nie baby maak nie (Cecil, SA, 16).

Trusting each other plays a vital role in the use or non-use of condoms. These young people just know that they won't give each other AIDS, because they trust each other. In addition, it is again emphasised that preventing pregnancy is more important in the relationship than preventing the spread of HIV or STDs. It can also be assumed from the 'trust' factor that young men perceive themselves to be at low risk of contracting the HI-virus. However, not all of the young men were so easily convinced that having sex without a condom is safer and that flesh-to-flesh contact was better.

Van vandag se meisiekinders hulle, hulle seks sommer saam met al die ouens hier. En as jy nie nou 'n kondoom gebruik nie, dan kan jy miskien; jy kan VIGS optel, want VIGS is mos 'n siekte wat kan versprei word en so (Joseph, SA, 15).

Om my te beskerm teen Vigs en ander virusse. En om my te beskerm om op die tienerstadium kind te maak (Nico, SA, 17).

Ja, partyslae ek- Die eendag dan is dit soos in ek dink, sê maar ek gaan nou soos in- Sê maar my vriende praat nou daaroor, dan vra ek nou vir hulle, gaan hulle nie condoms gebruik nie dan. Dan dink ek nou eerste daaraan, condoms gebruik of sonder 'n condom, maar in die mean time is ek altyd soos in, as ek, as my vriende gaan dan sê ek altyd vir hulle hulle moet condom gebruik (**Eduan, NA, 14**).

However, those men who do perceive HIV/AIDS as a threat and that the use of condoms is necessary in both steady and casual relationships, in a minority. Although the young rural men in this sample do perceive the importance of preventing the contraction of HIV/AIDS or any other STD, concerns about missing out on the fun in sexual intercourse is noted by Mark.

Die mense praat baie van Vigs en vuilsiektes... (Silence) Ek is nie gewoont daaraan nie... Aan die Vigs storie. Ek steur my nie daar aan nie... Want seks is lekker en ek wil nie nou al ophou nie (Mark, SA, 15).

In the next section I will show how important female virginity is for young men, especially for those young men who have not had sexual intercourse yet.

6.3. Non-active men: "Meisie, ek soek 'n virgin."

Vir my is dit belangrik dat ahm, die vrou moet altyd beskerm wees om, sy moet nog altyd 'n virgin wees om te wees waar sy wil wees. Daar is seuns, sommige vroumense wat vooruit beplan om kinders te hê en hulle wil ook nie seks hê om hulle virgin te breek voor die tyd nie. Dis hoekom (**Justin, Na, 16**).

The issue of female virginity in the South African context has received a lot of attention in recent years and the importance of this for young men varies from context to context (Leclerc-Madlala, 2002; Kelly & Ntlabati, 2002). In the Zulu culture, for example, it was found how virginity testing was highly valued and virgin cleansing as a cure for AIDS was also recognised (Leclerc-Madlala, 2002). Bremridge (2000:109- 110) found that female virginity for young men in semi-rural Western Cape was considered "a gift or a loss" in which young men saw women giving their virginity to those men they loved and a loss for the girl in which "the seal of a beautiful package" was broken. In this sample of rural young men, female virginity also received much attention, especially by those young men who were not sexually active.

Daar het 'n meisie in my lewe aangekom... Ek het nie belanggestel in haar nie... Nee, sy het vir my gesê. Ek het haar gevra of sy al seks gehad het, toe sê sy ja. Dan gaan ek vir haar sê – "Meisie, ek soek 'n meisie wat nog 'n virgin het." (**Petrus, NA, 17**).

Want ahm, daars vele vrouens wat nie virgins het nie wat ah, probeer om seks te het waar hulle gouer ahm kinders sal kry. Dat man eerste deur die proses gaan om jou vrou se virgin te laat breek. Dan endlik is jy ahm, dan is jy eindlik- First time sal ek eerste vra of sy nog 'n virgin is. En as sy nou sê ja, dan sal ek nou probeer om nou seks te het (**Justin, NA, 16**).

OK, ahm. Soos ek nou gesê het, dit sal wees, sal nou nie condom- As sy wil hê ek moet haar 'V' dra, dan sal ek dit nou sonder 'n condom doen, maar as sy nie wil nie, dan sal ek dit maar met 'n condom doen (**Eduan, NA, 14**)

For these young men a woman who is no longer a virgin is not considered as a possible candidate with whom they are going to share their first sexual experience. Taking a girl's virginity is almost like carrying a crown for these young men and the chance that a condom will be used in this initial sexual intercourse event is very low. At the same time, these young

men are also vulnerable to peers' banter, if it is known that he is losing his virginity and is having sexual intercourse for the first time.

OK, hulle sal so sê, maar my vriende hier aan die ander kant, as hulle hoor jy het, sê maar, jy het seks gehad. Hulle vertel vir almal (onduidelik). Ja, jy is nie meer 'n 'V' nie en al die... OK, ahm. As dit die eerste keer is, sal ek nou ongemaklik voel. Ek voel nie reg nie, maar soos dit aangaan en aangaan en aangaan, dan sal ek , dan sal ek maar nou net moet sal verstaan. Dan sal ek nie meer worry oor wat hulle sê nie (**Eduan, NA, 14**).

Thus, instead of being praised for not being a virgin any longer, for having had sexual intercourse, young men who have had sexual intercourse are vulnerable and subjected to peer ridicule. However, these young men do not consider having sexual intercourse with a virgin necessarily as a gift or a loss, as indicated in Bremridge's (2000) study. Instead, the primary reason for wanting to have sexual intercourse with a virgin is more about protecting the self against HIV/AIDS.

Maar jy kan nie alle mense vertrou nie. Want sekere mense het vigs, sekere mense het nou nie, maar wie sê nou nie sy het nie... Ok, ek sal laat toetse maak by die hospitaal (Eduan, NA, 14).

Ha-ah (no). As sy vir my sê sy's 'n virgin, dan sê ek nee, ek moet seker maak, want ek is nie so 'n tipe persoon nie (Eduan, NA, 14)

Ahm, die virus wat in die rondte loop nog. Daar is sommige mansmense wat ah wat met twee vroumense al seks gehad het. Nou dan word die virus oorgedra na die vroumens toe en dan, as sy nou nie (onduidelik) dan sal dit mos nou oorgaan na die baba wat sy sou kry. Dis hoekom 'n man nie voor die tyd of 'n vrou nie voor die tyd moet seks het nie (Justin, NA, 16).

In the above excerpts HIV/AIDS is highlighted as a primary reason for delaying sexual intercourse and having sexual intercourse with a virgin. This perception of going for HIV tests to make sure the girl is not infected and delaying sexual intercourse are an indication of the strides sexual and HIV/AIDS intervention programmes have made in combating the spread of the HI-virus. The perception of young men delaying sexual intercourse and going for HIV tests is a step in a new direction of constructing alternative heterosexual masculinities that does not coincide with the achievement of a hegemonic masculinity.

However, not all of the young men considered virginity as the be all and end all of sexual relations.

Nee, as ek nie self nie meer 'n virgin is nie, dan hoef daai vrou ook nie meer 'n virgin te wees nie. Want dan is dit onregverdig. Die seun is nie meer 'n virgin nie, maar die vroumens is 'n virgin. Altwee moet maar virgins bly en hulle lewens spaar (Justin, NA, 16).

Deesdae kry jy nie meer vrouens met virgins nie. Outomaties, omdat dit is maar net weereens groepdruk wat hulle daar het. En ek sal nie worry as ek 'n vrou met 'n virgin of sonder 'n virgin kry nie. Solank ek net wiet, in die huwelik het ek haar gekry. Outomaties, ek het gewag vir die regte vrou- (onderbreking). En ek het gewag vir die regte vrou. Never mind, ek sal nie nog weer dink aan die dinge wat sy gedoen het nie nog daai tyd nie. Omdat, 'n mens, ek kan nie weer op daai probleme neer kom nie. Omdat daai tyd was ek ook jonk en ek het my ook geniet soos sy haar geniet het. Maar ek sal nie nog worry oor vrou wat 'n virgin is nie... Maar meeste van die mans gebruik nie kondome met virgins nie (Steven, NA, 18).

Although Justin values female virginity highly, he also argues that it is not fair that the woman should stay a virgin for the man and the man is not one. Justin insists that both men and women should abstain from sexual intercourse and not risk being infected. Steven does not care whether the girl is a virgin or not, and regards the sacredness of marriage as much more important than having sexual intercourse with a virgin for the first time.

Although the young men in this sample valued female virginity highly, their reasons for having sexual intercourse with a virgin were not just about the breaking of the 'seal,' but also as a means to protect the self against being infected with the HI-virus. These young men, in the process, construct alternative forms of masculinity in which their sexual health is considered as an important part of their masculinity. At the same time, by having sexual intercourse with a virgin, the young men in this sample are also vulnerable to early fatherhood, as condom use is not always considered as important in that first sexual intercourse event

6.4. Constructing male (homo)sexuality

6.4.1. "Like they say: They are gay people."

Manlikheid? Jy moet 'n meisie vat, dan is jy 'n man. Maar jy kry mans wat gay is, dan is hy nie manlik nie... want hy maak dan met 'n ander man, maar daar is genoeg meisies (**Petrus, NA, 17**).

According to Petrus above, being gay or homosexual is definitely not masculine. Masculinity entails having sex with a woman. Petrus's definition of what masculinity or a masculine

sexuality entails is shared by many young men across the globe. Whitehead (2002) notes that heterosexuality is considered the 'norm' when reference is made to male sexuality. 'Compulsory heterosexuality' thus forms an integral part of how a masculine sexuality is constructed. Gay men cannot be masculine because they have sex with men whereas men should have sex with women. The sentiments of most of the young men in this sample are that men who have sex with other men are definitely not masculine.

Nee! Hulle is vroulik! (Cecil, SA, 18)

Hulle is moffies! (Mark. SA. 15)

Dis soos in, ja. Dis ongemaklik vir jou, want 'n mansmens wat 'n mansmens opklim, hy issie 'n mansmens nie. Soos hulle sê: hulle is gay mense! (**Eduan, Na, 14**)

Want as jy met 'n ander man seks het, dis mos nie manlik ne. As jy met 'n vrou seks het, dis manlik (**Robin, NA, 15**)

'n Man gaan mos nie dit doen nie (Craig, SA, 19).

The construction of homosexuality excluded from masculinity is an indication of how heterosexual masculinity is culturally and contextually accepted in this community. It shows how the young rural men in this sample are socialised to show manly attributes, being homophobic and ultimately having sex with a woman. Homophobia is strongly associated with being heterosexual . Homophobia, the fear of homosexuals (or fear of being labelled homosexual), is a means by which boys highlight their heterosexual masculinity and 'police' the boundaries of being masculine.

Homophobia is rooted in boyhood 'otherness' (Plummer, 2001). Young men label those men who show effeminate behaviour as being gay. Phoenix, Frosh and Pattman (2003) found in their study that young men who played with girls too much were perceived to be non-masculine by most of the 11- to 14-year-old boys interviewed in their sample. When I enquired what masculinity entails in a follow-up interview, Eduan distinguished himself from other young men by stating that he is different to other people.

...Ek is nie soos in dieselfde persoon soos ander kinders nie...Ek is nog 'n persoon wat hou van speel saam met meisiekinders. Ek hou van tjommies wees saam met hulle. Ek het die meeste vroumens tjommies by die skool. Orals waar ek kom, ek speel met meisiekinders (**Eduan, NA, 14**).

Eduan's feeling about being different and playing with girls thus makes him liable to be labelled as effeminate (cf. Phoenix, Frosh & Pattman, 2003). This also highlights the 'otherness' when different masculine sexualities are constructed, especially if those men who are considered different lack the stereotypical masculine attributes. Earlier on Eduan himself argued that homosexual men are not masculine and constructed them as 'other' by stating "like they say: they are gay people!" His own unexpected sexual contact and experience with a gay man only increased his dislike of, and homophobia towards, homosexuals. In the extract below Eduan shares his feelings after he unknowingly kissed a boy on his lips, thinking it is a girl.

Soos in, GESKOK. Ek staan, ek staan heeltyd op die trap. Ek wil, ek wil hom nie raak sien nie. Ek wou niemand raak sien nie. Ek het sommer geloop ook... (silence). Vir my het dit net gevoel, jô! Soos in, ek soen 'n MANSMENS, JAG! Dis TRAGIES. Dis amper soos iets ahm, iets is niet'ie ahm. Iets is net'ie reg'ie man. Ek hou net nie van aan 'n mansmens – Ek hou nie van mansmense soen of soe nie (**Eduan, NA, 14**).

Eduan's sexual contact with a boy and 'tragic' experience only enhanced his homophobic behaviour towards gay men. It can be assumed that Eduan was embarrassed by this experience in front of all his friends and his heterosexual masculinity was also damaged in the process. However, having sexual contact with a man, showing feminine attributes or lacking any other stereotypical heterosexual masculine attributes does not necessarily make young men liable to be stigmatised as gay. River and Aggleton (1999) argue that sex between men per se does not necessarily generate general disapproval in some cultural contexts. Some of the young men in this sample still considered men who have sex with men to be masculine, as long as they are the one penetrating, aligning a masculine sexuality with penetrating heterosexuality.

Nee... as hy die man net die man. Nie die man vir hom ook nog weer agterna. Nie as hy klaar die man bevredig, dan bevredig die ander man nog vir hom ook...Maar as daai ou nou vir hom, nee, dan kan jy maar sê dis bunny's daai...Ja, hy sal nie, dan is hulle nie meer manlik nie, dan is hulle, hoe kan ek sê, dan is hulle skeef, altwee. Baie ouens, sien jy, bevredig hulle, dan kom hulle op 'n ou af. Dan is dit, op daai, nei, miskien is dit op daai oomblik dat hy miskien nou in 'n lank tyd nie seks gehad het nie, dan gaan hy seks het met daai ou, soe...Jy kan sê hy's manlik tensy hy allen seks het met die man en nie die man nog met hom ook weer seks het nog daar by nie (**Hugh, SA, 19**)

Is oraait as die een, die een mansmens, is oraait ja. Maar, ahm, as hulle twee mekaar, dan is dit , nee, dan is dit nie reg nie...Nee, want daar moet mos nou amper soos 'n man wees en 'n moffie, nê- so wees. Hulle twee kan nie altwee moffies is nie (Quintin, SA, 16).

Male penetration constitutes the ultimate form of masculine sexual intercourse. Here, men who participate in any homosexual intercourse will not be punished or ostracised as long they were the one penetrating and not the one being penetrated. The moment any young man is the receiver of the penetration, he cannot be considered a man any longer, because then you can say he is a 'bunny.' Quintin argues that the presence of a man and a 'moffie' are needed as both of them can't be men or 'moffies.' The 'moffie' is the one who is not masculine, who shows feminine attributes and who should be penetrated. Thus, being masculine or having a masculine sexuality entails the use of the penis penetrating something, be it the male rectum or the female vagina.

In this section I emphasised how a masculine sexuality is based on the traditional construction of heterosexuality and how the 'penis-something' penetration is the ultimate means of constructing a masculine sexuality. Any man who is the receiver of penis penetration is degraded to a 'moffie', 'bunny' or is just feminine; definitely not masculine. Although one can already sense these young men's thoughts and feelings about homosexuality in this section, is it necessary to draw attention to these young men's homophobic feelings.

6.4.2. Feelings about homosexuality: "It's disgusting!"

Distancing themselves from homosexual men or boys, and showing dislike of homosexuals, is (as mentioned before) an integral part of showing (hetero)sexual masculine attributes. The young men's responses in this study to the question how they feel about male-to-male sexual intercourse was punctuated with expressions of extreme dislike and animosity towards homosexuals.

Sies! Dis morsigheid... Obviously is hy nie reg in sy kop nie (Mark, SA, 15).

...ek hou nie daarvan nie en, ah, ek sê dit wurg my...Om te dink, 'n man en 'n man...Twee MANSMENSE! (Craig, SA, 19).

Hoe kan ek sê? Ek meen ek hou nie van hulle nie...Dit is, (ek) kan hulle nie verstaan nie. Hulle is mans. n Man is vir 'n vroumens bedoel, nie 'n man vir 'n man nie. Dit is skandelik (**Randall, SA, 14**).

Ek voel maar net dis nie reg teenoor mens nie, omdat dis nie – soos ek nou sal voel om met my eie geslag omgang; met my eie geslag? Ek sal skaam voel. Ek sal verneder voel as mense dit weet. Nogtans, dit sal my breek omdat ek wiet dit sal nie lekker wees om met jou eie geslag omgang te hê nie (Steven, NA, 18).

The young men, as indicated by the quotes above, felt that this type of male sexual behaviour was disgusting, shocking and scandalous. It was even noted that this type of behaviour was not right or fair towards humanity. Mark went so far as to argue that these men certainly have a mental problem, by staing that 'they are obviously not right in their head.' Showing their dislike for homosexuals is part of young men's validation of an accepted masculine heterosexuality. Within the school grounds, this is also a means to reject the possibility being labelled as gay.

6.4.3. "*The Bible say so*"

Although it was before reasoned by some of these young men that you can only have sexual intercourse with a women and not with a man, the Christian Bible was also quoted as a reason for why homosexual intercourse is not acceptable.

Dis verkeerd...want die Bybel sê dis verkeerd. 'n Man en 'n man, dis (silence) NEE! (Robin, NA, 15)

Ek sal nie nou sê hy is, ek sal nie oordeel oor hulle nie, maar God wil nie hê ons moet oordeel oormekaar nie. Maar ek sal nou sê hulle is nie (reg) nie, want hier is baie vroumense. Hier is meer vroumense as mans. Waarvoor kan hulle nou nie 'n vroumens vat nie? (Justin, NA, 16).

Want hulle kan mos nie saammekaar wil seks hê nie. n Man moet saam met 'n vroumens seks het. Dit is hoe dit in die Bybel ook staan (Cecil, SA, 18).

Omdat ek vat dit maar net so, omdat hoe kan 'n man van 'n ander man 'n vrou maak en dit gaan mos nou nie reg'ie... Ek voel iets, omdat dit is my medemens. En omdat dit my medemens is, maak dit my, my as mens ook ongelukkig. Dink maar net, hy is geskape as 'n man, hy is nie geskape as 'n vrou nie (**Steven, NA, 18**).

(Laugh) Ahm, waarvoor het die Here dan die vroumens op die aarde neergesit? (Mark, SA, 15).

I found it interesting that homosexual intercourse was immediately highlighted as something that occurs against what is written in the Bible, but the Bible was not mentioned by these young men when reference were made to premarital sexual intercourse.

6.4.4. Tolerating homosexuals: 'Friends with limits'

There was also the notion among some of the young men who will actually tolerate homosexual men and go so far as to be friends with them. Hoewever, limitations and boundaries are set when these young men are friends with homosexual men.

Ek sal tjommies wees saam met hulle, maar as hy nou soos in dinge uit haal of wat'ie, soos hy op die anders uitgehaal het. En soos in nou op my ook uithaal, dan gaan ek vir hom sê nee. Dan stop ons die vriendskap liewers of ek sal hom reg bring... Deur vir hom te sê hy moet soos in, hy moet nou stop om dit te doen, maar as hy nie wil nie – Ek kan hom nie force om [nie] dit te doen nie, is sy saak dan (**Eduan, NA, 14**)

Sal vriende wees, maar hy moet net sy perke dan ken...Perke, hy moet nie amper soes vir my aanleiding gee, maar om dit te doen en sulke goed nie, want dan is dit nie'n vriend nie...Ek gaan vir hom sê maar ons vriendskap moet nou stop. Ons moet mekaar minder sien of ons moet mekaar glad nie sien nie. Dit gaan aan die een kant my meisie, ek en sy se verhouding beinvloed. Want hy gie neigings aan my kant en later dan raak hy jaloers, en dan gaan hulle twee aanmekaar sit en dan is ek nou uit die prentjie uit, want as hulle twee nou klaar gefight het, dan wil gineen my hê nie.(laugh)...NEE (laugh)... Ek bedoel nou, hy gaan nou probleme veroorsaak in my verhouding waarin ek gelukkig is (**Joey, SA, 20**)

The homosexual man is seen a threat, not only as a friend, but also to the relationship within which the young man may be. These young men in the above quotes will still tolerate homosexual men and be friends with them, yet limitations are set. These limitations are not set with having women friends and are not even mentioned. The gay man is seen as a threat for the young man himself, as the homosexual man might just try to lure him into his 'deviant' sexual behaviour. The homosexual man is also considered a threat to the young man's sexual relationships. Somehow, homosexual men are considered as men who are not able to control their sexual urges (same perception of heterosexual men) and might force himself upon the heterosexual man. In the process, Eduan, for example, is going to try to fix the problem, treating homosexuality (as Mark did) as a mental problem.

It is not just young homosexual men who are viewed as threats, but also lesbian women.

As jy daar by ons kom, daar is 'n meisie in ons klas, man. Jy sal agterkom, sy's SKEEF...(stilte) Ek respekteer haar besluit, eerste ding. Ek dink nie dit is goed nie...: Ek vat dit so nê, jy weet nie ... (onduidelik). Nou kom dit nou so nê. Sy en my meisie is goed bevriend. Ek het al vir haar gevra het jy en die kind miskien 'n verhouding aan? Ek sê vir haar, nie dat ek jou nie vertrou nie, ek vra maar net, omdat julle twee so close is. Toe sê sy nee. Toe sê sy vir my sy stel nie belang nie (**Hugh, SA, 19**).

In the above quotation Hugh argues that one can see when someone is gay/lesbian. Even the lesbian is regarded as a threat to his relationship and distrust in homosexual people is evident in his discourse. However, he adds that he respects this girl's descision about her sexual preference, but does not think that it is a good thing

In this chapter thus far I have highlighted more of the traditional constructions of how rural males construct a masculine sexuality. Risk taking in establishing an adolescent masculine sexuality, in addition to homophobia and misogyny, tends to articulate the construction of a traditional masculine sexuality within this rural community. However, throughout my research process I also noted that young men are constructing alternative masculine sexualities that are more focused on protecting the self from being infected with the HI-virus, abstaning from sexual intercourse, resisting sexual violence against women and participating in monogamous relationships. In the next section I will introduce the reader to the new generational construction of masculine sexualities that is more influenced by prevention and intervention programmes that have been implemented in recent years. As Bremridge (2000) has noted, young men are reconstructing their sexuality and with the necessary guidance, I believe, they can create alternative masculinities in opposition to the dominant hegemonic/subordinate/marginalized masculinities.

6.5. New generational masculine sexualities

The construction of alternative masculinities in youth cultures in contemporary urban areas has been noted by other researchers as well. Selikow, Zulu and Cedras (2002), for example, found that within Alexanderia, an urban township in Johannesburgh, South Africa, young people construct different masculinities. The *ingagara* and the *isithipa* in this township embody respectively the hegemonic and subordinate masculinities, while the *ministers* and *chickens* provide females with the financial support they need, but are not so violent and influential as the *ingagara* (Selikow, Zulu & Cedras, 2002)¹⁰. The *ministers* and *chickens* are used by the young women in this study only for financial gain in return for sexual favours (Selikow *et al.*, 2002).

The creation of alternative masculinities is an indication of the state of flux that masculinity is in and that young men are challenging dominant discourses on masculinities. In this sample of young men I found that young men are resisting the idea that all young men should have sexual intercourse as soos as possible to prove that they are men. Although heterosexual

¹⁰ Selikow *et al.* (2002: 24) describes these cultural constructions as follows: "An *ingangara* is associated with having many girlfriends, wielding control over women, with women seen as possessions, an expensive car and fashionable clothes" The *isithipa* does not have many girlfriends and is on the opposite end of the continuum compared to the *ingangara*.

masculiniy was still equated with sexual intercourse with a woman, this did not mean that you have to have sexual intercourse nor have many sexual partners to prove that you are a man.

6.5.1. "Real men don't have sex"

It will be naïve to argue that all young men do not perceive heterosexual intercourse as the ultimate means of proving that you are a 'real man'. Seidler (1989) argued that heterosexual interocourse for young men is almost like something that is owed to them and should be attained. Seidler (1989: 39) further argues that sexual intercourse "is learnt in boyhood, not as a matter of pleasuring and nourishing the body, but as an individual achievement that reflects the position of a man within the pecking order of masculinity." The young men who were not sexually active in this sample of rural coloured men tend to disagree with Seidler (1989) and other researchers (Bremridge, 2000; Connell, 1995, 2000; Kimmel, 2000). Where sexuality and thus sexual intercourse was considered to be masculinized (Kimmel, 2000), some of the young men in this sample gave new meaning to proving to be a 'real man' by challenging the dominant discourse of heterosexual intercourse as the only means to prove one's masculinity.

Omdat ek maar net dink, uhm, dit is mos nie nodig dat jy seks moet het om 'n man te wees nie. Maar, 'n man is altyd die ene wat vooruit dink en outomaties as ek nou in die huwelik tree en dan het ek seks. Dan is ek nie 'n man nie, dan is ek meer as 'n man. Omdat, die ding, ek het nie voor my tyd het ek nie dit gedoen nie, omdat ek gewag het op die regte oomblik (Steven, NA, 18).

Want dit is die ding. Sê maar 'n mansmens het nou, hoe kan ek sê nou? Hy het nou klaar saam met iemand seks gehad, dan dink hy nog altyd hy's groot en al die. Ek is nie so nie. Ek weet ek het nog nie seks gehad nie. Ek gedra my soos 'n man, want al het ek nog nie seks gehad nie, ek is nog steeds 'n man (Mervin, Na, 14).

In the above quotations the young men emphasised that not being sexually active does not make you less of a man. Instead, Steven, who is 18 years old, argues that by abstaining from having sexual intercourse at an early age and by waiting to have sexual intercourse until he is married, only then will he be a 'real' man. Taking on the extra responsibility of delaying that first sexual intercourse and waiting for the right moment is indicated to be more important than grabbing the first opportunity that comes along. Those young men who believe that you prove your masculinity through heterosexual intercourse are also denounced. Nico, who had sexual intercourse only once in his lifetime, would rather choose to have his virginity back instead of grabbing the first opportunity to have sexual intercourse.

Ek het gevoel, ek was nog 'n, soos in my tiener stadium. Toe ek klaar is, kon ek sien ek is nog nie gereed vir dit nie...Patry mense sê as jy seks het, dan is jy 'n man, maar dit is nie die waarheid nie... Want party tieners seks net om grootmense te word. [hmm] Dan agterna, dan is hulle spyt (Nico, SA, 17).

Manliker gevoel? Meneer, op daai ouderdom, ek het nog nie eens geweet daarvan nie. Ja, baie kere voel 'n man soe, maar jy voel nie altyd so nie... Want, ahm partykeer as 'n man seks het, dan voel jy net, OK, jy gaan nou so druk en so druk. Daar kom maar net soe 'n gevoel op... Maar nie nou nie, want ek is nou, ek is nou 'n bietjie- Ek is nou mos 'n kind van die Here... (Joseph ,SA, 14).

The first sexual experience for many young men is one in which they aim to perform and achieve a sense of masculinity. Unfortunately, for most of them that first sexual experience is also associated with pain and disappointment, which leads to many of these young men choosing not to participate in sexual intercourse in the near future. Those males who delay subsequent sexual intercourse events after their first sexual intercourse have become known in the literature as 'secondary virgins.' Joseph, for example, decided to delay sexual intercourse because he is still too young and because he is strictly following the principles of the Christian Bible. Both Nico and Randall choose to wait until they are older and independent before they will try having sexual intercourse again. Although these young men have already had sexual intercourse, thus proving that they are heterosexually active, receiving their peers' approval and achieving a respectable masculine status, they prefer not to follow the dominant discourse of heterosexual masculinities in which male heterosexual power is asserted over women (cf. Seidler, 1989). Instead, it is insisted that being a 'real man' entails keeping a women happy and treating her like a lady. This standpoint contradicts the young men's earlier arguments in which misogynist behaviour were detected in their discourse.

Nee, vir my is dit 'n man, hoe om te bewys dat 'n man rêrig 'n man is is as hy 'n vroumens soos 'n dame kan treat, dan is hy 'n man... Dit is amper soos jy moet haar gelukkig laat voel, laat lag. Sy moet nie ontevrede voel nie, sy moet net in jou geselskap wil wees en rond om jou...Dan is jy 'n man, sodra jy iemand gelukkig kan stel, dan is dit oraait vir my. Want ek wil nie weet, nee maar ek weet ek is 'n man, maar ek slaan my vroumens en so nie, dit is mos nie 'n man nie (Joey, SA, 20).

...daar is ander mans wattie, nog'ie, belangstel in dit nie, so as hulle nie wil seks het saam met 'n persoon nie, dit sê nie hulle is (nie) manlik nie. Want dit hang af hoe hulle vroumense behandel (Joey, SA, 20).

Joey emphasised that not having sexual intercourse does not mean that you are not real man. Robin agrees that sexual intercourse with a woman does constitute manhood or being masculine. He argues that you can still participate in non-coital sexual activites to

feel like a man. He argues that, if it is all about releasing some sperm, you can still achieve that without having sexual intercourse.

Omdat party ouens dink as hulle nou seks gehad het; dat hulle is nou ouens. Is nie so nie... As jy en 'n meisie vry en jy sqeeuze haar, dan stort jy nog steeds daar as jy lank genoeg uit hou... Sê ek en 'n meisie vry en ek hou nogal lank aan om haar te sqeeuze, dan stort die- Dan stort die saad...Dit is amper die selle soos seks (Robin, Na, 15).

The young men in this sample do not believe that you have to have sexual intercourse to prove that you are a man. Having sexual relations with a woman without penetration is enough motivation to consider yourself a man. We have to remember that the young men in this sample do not consider homosexual intercourse as masculine at all. Thus, having sexual relations, and not necessarily sexual intercourse, with a women is enough reason to be deemed masculine. Those young men who participate in sexual intercourse at an early age are considered by the non-active group of men to be risking their future.

Daar is sommige mans wat nou al, seunskinders wat nou al, jong seunskinders wat nou al kind gemaak het nou weer by n vroumens. Nou moet hulle uit die skool uit gaan, maar hul gelerendheid is dan daarmee heen. Waarvoor het hulle dan geleer? Miskien kan hulle nou klaar maak met skool en verder gaan en leer as hulle nou noggie nou nie ahm, kind gemaak het nie... Nee want, ahm die experience wat hulle gaan kry, is swaarder, want hulle moet nou- Een vriend van my, hy het nou al kind gemaak en hy het my vertel. Hy het vir my gesê jy moenie voor die tyd seks het nie, want dis nie die moetie nie. Want soggens vroeg, dis nie die soggens vroeg wat jy moet opstaan om skool to te gaan nie. Party keer moet jy nog uit kyk vir 'n werk en waar die vrou jou gaan aan gee, die meisie nê. En eindlik eindlik hulle ouers, die meisiekind se ouers nou, se ouers jou aangee vir non-support, dan moet jy ahm die ahm (vroumens) moet ook skool toe gaan, waar jy nog beter gedoen, nog voordat jy seks gehad het, nog in die skool kon gewees het (Justin,NA, 16)

Justin, for example, believes that he, who has not yet had sexual intercourse yet, is much more masculine than those men who have had sexual intercourse already and in the process risking their future. Justin follows his friends' advice to abstain from sexual intercourse and to focus on his future, instead of risking it and living a tough life.

6.5.2. Men against (sexual) violence

What emerged consistently in the majority of the interviews was that the young men in this sample disapprove of any type of violence against women, whether physical or sexual.

Dit is nie reg teenoor die meisie nie. 'n Man mag nie aan 'n vroumens slaan nie... Want die vrou het 'n reg om die man te kan aangee en die vrou, die man kan ook nie kwaad raak as die vrou die nie die man wil seks gee nie. (Nico, SA, 17)

Om te slaan? In geen omstandighede... Ek glo net nie daaraan nie. Dis aanranding (Mark, SA, 15).

Vir my is dit onder geen omstandighede nie...Jy kan nie teen haar wil iets wil doen nie. As sy sê nee, dan moet dit nee bly (Craig, SA, 19).

Dit is nie vir my nie. Dit is nie reg as jy 'n meisie- 'n Mansmens moenie 'n meisie slaan nie. Dis nie reg nie. Soms, soos in, nou slaan jy die meisie, miskien nou SLAAN jy soos in – Jy kan nie mansmense slaan nie, want jy gaan aan soos 'n moffie wat vroumense slaan (Eduan, SA, 14).

Among the youth in South Africa heterosexual violence has proliferated and intervention programmes focus especially on preventing women abuse (Buga *et al.*, 1996; Wood *et al.*, 1996; Shefer *et al.*, 2000). Research conducted in Summertown, South Africa, showed how young men trick women into having sexual intercourse with them without a condom, forcing young women to have sexual intercourse with them and physically abusing and 'punishing' young women who are perceived to have multiple sexual partners (Campbell &MacPhail, 2001). The young men in this sample in the Langeberg district claim to be against any type of violence committed against a woman. This is evident in their discourse, but whether they practise what they preach is questionable.

Although I tried to indicate as much as possible of what the young men expressed in the interviews, it was still impossible to convey the in-depth meaning of their narratives in this chapter. What I found came through in the interviews is that the young rural men in this sample do struggle to construct a comforting heterosexual masculinity. In this sense, I believe that the young men in this sample are struggling to grapple with traditional constructions of a masculine sexuality and the more modernised sensitive construction of a masculine sexuality. I will base my argument on what I have presented thus far in this chapter, as well as highlighting the role of the father figure or other adults in the construction of a masculine sexuality. I will also argue that young men are in need of information on healthy sexuality and are asking for this information.

6.5.3. Father/adult role models

In the process of constructing a healthy masculine sexuality, young men are also confronted with the obvious existence of a father or mother's boyfriend, who construct their masculinity and sexuality via traditional endeavours by having multiple sexual partners and abusing

women. The young men in this sample disagree with this type of behaviour in their discourse, but one cannot ignore these types of behaviour possibly happening via their performance.

Ja, ek sê nie- my pa het nie vir my ma gehou nie, Toe hy my gemaak het, toe los hy my ma, toe vat hy haar (**Craig, SA, 19**).

Ja, ek het so nou en dan vir hom ietsie georganise, maar ek het die problem sien jy. Ek en hy sit nie altyd lekker langs die vuur nie,sien jy... Hy het ses kinders. Hy het by haar het hy twee. Eerste vir my, toe gaan maak hy by 'n ander motjie ook 'n kind. En toe die motjie verwag, toe agterna toe maak hy weer by die motjie ook 'n kind, by 'n ander motjie 'n kind. Hy het drie motjies gehad. En toe kom hy weer. En toe gee my ma vir hom weer 'n kans, toe maak hy weer by my ma 'n kind. En toe hy klaar by my ma 'n kind het, toe los hy haar net so, toe vat hy 'n ander meisie. Buiten die drie wat hy al kinders by het. My ma en die motjie. Toe gaan hy na die ander- na die meisie toe, na 'n ander meisie toe, toe maak hy ook 'n kind. En toe die meisie verwag, die verwag die ander meisie ook waarby my pa ook alreeds 'n kind by het (**Hugh, SA, 19**).

Want ek het vir my pa gesê jy is sleg en jy moet die dinge los (**Hugh, SA, 19**).

Vir my is dit nie reg nie, omdat ek dink maar net die, kyk waar bring hulle die kinders aan, wat moet hulle nou af lei van die ouers wat- As jy eendag groot raak, gaan jy sê jy, outomaties dan gaan jy soos jou oom of jou pa wees omdat hy het dan dit gedoen. Dan kan jy ook mos dit doen (**Steven, NA, 18**).

In addition, if a father is present or absent, when communication is at a minimum between the two, young men rather choose not to discuss important matters, like requesting information on sexuality and sexual behaviour.

My pa bly nie by ons nie (Steven, NA, 18)

Ja, partyslae, maar, maar ek kan sien wanneer ek nie kan saam met hom (pa) praat nie... Want soos wanneer hy miskien kwaad is of iets soos daai vir iemand in die huis, dan wiet ek ek kan nie saam met hom praat nie (Quintin, SA, 16).

However, young men are still going to look up to that older man and construct a masculinity according to what is observed in other older men, like his father.

Ek voel gelukkig as 'n man, omdat ek maar net dink, eendag moet ek ook daar wat ander mans gaan staan. En ek kyk op na die ander grootmens. Omdat, deesdae, dan sien ek waar die grootmense uitgekom het, en hoe het hulle gely het. Dis hoekom, baie dae dan sit ek altyd in die grootmens se geselskap, net om te luister hoe was dit in die ou-tyd. Maar deesdae skep ek moed met die grootmense, omdat ek weet, hulle het 'n pad geloop in die oues (tyd). En die lewe wat hulle ingetree het, dit was ook nie makilk gewees nie (**Steven, NA, 18**).

Consciously or unconsciously, any young man's masculinity is based upon the masculine construct of his father (Biddulph, 1994). Biddulph (1994) insists that your fathers' mannerisms, attitudes and behaviour will be transmitted to you some or other day, just by

'being your father,'. If this is plausible, one can argue that the poor role models presented by these fathers by their indulging in and approving multiple sexual relations can be contributing factors in young men's participation in future multiple sexual relations. However, masculine sexuality is socially constructed and thus the influence of the father as a role model will not necessarily by itself reproduce the same behaviour in that young man. Campbell and MacPhail (2001) show that in Summertown the young people reported that they receive mixed messages from the adults in their community regarding 'taboo' sexual behaviour and adult public sexual performances. The need for young men to have adequate role models in the construction of a healthy masculine sexuality is clear.

6.5.4. 'Enjoy talking about sex'

The young men in this sample enjoyed talking about their sexual behaviour. One can assume that it is part of their masculine boasting and also part of the enactment of their masculine sexuality.

Nee, dis manlik die. Is manlik die pratery... Nei, is lekker om saam met iemand anders te praat oor die dinge nou, wat nou ken en alles (Selwin, NA, 18).

However, talking about sexual intercourse and other behaviour was pleasant not just because it is a masculine thing to do, but because a healthy and safe opportunity was created in which these young men had the chance to raise their voices, highlight the sexual behaviours they participate in and also raise their concerns about male sexuality in general.

Nee, die onderhoud is ahm, ek wil net sê dat dis 'n baie opvoedkundige manier, want daar is baie seuns wat (ons) wat u miskien nie van weet wat in matriek ook is, wat nog nie sulke goed deurgegaan het nie. Wat miskien vandag nog saam met jou onderhoude, miskien nou soes iets leer, iets nuuts leer, wat in die lewe is, wat hulle miskien nou geeksperimenteer het. ..Nou dit is die hele punt, want hulle is te bang om saam met ons te praat, of om na my toe te kom of na iemand anderste en te vra kyk hier man, wat maak 'n mens in so 'n situasie. Hy's te skaam, hy gaan dink, nee, maar ek wiet wat (onduidelik). Naai, dan wiet die man ekke het nog nie seks gehad nie en sulke goed. Nou deur jou, het ons onse menings gelig, maar hy leer op die ou einde (Joev, SA, 20).

Is nogal goed om net te, alles te weet oor seks en so aan. En is nogal goed om dit ahm, die ouderhoud te voer met iemand wat weet waarvan hulle praat (Justin, NA, 16).

In addition, the lack of sexuality education is also reported by these young men. In a previous section of this chapter I reported that the focus of sexuality education is often on that which is biologically and reproductively important. Here, however, one of the young men in this

sample also emphasised that as they progressed to higher grades in schools, sexuality education is replaced with theology.

Is net oor die Bybel. Ons kry nie seksuele goed soos voorheen in die jare nie. Daai is uit (Joey, SA, 20).

Although, throughout my research process in both the informal class focus groups and in the individual interviews, I refrained from giving any advice pertaining to their narratives of their sexuality and sexual behaviour, the young men perceived me to be the one who gave them valuable information. But I realised that my presence and the topic under discussion gave these young men the opportunity to say what troubles them without being judged by peers or other significant adults within the community. The lack of sexulity education in a higher grade also seems to be problematic as the young men between 16 and 20 are at a stage of their lives where they seek adequate advice, and the lack of this advice can only enhance the construction of unhealthy masculine sexualities.

6.6. Conclusion

In this chapter I thematically presented the data gathered from the qualitative interviews conducted with young men in the Langeberg district. I found that young men in rural areas are not much different from their urban counterpart and participate in similar high-risk sexual behaviour. One of these high-risk sexual behaviours includes the use of alcohol in association with sexual intercourse. Alcohol use and sexual intercourse were consistently reported among especially the sexually active young men, with almost none of the non-active participants using alcohol.

It has also been shown that young men, in participating in these high-risk sexual behaviours, construct only the traditional masculine sexuality during their sexual endevours. However, newer masculine sexualities are being constructed, and this are occurring among young men who prefer to delay their first sexual intercourse and by standing up against (sexual) violence against women. In the next chapter,I will summarise the quantitative and qualitative results and also give recommendation for policy makers and intervention programmes.

Chapter 7

Concluding remarks and recommendations

7. Introduction

The present study was conducted in a rural community in the Langeberg district of the Western Cape. The aim of the study was to explore how adolescent men construct a masculine sexuality in the Western Cape. The rural areas of the Western Cape are associated with limited research that explores adolescent sexual behaviours.

Both quantitative and qualitative methods were employed to understand rural adolescent men's construction of their sexuality. In Chapters Five and Six, the quantitative and the qualitative results were respectively presented. In this concluding chapter I wish to summarise those results presented and, in the process, highlight the most significant themes that came through in this research study. I will then give some recommendations for further research in this field and for intervention programmes.

7.1 Quantitative discussion and summary

The aims of the quantitative method used were to (1) determine the extent of the range and frequencies of sexual behaviours that young men engage in, and (2) to explore the high-risk behaviours that young men participate in.

In the presentation of the quantitative data, the following factors were highlighted: (1) sociodemographic information of the participants, (2) family household characteristics, (3) a profile of the sexually active men, (3) the various sexual behaviours young men participate in, (4) sources of sexuality information and (5) perceived gender norms around which they construct their sexuality. From the data collected, I wished to highlight the following significant themes that could be drawn from this sample of young men:

7.1.1 Socio-demographics and family household characteristics:

The majority of the participants in the sample of young men were in Grades 8 to 10. with the minority from Grades 11 and 12. The mean age of the participants was 15.59. In South Africa youths from the age of 15 are considered to be a vulnerable group due to the increase and high

prevalence of HIV/AIDS within this age group. The information received from this sample of young men can thus assist in interventions when prevention programmes are developed.

It seems from the data collected that the absence of a father and the frequency of single motherhood in child rearing are evident in this context of these young men's lives. In most cases the father is either deceased, is not a household member or the boy never sees his father. It is emphasised in this research that the lack of a father as a role model can lead young men to assume and adapt the 'provider-protector' role in the family. In the process young men are deprived of adolescent experiences because they have to take on additional adult responsibilities. The absent father or the lack of a responsible father figure in the life of the growing adolescent young man is also emphasised and noticeable in the qualitative section of this thesis via young men's personal stories.

7.1.2 Participation in sexual intercourse

A large proportion of young men in this sample reported that they are sexually active. However, the figures presented here of young coloured rural men who are sexually active at a younger age are much lower than those presented by other South African studies in both semi-rural and national studies conducted among young coloured men in the same age groups.

The median age of the young men's initial sexual intercourse as reported by these young men is 13. The age is much lower than the studies conducted in the urban areas of South Africa and confirms Kelly's (2002) argument that young rural men are sexually active at a younger age than their urban counterparts.

7.1.3 Multiple sexual partners

The self-reports from the young men in this sample contradict both national and international findings that young men are sexually promiscuous and enjoy having multiple sexual relationships. The reports of the young men in this sample confirm the finding of Flisher *et al.* (2003) that young people (including young men) participate in sexual intercourse infrequently, and that young people do not necessarily have multiple sexual partners.

7.1.4 Condom use and contraceptive behaviour

There is a high prevalence of non-use of condoms and contraceptives among this sample of rural young men, which corresponds with the findings of both national and international

studies. It is argued that the possible high prevalence of non-use of contraception might be due to the timing of communication about the use of contraception and condoms between sexual partners. The young coloured men in this sample are especially vulnerable to contracting the HI-virus and other STDs due to their lack of condom use, even if they do not participate in multiple sexual relationships.

7.1.5. Other high-risk behaviours identified

A minority of the young men in this sample indicated that they participated in high-risk sexual behaviours such as anal sex and oral sex, as indicated in Chapter Five. However, comparing the reports of the sexually active with those of the non-sexually active participants, it was found that there are other factors leading to risky behaviour, including drinking alcohol, smoking cigarettes and failing a grade. Sexually active participants were much more likely to drink alcohol, smoke cigarettes and fail a grade than their non-sexually active counterparts. How participation in these types of behaviours influence young men's participation in risky sexual behaviours needs further research. More specifically, intervention programmes need to focus on these types of behaviours as well when sexual intervention programmes are implemented.

7.1.6. Sexual coercion

More than 50% of the sample of young men in this sample reported that they will accept their partner's refusal to have sexual intercourse. However, the data presented from this sample of young rural coloured men also reflect other national and international findings that young men will use manipulative tactics of sexual coercion to persuade a girl to have sex with them.

Although reported by a minority of the total sample, young men also indicated that they experienced sexual coercion from a girlfriend. Although the statistics correspond with the national MRC (2002) study and American studies that young men can also be victims of sexual coercion, most research studies still accept as the 'norm' that young men cannot be sexually coerced, due to the high incidence of women experiencing sexual coercion. It should be noted, as reported by this sample of young men, that men can also be the victims of sexual coercion.

7.1.7. Range and frequency of non-coital sexual behaviour

The majority of young men do participate in non-coital sexual behaviours as indicated in Chapter Five. These young rural men reported dating behaviour and the mean age reported is similar to other South African studies, but differs from international studies. This study confirms that young South Africans start dating at a much earlier age than their international counterparts.

Regarding masturbation, it was indicated that sexually active men were much more inclined to report masturbation than their non-sexually active counterpart. It was argued that when the young man had already proved that he had had sexual intercourse, if he reports an act of masturbation, no stigma is attached to him. Non-sexually active men who report masturbating to their friends might be stigmatised as being gay or unable to have a girlfriend.

7.1.8. Sources of sexuality information

This research corresponds with other studies that friends seem to be a vital source of information on sexuality. Parents, it seems, plays a peripheral role as a source of dealing with issues of sexuality. The data reported correspond with research studies, both nationally and internationally.

7.1.9. Gendered norms

The way in which gender norms are employed when reference is made to 'expected' sexual behaviours of both young men and women is evident in these young rural men's answers. It is shown here that sexual permissiveness and perceptions of the gender (sexual) script influence one's constructions of sexuality. However, it was also noted here that young men's constructions of their sexuality is much more subjective and contextual than is presented in the quantitative data. In the following section I will present a brief discussion of the findings of the qualitative section of this study.

7.2 Discussing the qualitative findings

In the presentation of the qualitative findings it was highlighted in the themes that the young rural men in this sample reported participating in high-risk sexual behaviours that corresponded to the data received in the quantitative section. Of these high-risk behaviours reported, alcohol use among sexually active participants was especially evident in these young men's narratives. In addition, the non-use of condoms and the myths that motivate the non-

use of condoms are again re-emphasised in the qualitative section, as reported in other urban and rural South African studies. The elements of misogyny and homophobia were evident in this sample of young men as well and corresponds with studies done in South Africa and Britain. However in this process, I have also shown that the young men in this sample are reconstructing a masculine sexuality and are developing newer versions of masculine sexualities.

In the next section I wish to base my discussion on the qualitative results on these newer generational constructions of a masculine sexuality. I argue that young men are struggling to assert a new healthy masculine sexuality according to gender and health intervention programmes. The struggle to adapt this newer version of masculine sexuality is confounded with elements of the traditional constructions of a masculine sexuality. It is to be noted here that the social constructionist framework within which this study is interpreted emphasises that the individual's social context and history should be acknowledged when the information received is analysed. The analysis of the qualitative data was thus based on this perspective, and due consideration of the emphasis of the social constructionists principles were taken into account and implemented in the analysis.

7.2.1. Constructing a new masculine sexuality in the midst of traditional constructions
In New Zealand Allen (2003) found that young men and young women are resisting dominant discourses pertaining to a masculine heterosexuality. Conducting empirical research among 17- to 19-year-old young men and women, Allen (2003) found that young people in New Zealand generally draw upon the dominant traditional discourses when reference are made to the sexual self. However, young men and women also resist these dominant discourses of heterosexuality and take up other subject positions of the sexual selves.

The social constructionist movement emphasises an understanding of the subject's position in its social context. In the social context of the Langeberg rural district, the young men in this sample highlighted throughout their narratives the traditional perspectives of what constitutes heterosexuality. In this process, as mentioned before, elements of homophobia and misogyny were emphasised. However, young men foreground their subject positions by mentioning issues of a 'feminine' meaning attached to sexual intercourse, the importance of being a virgin for young men, men who stand against sexual violence, and men who want to be informed

about sexuality issues. With reservations, some of the young men tolerated homosexual behaviour and will be friends with gay men.

Some of the young men in this sample highlighted the caring and loving dimensions that are usually associated with sexual intercourse by young women. These men are resisting the dominant masculine view of sexuality that young men's only purpose in heterosexual intercourse is the 'urge to release' male orgasm. During the collection of this data I found myself in awe of young men who seem to portray macho attitudes also highlighting these feminine attributes associated with sexual intercourse. These new data went against my own bias and traditional beliefs of hegemonic masculinity and I had to adapt to this finding.

The sexually non-active men seem to be more in touch with their heterosexual selves and are much more adamant about not conforming to the traditional beliefs that are set out by what is expected of a heterosexually active man. Although some of these young men saw female virginity as a necessity, they also emphasised that young men should also refrain from having sexual intercourse at an early stage. The high incidence of HIV/AIDS among young people is given as a reason for delaying sexual intercourse and retaining virginity until marriage. In this process one can note the impact of HIV prevention programmes, including those of Khomanani and loveLife, which are making inroads with their prevention programmes and are influencing young people's perceptions and thought processes when it comes to participating and deciding about sexual intercourse.

What also came through in the qualitative interviews was the young men's disgust with men abusing women. Young men who abuse women were labelled as being 'moffies' and not able to be a real man. Where 'moffie' usually refers to young men who are supposed to be gay or show feminine attributes, young men who are women beaters also received this label, because 'they are unable to hit men, so they hit women'. Men against women abuse are coming to the fore both in the South African context and internationally with especially the Men as Partners project making great strides in this regard. The patriarchal approach of men having the right to abuse, and thus control, women is being abandoned by these young men, who are adopting new perceptions of heterosexual masculinities.

Finally, it was also noticeable in the interviews conducted that young men are in need of receiving the necessary knowledge of what constitutes sexuality. The young men in this

sample indirectly reported that they are not as knowledgeable as is presumed by traditional expectations and that they are in need of receiving information on sexuality. In this regard, young men are silenced in voicing their opinions and concerns pertaining to sexuality. This research gave young men the opportunity to raise some of those concerns and give a voice to their perspectives on sexuality, something that is lacking in the predominant sexuality and HIV/AIDS research in South Africa.

It should be noted that the young coloured men in this sample did not mention their marginalised status as being coloured in the South African context as a stumbling block in their construction of a masculine sexuality. There seems to be an optimism regarding their construction of their sexuality, without regard for their race, socio-economic circumstances and historical roots. However, according to the social constructionist perspective, these factors do play an integral role in their constructions of heterosexuality. Thus, although it is not overtly identified, I do believe that it did have an important role in their construction of their sexuality. I can also assume that, because I was a young coloured man who conducted the interviews and could relate to many narratives in the process, these issues might not have been regarded as important and therefore did not need to be raised in the process.

Thus, in this summary, one notes that young men are constructing newer versions of what constitutes a masculine sexuality. In the research conducted by both O'Sullivan *et al.* (2003) and Bremridge (2000) in South Africa, reconstructions of a traditional heterosexuality were evident. O'Sullivan *et al.* (2003) showed, for example, that young men and women are scrapping the traditional gender (sexual) scripts. Researchers need to acknowledge these newer constructions of sexuality by young men and women, and incorporate these new constructions in their research projects. The traditional perspectives of what constitutes a heterosexual masculinity is becoming rhetorical and are disabling young men in their exploration of their subjective constructions of their sexuality, sustaining in the process the traditional patriarchal heterosexual assumptions. Unless researchers and intervention programmes start to emphasise these new sexual constructions, the progress that has been achieved with current intervention programmes will not have follow-up success rates in delaying sexual intercourse among young men, and curbing the HIV/AIDS infection rates in the future.

7.3. Limitations in this study and further recommendations

- The quantitative section of this research was able to detect the extent of the range and frequencies of sexual behaviours these young men engage in. The research, however, failed to show the distinct differences in sexual behaviour that sexually active and non-sexually active men participate in differently. Further research should endeavour to focus attention on only non-sexually active young people in order to understand more fully why some young men do not participate in sexual intercourse at such an early age.
- Self-reported behaviour does not necessarily ensure validity of the data received. Although for this specific reason the data in this study should be taken cautiously, it should be noted that every possible precaution was taken to increase the reliability and validity of this study. I do believe that the information in this research is as valid and reliable as can be.
- The setting up of a questionnaire for young rural men should be as short as possible. The questionnaire for this study was too long and the responses were influenced by the high levels of semi-illiteracy among these young men. Although the questionnaire was pilot tested in a similar area of this community, the young men in this sample tended to read very slowly and struggled to understand some questions. What was supposed to be a 60-minute questionnaire, ended up being a 90-minute questionnaire. Researchers should in the future thus take account of the literacy levels of their research respondents.
- The qualitative interviews that were done produced rich and informative data. Writing in my second language, I feel that I did not convey the perceptions and thoughts of the participants as insightfully and with as much vigour as most social constructionist researchers do when reporting on their data collected.
- It is further recommended that issues pertaining to alcohol use should be acknowledged when sexuality and HIV interventions are conducted. The use of alcohol among young men in this rural area is of great concern as it influences their sexual behaviour and their constructions of a healthy masculine sexuality.

- Researchers should also take note of the new constructions of sexuality by these
 young men and should incorporate these new beliefs in their research and in HIV
 prevention programmes.
- Finally, sexuality education should become more rigorous in school and also more gender sensitive. Acknowledging only the biological reproductive health issues, females' sexuality and ignoring the importance of an existing male sexuality results in a silence about masculine (manly) sexual constructions.

7.4. Concluding remarks

In this research study I aimed to explore how young men in rural areas construct a masculine sexuality. In the process I highlighted that both sexually active and non-active men wish to construct a healthy sexuality, although their constructions are still fuelled by misogyny and homophobia. I assert that young men should be acknowledged in sexuality and HIV/AIDS research and that the predominant perception that most men are misogynist and homophobic should be re-evaluated due to the new constructions of sexuality that are being reported by this sample of young rural coloured men.

BIBLIOGRAPHY

Adams, G.R; Gullotta, T.P., & Markstrom, C. A. (2000). **The Adolescent experience,** 4th edition. Academic Press.

Adams, R. & Sav D. (Eds) (2002). **The masculinity studies reader**. Massachusetts, Oxford: Blackwell Publishers.

Africa Strategic research corporation and the Kaiser family foundation (2001). **The 2001** national Survey of South African Youth.

Agadjanian, V. (2001). "Negotiating through reproductive Change: gendered Social Interaction and fertility regulation in Mozambique". **Journal of Southern African studies**, 27 (2), 291-309.

Alexander, C.S., Somerfield, M.R., Ensminger, M.E., Johnson, K. E, & Kim, Y, J., (1993). "Consistency of Adolescents' Self-Report of Sexual Behaviour in a Longitudinal Study." **Journal Of Youth and Adolescence**, 22, (5), 455-471.

Alexander, M.G. & Fisher, T.D. (2003). "Truth and Consequences: Using the bogus Pipeline to examine sex Differences in Self-reported Sexuality." **The journal of Sex Research**, 40 (1); 27-35.

Alexander, P. & Uys, T. (2002). "Introductory Article: Aids & Sociology: Current South African Research." **Society in transition**, 33 (3), pp. 295-311.

Allen, L. (2003). "Girls want sex, boys want love: resisting dominant discourses of (hetero)sexuality." **Sexualities**, 6(2): 215-236.

Amon, J.J. (2002). "Preventing HIV infections in children and adolescents in sub-Saharan Africa through integrated care and support activities: a review of the literature." **African Journal of AIDS research,** 1: 143-149.

Anderson, M.L. & Taylor, H.F. (2004). **Sociology: understanding a diverse society.** Belmont, C. A: Wadsworth/ Thomson Learning.

Aron, A. & Aron, E.N. (1991). "Love and sexuality". In K. McKinney & S. Sprecher (Eds), **Sexuality in close relationships** (pp 25-48). London: Lawrence Erlbaum.

Aronson, J. (1994). "A pragmatic view of thematic analysis." **The qualitative report**, 2 (1). http://www.nova.edu/sss/QR/backissues/QR2-1/aronson.html

Askew, S. & Ross, C. (1988). **Boy's don't cry: Boys and sexism in education**. Phildelphia: Open Univerity press.

Babbie, E. & Mouton, J. (2001). **The practice of social research**. Cape Town: Oxford University press.

Banister, P., Burman, E., Parker, I., Taylor, M. & Tindall, C. (1995). **Qualitative methods in Psychology.** Buckingham: Open University Press.

Bayer, B.M. (1989). "Introduction: Re-enchanting constructionist inquiries." In B.M. Bayer & J. Stotter (Eds), **Reconstructing the psychological subject: Bodies, practices and technologies** (pp 1-20). London: Sage.

Becker, H. (2001). 'I am the man'. Historical and contemporary perspectives of masculinities in Northern Namibia. Paper presented at the AIDS in context international conference: Explaining the social, cultural and historical roots of the epidemic in Southern Africa. Department of Anthropology and Sociology, University of the Western Cape: 1-17.

Beckett, L. (2001). "Challenging boys: Addressing issues of masculinity within a gender equity framework". In W. Martino & B. Meyenn (Eds.), **What about the boys?: Issues of masculinity in schools** (pp 66-81). Buckingham: Open University Press.

Berg, B. L. (2001). Qualitative research methods for the Social science. Allen & Bacon.

Biddulph, S. (1994). **Manhood: An action plan for changing men's lives**. Syney: Finch Publishing

Bogart, L. M., Cecil, H., Wagstaff, D.A., Pinkerton, S. D., & Abramson, P.R. (2000). "Is it "Sex"?: College Students' Interpretations of Sexual Behaviour Terminology." **The Journal of sex Research,** 37, (2), 108-116.

Bohan, J.S. (1993). "Regarding gender: Essentialism, constructionism and feminist psychology" **Psychology of women quarterly**, 17: 15-21.

Bremridge, C.G. (2000). **Construction of male adolescent sexuality: An exploratory study in a coloured, rural community**. Unpublished master's thesis. Stellenbosch: University of Stellenbosch.

Brooks-Gunn, J. & Furstenburg, F.F. jr (1989). "Adolescent sexual behaviour." **American Psychologist**, 12(3) pp 309-325.

Bruner, J. (1990). Acts of meaning. Cambridge, M.A.: Harvard University Press.

Brunswick A.F. & Banaszak-Holl, J. (1996). HIV risk behaviour and the Health Belief Model: An empirical test in a African American Community Sample. **Journal of Community Psychology**, 24: 44-65.

Buga, G.A.B., Amoko, D.H.A. & Ncayiyana, D.J. (1996). Sexual Behaviour, contraceptive practice and reproductive health among school adolescents in rural Transkei. S.A.M.J. 86 (5), 523-527.

Bujra, J (2002). "Targeting men for a change: AIDS discourse and activism in Africa." In F Cleaver (Edt), **Masculinities matter! Men, Gender and development** (Chapter, 9). Cape Town: David Phillip.

Burger, C. A. (2000). **Heterosexual Context and adolescent sexual risk taking behaviour: An exploratory study in a coloured community** . Unpublished master's thesis. Stellenbosch: University of Stellenbosch.

Campbell, C. (2003). **'Letting them Die': Why HIV/AIDS Intervention programmes fail.** The International African Institute in Association with James Currey. Oxford Indiana Unversity Press, Bloomington and Indianapolis Double storey/ A Juta company: Cape Town.

Campbell, C.A. (1995). "Male gender roles and sexuality: Implication for women's AIDS risk and prevention." **Social Science & Medicine**, 41 (2), pp 197-210.

Carrigan, T., Connell, B. & Lee, J. (2002). "Toward a new Sociology of masculinity." In R. Adams & Savran, D.(Eds.) **The masculinity studies reader**. Massachusetts, Oxford: Blackwell Publishers.

Catania, J., Gibson, D.R., Chitwood, D.D., & Coates, T.J. (1990). "Methodological problems in Aids Behavioral Research: Influence on measurement error and participation Bias in studies of sexual behaviour." **Psychological Bulletin**, 108 (3): 339-362.

Census 1996 & 2001 information of Langeberg Municipal Area, StatsSA

Chakrabarti, N., Chopra, V.K. & Sinha, V.K. (2002). "Letter to the editor: Masturbatory guilt leading to severe depression and erectile dysfunction." **Journal of sex and marital therapy**, 28: 285-287.

Christopherr, B.F.S., Roosa, M.W, (1991). "Factors affecting sexual decisions in the premarital relationships of adolescents and young Adults." In K. Mckinney & S. Sprecher (edt), **Sexuality in Close relationships**. Lawrence Erlbaum Associates publishers Hillside: New Jersey.

Clawson, C.L., & Reese-Weber, M. (2003). "The amount and timing of parent-adolescent sexual communication as predictors of late adolescent sexual risk taking behaviours." **The Journal of sex research**, 40 (3), pp 256-265.

Cleland, J. (2003). **Illustrative questionnaire for Interview-Surveys with young people.** Department of reproductive health and research (RHR), World Health Organization. http://www.who.int/reproductivehealth/adolescent/core_instruments.en.html

Connell, R.W. (2002). Gender. Cambridge: Polity Press.

Connell, R.W. (2000). The men and the boys'. Cambridge: Polity Press.

Connell, R.W. (1995). Masculinities. Sydney: Allen & Unwin.

Connell, R.W. (1992). "A very straight gay: Masculinity, homosexual experience, and the dynamics of gender." **American Sociological Review**, 57: 735-751.

Crothers, C. (2001). "Social factors and HIV/AIDS in South Africa: A framework and summary." **Society in Transition,** 32 (1), pp 5-12.

Dacey, J. & Kenny, M. (1997). **Adolescent development**. Madison: Brown and Benchmark publishers.

De Gaston, J.F., Jensen, L., & Weed, S. (1995). "A Closer look at adolescent Sexual Activity." **Journal of Youth and Adolescence**. 24 (4), 465-479.

De Gaston, J.F., Weed, S., & Jensen, L. (1996). "Understanding Gender differences in Adolescent Sexuality." **Adolescence**, 31 (121), 215-231.

DeLamater, J.D. & Friedrich, W.N. (2002). "Human sexual development." **The journal of sex research,** 39 (1): 10-14.

DeLamater, J.D. & Hyde, J.S. (1998). "Essentialism vs. Social Constructionism in the study of Human Sexuality." **The Journal of sex research**, 35 (1): 19-31.

Denzin, N. & Lincoln, Y (Eds.) (1994). **The handbook of qualitative research**. London: Sage.

Dickson-Tetteh, K., Ladha, S. (2000). **South African health review (SAHR)**. Chapter 20. Reproductive health research unit. http://www.hst.org.za/sahr/2000/chapter20.htm

Donald, M., Lucke, J. Dunne, M., & Raphael, M. (1995). "Gender differences associated with Young people's Emotional Reactions to sexual intercourse." **Journal of Youth and Adolescence**, 24(4). 453-479.

Durrheim, K. (1997). "Social constructionism, discourse and psychology." **South African journal of psychology,** 27 (3): 175-182.

Eaton, L; & Flisher, A. J. (2000). "Review: HIV/AIDS knowledge among South African Youth." **Southern African journal of child and adolescent mental health**, 12 (2), p 97-124

Eaton, L., Flisher, A.J. & Aaro, L.E. (2003). "Unsafe sexual behaviour in South African youth." **Social Science & Medicine**, :56: 149-165.

Eder, D. & Fingerson, L. (2003). "Interviewing children and adolescents." In J.A. Holstein, J.A. & Gubrium, J.F. (Eds.). **Inside interviewing: New lensens, new concerns.** London, New delhi: Sage publications.

Emma, R. (2000). "'Coming Out': Gender, (Hetero) sexuality and the primary school." **Gender and Education,** 12 (3): 309-326.

Epstein, D. (2001). "Boyz' own stories: masculinities and sexualities in schools." In W. Martino & B. Meyenn (Eds.), **What about the boys?: Issues of masculinity in schools** (pp 96-109). Buckingham: Open University Press.

Flisher, A. J., & Chalton, D. O. (2001). Urbanisation and adolescent risk behaviour. **SAMJ**, 91(3), pp. 243-248.

Flisher, A.J., Reddy, P., Muller, M., & Lombard, C. (2003). "Sexual behaviour of Cape Town high-school students." **South African Medical Journal**, vol. 93(7), pp. 537-541.

Flisher, A. J., Ziervogel, C.F., Chalton, D. O.,& Robertson, B. A. (1993). "Risk-taking behaviour of Cape Peninsula high-school students. Part 1: Introduction and Methods." **SAMJ**, 83, 469-473.

Flisher, A.J., Ziervogel, C.F., Chalton, D.O., Leger, P.H., & Robertson, B.A. (1993). "Risk-taking behaviour of Cape Peninsula high-school students. Part VIII. Sexual behaviour." **SAMJ**, 83, pp 495-498.

Forrest, S. (2002). 'Big and tough': Boys learning about sexuality and manhood. **Sexual and relationships therapy**, 15 (3): 435- 450.

Foucalt, M. (1978). The history of sexuality. New York: Random house.

Foulis, C.A. & Campbell, C. (2002). Creating contexts that support youth-led HIV prevention in schools. **Society in Transition**, 33 (3), pp 312-327.

Friedman, S.R., Flom, P.L., Kottiri, B.J., Neaigus, A., Sandoval, M., Curtis, R., Des Jarlais, D.C. & Zenilman, J.M. (2001). "Consistent condom use in the heterosexual relationships of young adults who live in high-HIV-risk neighbourhoods and do not use 'Hard Drugs'." **Aids Care**, 13 (3): 285-296

Frosh, S., Pattman, R., & Phoenix, A. (2002). Young masculinities: Understanding Boys in contemporary Society. Palgrave Publishers.

Gagnon, J.H. & Simon, W. (1973). **Sexual conduct: the sources of human sexuality**. Chicago: Aldine.

Garenne, M., Tollman, S., Kahn, K., Collins, T., & Ngwenya, S., (2001). "Understanding marital and premarital fertility in rural South Africa." **Journal of South African Studies,** 27 (2), pp 277-290.

Gergen, K.J. (1985). "The social constructionist movement in modern psychology." **American Psychologist**, 40 (3): 266-275.

Gergen, K. J. (1997). "The place of the psychic in a constructed world." **Theory and Psychology**, 7(6): 723-746.

Gergen, K. J. (1999). "Agency: Social construction and relational action." Theory and Psychology, 9 (1): 113-115.

Gibbons, J. L., Hamby, B.A. & Dennis, W. D. (1997). "Research gender role ideologies internationally and cross culturally." **Psychology of women Quarterly**, 21, pp151-170.

Giffin, K. (1998). "Beyond empowerment: Heterosexualities and the prevention of AIDS." **Social Science & Medicine**, 46 (2), pp. 151-156.

Goldstein, N., Pretorius, H.G., & Stuart, A.D. (2003). "The Social Construction of HIV/AIDS." **Health S.A. Gesondheid**, 8 (2), pp14-22.

Greer, S. (1997). "Nietzsche and social constructionism. Directions for a post modern historiography." **Theory and psychology**, 7 (1): 83-100.

Gribble, J. N., Miller, H.G., Rogers, S. M., & Turner, C. F. (1999). "Interview Mode and Measurement of Sexual Behaviours: Methodological Issues." **The Journal of Sex Research**, 36 (1), 16-24.

Guggino, J.M., & Ponzetti, J.J. (1997). "Gender diffences in Affective reactions to first coitus." **Journal of Adolescence**, 20, 189-200.

Gupta, G.R. (2000). **Gender, Sexuality and HIV/AIDS: The what, the why, and the how.** Plenary Address. XIIIth International AIDS conference, Durban South Africa, pp 1-8.

Harrison, A. (2002). "The school dynamics of adolescent risk for HIV: using research findings to design a school based intervention." **Agenda** 53, pp. 43-52.

Harrison, A; Xaba, N., Kunene, P. (2001). "Understanding safe sex: gender narratives of HIV & pregnancy prevention by rural South African school-going youth." **Reproductive health matters**, 9 (17), pp. 63-71.

Harrison, A., Xaba., N., Kunene, P., & Ntuli., (2001). "Understanding young women's risk for HIV/AIDS: Adolescent sexuality and vulnerability in rural KwaZulu-Natal." **Society in Transition**, 32 (1), pp 69-78.

Haram, L, (2001). "'In sexual life women are hunters': AIDS and women who drain men's body. The case of the Meru of Northern Tanzania." **Society in Transition**, 32 (1): 47-55.

Harris, E., Lea, S., & Foster, D. (1995). "The construction of gender: An analysis of men's talk on gender." **South African journal of psychology**, Vol. 25 (3), pp 175-183.

Haywood, C. & Mac an Ghaill, M. (1997). **Schooling Masculinities**. In M. Mac an Ghaill (Edt), **Understanding Masculinities**. Open University press: Philadelphia.

Hillier, L., Harrison, L. & Bowditch, K. (1999). "'Neverending Love' and 'Blowing your Load': The meanings of sex to rural youth." **Sexualities**, 2 (1): 69-88.

Hillier, L., Harrison, L., & Warr, D. (1998). ""When you carry condoms all the boys think you want it:" negotiating competing discourses about safe sex." **Journal of Adolescence**, 21: 15-29

Holland, J., Ramazonoglu, C., Scott, S., Sharpe, S. & Thompson, R. (1990). "Sex, gender and power: Young women's sexuality in the shadow of AIDS." Sociology of health and illness, 12 (3): 336-350.

Holland, J., Ramazonoglu, C., Sharpe, S., & Thomson, R. (1992). "Pleasure, pressure and power: some contradictions of gendered sexuality." The Sociological Review: 645-673.

Holland, J., Ramazanoglu, C., Sharpe, S. & Thomson, R. (1994). "Desire, Risk and control: The Body as a site of contestation." In L. Doyal, J. Naidoo and T. Wilton, **Aids: setting a feminist agenda.** Taylor and Francis Publishers.

Holland, J., Ramazanoglu, C., Sharpe, S. & Thomson, R. (1994). "Achieving masculine sexuality: Young men's strategies for managing vulnerability." In L. Doyal, J. Naidoo, and T. Wilton, **Aids: Setting a Feminist agenda**. Taylor and Francis Publishers.

Household Survey (2002). Nelson Mandela/ HSRC study of HIV/AIDS. South African National HIV prevalence, Behavioural Risks and Mass Media. Executive Summary.

Hyde, J.S. (1990). Understanding human sexuality. New York: Mcgraw-Hill

Judith, A.F., Noller, P. & Patty, J (1993). "Adolescents interactions with the opposite sex: Influence of attachment style and gender." **Journal of Adolescence**, 16: 169-186.

Kaaya, S.F., Mukoma, W., Flisher, A.J. & Klepp, K. (2002). "School-based Sexual health interventions in Sub-Saharan Africa: A review". **Social Dynamics**, 28 (1): 64-88.

Kaeser, F. Di Salvo, C., & Moglia, R. (2000). "Sexual Behaviours of Young Children that occur in Schools." **Journal of sex Education and Therapy**. 25(4), 277-285.

Kalof, L. (1995). "Sex, power & dependency: the politics of Adolescent Sexuality." **Journal of youth and Adolescence**, 24(2), pp 229-249.

Karlyn, A. (2003). **Intimacy revealed: The language and context of adolescent sexual experimentation in Maputo, Mozambique**. Paper presented at the Sex and Secrecy conference, University of Witwatersrand, Johannesburg, South Africa.

Katz, A.(2002). "AIDS, individual behaviour and the unexplained remaining variation." **African Journal of Aids research**, 1: 125-142.

Kau, M. (1991). "Sexual behaviour and knowledge of adolescent males in the Molopo region of Boputhatswana." **Curation**, 14 (1): 37-40.

Kelly, K. & Ntlabati, P. (2002). "Early adolescent sex in South Africa: HIV intervention challenges." **Social Dynamics**, 28 (1): 42-63.

Kimmel, M.S. (2000). **The Gendered Society**. New York: Oxford University Press.

Kimmel M.S. (Ed.) (1987). Changing men: New directions in research on men and masculinity. Newbury Pak, California: Sage.

Kimmel, M.S. & Messner, M.A. (Eds) (1989). **Men's Lives**. New York: Macmillan Publishing company.

Krippendorff, K. (2004). **Content Analysis: An introduction to its methodology.** London, New delhi: Tousand Oaks & Sage publications.

Leach, F. (2002). "School- based gender violence in Africa: A risk to adolescent sexual health". **Perspectives in education**, 20 (2), pp. 99-112.

LeClerc- Madlala, S. (2002). "Youth, HIV/AIDS and the importance of sexual culture and context." **Social Dynamics**, 28 (1), pp. 20-41.

LeClerc-Madlala, (2001). "Demonising women in the era of AIDS: on the relationship between cultural constructions of both HIV/AIDS and femininity." **Society in Transition,** 32 (1): 38-55.

Lehne, G. K. (1994). "Homophobia among men, supporting and defining the male role." In M.S. Kimmel & M.A. Messner (Eds.), **Men's lives**. New York: Macmillan Publishing company.

Lesch E. (2000). Female adolescent sexuality in a coloured community. Unpublished doctorate dissertation. Stellenbosch: University of Stellenbosch

Levine, S. & Ross, F. (2002). Perceptions of and attitudes to HIV/AIDS among young adults in Cape Town. **Social Dynamics**, 28 (1): 89-108.

Lindegger, G. & Wood, G. (1995). "The AIDS crisis: review psychological issues and implications, with special reference to the South African situation." **South African Journal of Psychology**, 25 (1): 1-11.

Mane, P., & Aggleton, P. (2001). "Gender and HIV/AIDS: What do men have to do with it?" **Current Sociology**, 49 (6): pp. 23-37.

Mac an Ghaill, M. (1994). The making of men: Masculinities, sexualities and schooling. Buckingham: Open University Press.

Macleod, C. (1999). "Teenage pregnancy and its 'negative' consequences: Review of South African research- Part 1." **South African Journal of Psychology**, 29 (1), pp 1-7.

Macleod, C. (1999). "Teenage pregnancy and its 'negative' consequences: Review of South African research- Part 2." **South African Journal of Psychology**, 29(1) pp 8-16.

Macphail, C., & Campbell, C. (2003). **Challenging dominant norms of masculinity for HIV prevention.** Paper presented at the Sex and Secrecy conference, University of Witwatersrand, Johannesburg, South Africa.¹¹

MacPhail, C. & Campbell, C. (2001). " 'I think condoms are good but, aai, I hate those things.: Condoms use among adolescents and young people in a Souhern African township." **Social Science and Medicine**, 52: 1613-1627.

Maharaj, P. (2001). "Male attitudes to family planning in the era of HIV/AIDS: Evidence from KwaZulu-Natal, South Africa." **Journal of Southern African studies**, 27 (2), pp 245-258.

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Medical Research council South Africa.(2002) **The 1**st **South African National Youth Risk Behaviour Survey.** www.mrc.ac.za

Mills, S. (2003). Micheal Foucault. Routledge

Mishler, E. G. (1986). **Research interviewing: Context and narrative**. Cambridge: Harvard University.

Mitchell, C., Walsch, S., Larkin, J., & Smith, A. (2003). "Hidden from view:" On methodologies for unravelling young women's talk about body, sexuality and HIV/AIDS prevention. Paper presented at the Sex and Secrecy conference, University of Witwatersrand, Johannesburg, South Africa.

Moletsane, R., Morrel, R., Unterhalter, E. & Epstein, D. (2002). "Instituting gender equality in schools: Working in a HIV/AIDS environment." **Perspectives in education,** 20 (2), pp. 37-53.

Moolman, B. (2004). "The reproduction of an 'ideal' masculinity through gang rape on Cape flats: understanding some issues and challenges for effective redress." **Agenda**, 60: 110-123.

Moreau-Gruet, F. & Ferron, C. (1996). "Adolescent sexuality: The gender gap." **AIDS care**, 8 (6): 641-653.

Morrell, R., Moletsane, R., Abdool-Karim, Q., Epstein, D. & Unterhalter, E. (2002). "The school setting: Opportunities for integrating gender equality and HIV risk reduction intervention." **Agenda** 53, pp 11-21.

Morrell, R. (Edt.) (2001). **Changing Men in Southern Africa**. Pietermaritzburg: University of Natal Press.

Morrell, R. (1998). "Of boys and men: Masculinity and gender in Southern African studies." **Journal of Southern African Studies**, 24 (4): 605- 630.

Morse, J.M. & Richards, L. (2002). **Read me first for a user's guide to qualitative metods.** California: Thousand Oaks.

Mouton, J. (2002). **How to succeed in your Master's & Doctoral studies.** Pretoria: Van Schaik publishers.

Mouton, J. (1996). **Understanding social research**. Pretoria: J.L.Van Schaik publishers **National Youth Commission**, (1997). www.gov.za

Nel, D. (2003). Schooling masculinities and femininities in the face of the homosexual other: experiences of gay and lesbian learners within selected schools in Gauteng, South Africa. Paper presented at the Sex and Secrecy conference, University of Witwatersrand, Johannesburg, South Africa.

Netswera, F. G. (2002). "Risk awareness and sexual relationships among youth in the Johannesburg area." **Health S.A. Gesondheid**, 7 (3), pp. 79-88.

Newman, I. & Benz, C. R. (1998). **Qualitative-quantitative research methodology: Exploring the interactive continuum.** Southern Illinois: University press, Carbondale & Edwardsville

Nicholas, L. J., Durrheim, K. & Tredoux, C. G. (1994). "Lying as a factor in Research on Sexuality." **Psychological Reports**, 75, 839-842.

Nielsen, L. 1996 Adolescence: A contemporary view. Philedelphia: Harcourt Brace college.

Nzioka, C. (2001). "Perspectives of adolescent boys on the risks of unwanted pregnancy and sexually transmitted infections: Kenya." **Reproductive Health Matters,** 9 (17): 108-117.

Oliver, M.B. & Hyde, J.S. (1993). Gender differences in sexuality: A meta analysis. **Psychological Bulletin**, 114 (1): 29-51.

Olivier, M. A. J. (1996). "Adolescent's perception of sexuality." **Journal of Education,** 16 (1): 5-8.

O'Sullivan, L.F. & Byers, S (1992). "Brief Report: College students incorporation of initiator and restrictor roles in sexual dating interactions." **The Journal of Sex Research**, 29(3): 435-446.

O'Sullivan, L.F., Harrison, A., Monroe-Wise, A., Morrell, R. & Hoffman, S. (2003). **Saying what I cannot say: Secret sexual lives of youth in rural South Africa**. Paper presented at the Sex and Secrecy conference, University of Witwatersrand, Johannesburg, South Africa.

Pattman, R. & Chege, F. (2003). "Dear diary, I saw angel, she looked like heaven on earth." Sex talk and sex education. Paper presented Sex and Secrecy conference, University of the Witwatersrand, Johannesburg.

Peltzer, K. (2002). "Factors affecting behaviours that address HIV risk among a sample of junior Secondary school students in the Northern province, South Africa." **Health S.A. gesondheid,** 7 (3), pp89-93.

Pettifor, A. E., Rees, H., Steffenson, A., Hlongwa- Madikizela, L., MacPhail, C. Vermaak, K. & Kleinschmidt, I. (2004). **HIV and sexual behaviour among young South Africans: a national survey of 15-24 year olds**. Johannesburg: Reproducive Health Research Unit, University of the Witwatersrand.

Phoenix, A., Frosh, S. & Pattman, R. (2003). "Producing contradictory masculine subjects positions: Narratives of threat, homophobia and bullying in 11-14 year old boys." **Journal of social issues**, 59 (1), 179-195.

Plummer, D. (2001). The quest for modern Manhood: Masculinities, stereotypes, peer culture and the social significance of homophobia. **Journal of Adolescence**, 24 (1): 15-23.

Ramakrishna, J., Vasan, A., Kilaro, A. Willekens, I. & Karott, M. (2003). Less said the better: Societal attitudes and young people's sexuality. Paper presented at the Sex and Secrecy conference, University of the Witwatersrand, Johannesburg

Ratele, K. & Duncan, N. (Edt's) (2003). **Social psychology: Identities and relationships.** Cape Town: University of Cape Town Press.

Reddy, V. (1998). "Negotiating gay masculinities." Agenda, 37, pp. 65-70

Redman, P. (2000). "Tarred with the same bush': 'Homophobia' and the role of the unconscious in school-based cultures of masculinity." **Sexualities**, 3 (4): 483-499.

Riessman, C. K. (2001). "Analysis of personal narratives." In J.F. Gubrium, & J.A. Holstein (Eds.), **Handbook of interviewing** (695-710). London: Sage.

Ritzer, G. (1997). Postmodern Social theory. McGraw-Hill

Rivers, K., Aggleton, P. (1999). **Men and the HIV epidemic, gender and the HIV epidemic.** New York: UNDP HIV & Development programme.

Rosenthal, D.A. & Smith, A.M.A (1997). "Adolescent sexual timetables." **Journal of youth and Adolescence**, 26(5), 619-635.

Rotheram-Borus, M.J., Gwadz, M., Fernandez, M.I., & Srinivasan, S. (1998). "Timing of HIV Interventions on reductions in sexual risk among adolescents." **American Journal of Community Psychology,** 26 (1).

Salo, E (2002). "Condoms are for spares, not the besties: negotiating adolescent sexuality in post-apartheid Manenberg." **Society in Transition 33** (3): 403-419.

Seidman, I. (1998). **Interviewing as qualitative research: A guide for researchers in education and the social sciences**. New York & London: Teachers college press & Columbia University.

Seidler, V.J.C. (1989). **Rediscovering masculinity**. New York: Routledge publications.

Shefer, T. & Ruiters, K. (1998). "The masculine construct in heterosex." **Agenda** 37, 39-45.

Shefer, T. (1999). **Discourse of heterosexual subjectivity and negotiation. Unpublished Doctorate thesis**. Western Cape: University of the Western Cape

Shefer, T., Strebel, A., & Foster, D. (1995). ""So women have to submit to that..." Discourse of power and violence in students' talk on heterosexual negotiation." **South African Journal on Psychology**, 30 (2): 11-18.

Shisana, O. (2004). **Gender and HIV/AIDS: Focus on Southern Africa**. Paper delivered at the inaugural International Institute on Gender and HIV/AIDS, South Africa.

Segal, L. (2001). The belly of the beast: Sex as a male domination? In S.M. Whitehead & F.J. Barret (Edts), **The Masculinity reader**, (100-111). Oxford: Polity Press.

Selikow, T., Zulu, B. and Cedras, E, (2002). "The 'ingagara', the 'regte' and the 'cherry': HIV/AIDS and the youth culture in contemporary township life". **Agenda** 53: 21-33.

Stainton Rogers, W. & Stainton Rogers, R. (2001) **The Psychology of Gender and Sexuality**. Open University press: Bucking ham Philadelphia.

Strebel, A (1995). "Whose epidemic is it? Reviewing the literature on women and AIDS." **South African Journal of Psychology**, 25 (1): 12-20.

Struckman-Johnson, C., Struckman Johnson, D. & Anderson, P.B. (2003). "Tactics of sexual coercion: When men and women won't take no for an answer." **The journal of Sex Research,** 40 (1): 76-86.

Szasz, I. (1998). "Masculine Identity and the meanings of sexuality: A Review of Research in Mexico." **Reproductive Health Matters**, 6 (12), 97-115.

Taylor, M., Dlamini, S., Kagoro, H., Jinabhai, C., Sathiparsad, R, & De Vries, H. C. (2002). "Self-reported risk behaviour of learners at rural Kwazulu-Natal high schools." **Agenda** 53, pp 69-74.

Templeton (2003). **The loveLife brand: Replicating the dominant constructs.** *http://www.gwsafrica.org/knowledge/lovelife.html* (retrieved from internet, 13/06/2003)

Thorpe, M. (2002). "Masculinity in a HIV intervention." **Agenda** 53, pp. 61-68.

Tiefer, L (1995). Sex is not a natural act and other essays. Oxford: Westview press.

Tillotson, J. & Maharaj, P. (2001). "Barriers to HIV/AIDS protective behaviour among African Adolescent males in township secondary schools in Durban, South Africa." Society in Transition, 32 (1), 83-100.

Tolman, D., Striepe, M. F., & Harmon, T., (2003). "Gender Matters: costructing a modal of adolescent sexual health." **The Journal of sex research**, 40 (1), pp. 4-12.

UNAIDS & WHO (2003). AIDS epidemic update: December, 2003.

UNAIDS (2004) AIDS epidemic update.

UNDP (2000). **Gender update: United Nations, South africa.** Issue 3, July. www.undp.org.za

Upchurch, D.M., Lillard, L.A., Aneshensel, C. S., & Fang Li, N., (2002). "Inconsistencies in reporting the Occurrence and Timing of First Intercourse Among Adolescents." **The Journal of Sex Research**, 39 (3), 197-206.

Varga, C.A (2001). "The forgotten fifty per cent: A review of sexual and reproductive health research and programs focused on boys and young men in Sub-Saharan Africa." **African journal of reproductive of health**, 5 (3): 175-195.

Vance, C.S. (1995). "Social construction theory and sexuality." In M. Berger & S. Wallis, **Constructing Masculinity**. New York, Routledge publishers.

Vance, C.S. (1992). "Pleasure and danger toward a politics of sexuality." In C.S. Vance (Ed), **Pleasure and danger: Exploring female sexuality** (pp 1-28). London: Pandora Press.

Wagstaff, D.A., Abramson, P.R., & Pinkerton, S. T., (2000). **Research in Human Sexuality.** In Szuchman L.T. & Muscarella, F., **Psychological Perspectives on Human Sexuality.** New York: John Wiley & Sons, Inc.

Whitehead, S.M. (2002). **Men and masculinities**. Cambridge, Oxford: Polity press & Blackwell Publishers.

Wight, D (1994). "Boys' thoughts and talk about sex in a working class locality of Glasgow." **Sociological review**, 42 (4): 261-268.

White, S.D., & De Blassie, R.R (1992). "Adolescent sexual behaviour." **Adolescence**, 27, (105), pp. 183-191.

White, R.T. (1999). **Putting risk in perspective : Black teenage lives in the era of Aids.** Maryland: Rowman & Littlefield.

Wood, C. & Foster, D. (1995). "Being the type of lover...': Gender differentiated reasons for non use of condoms by sexually active heterosexual students." **Psychology in Society,** 20: 13-35.

Wood, K., Maforah, F., & Jewkes, R. (1998). ""He forced me to love him:" putting violence on adolescent sexual health agendas." Social Science & Medicine, 47 (2), 233-242.

Woody, J.D., Russel, R., D'Souza, H.J. & Woody, J.K. (2000). Adolescent non-coital sexual activity: comparisons of Virgins and non-virgins. **Journal of sex education and therapy,** 25 (4): 261-268.

Weeks, J. (1986). Sexuality. New York: Ellis Horwood.

Zani, B. (1991). "Male and female patterns in the discovery of sexuality during adolescence." **Journal of adolescence**, 14: 163- 178.

Appendix A

Questionnaire: Young males' construction of a masculine sexuality

Ek wil jou herinner daaraan dat die inligting wat jy hier verskaf vertroulik hanteer sal word. Ek weet dit is sensitiewe vrae, maar wees asseblief eerlik. Baie dankie vir jou samewerking.

Beantwoord asseblief al die vrae. Volg asseblief die instruksies sorgvuldig soos dit op jou van toepassing is. By sommige vrae moet jy slegs 'n kruisie in een van die blokkies trek, by ander moet jy self 'n antwoord in skryf.

Biografiese inligtin	g
1 . Hoe oud is jy?	jaar oud
2. Watter dag, maan	d en jaar was jy gebore? Dag:, Maand:, Jaar: 19
3. In watter graad is	jy vanjaar?
4. Waar woon jy? (V	/ul in een van die volgende. Ek wil nie jou volle adres hê nie, slegs die plek se
naam waarin jy w	oon.)
Dorp:	Plaas: Ander:
5. Hoeveel mense bl	y altesaam in jou huis?
6 . Het jy enige ouer	broers?
1. Ja	
2. Nee	Gaan na vraag 9 asseblief.
7 . Bly enige van jou	ouer broers in dieselfde huis waar jy bly?
1. Ja	
2. Nee	
8. Hoe gereeld praat	jy met jou ouer broer oor seksuele onderwerpe?
1. Dikwels	
2. Nou en dan	
3. Nooit	
9 . Het jy enige ouer	susters?
1. Ja	
2 Nee	Gaan na vraag 11 asseblief

10 .	Bly enige van jou	ouer susters in dieselfde huis waar jy bly?
	1. Ja	
	2. Nee	
11.	Hoe gereeld praa	t jy met jou pa oor seksuele onderwerpe?
	1. Dikwels	
	2. Nou en dan	
	3. Nooit	
12.	Is jou <u>eie</u> ma en p	pa getroud?
	1. Ja	
	2. Nee	
13.	Lewe jou pa nog	
	1. Ja	
	2. Nee	Gaan na vraag 19 asseblief
14.	Bly hy in dieselfo	le huis waarin jy woon?
	1. Ja	
	2. Nee	
15.	Is dit vir jou mak	lik of moeilik om met jou pa te praat oor dinge wat belangrik is vir jou?
	1. Baie maklik	
	2. Maklik	
	3. Gemiddeld	
	4. Baie moeilik	
	5. Ek sien hom n	ooit. Gaan na vraag 19 asseblief.
16.	Hoe gereeld praa	t jy met jou pa oor seksuele onderwerpe?
	1. Dikwels	
	2. Nou en dan	
	3. Nooit	
17.	Watter werk doer	n jou pa? (Spesifiseer. Indien jou pa nie werk nie, skryf "werkloos" in of dat
	hy 'n staatstoela	ag kry.)

18. Hoeveel verdien jou pa per maand? (kies slegs een opsie)
1. Werkloos 5. R1601,00 - R 3200,00
2. R1, 00 - R450,00
3. R451,00 - R 800,00
4. R801,00 - R 1600,00 8. Ek weet nie.
19. Lewe jou ma nog?
1. Ja
2. Nee Gaan na vraag 25 asseblief.
20. Bly sy in dieselfde huis waarin jy woon?
1. Ja
2. Nee
21. Is dit vir jou maklik of moeilik om met jou ma te praat oor dinge wat belangrik is vir jou?
1. Baie maklik
2. Maklik
3. Gemiddeld
4. Baie moeilik
5. Ek sien haar nooit Gaan na vraag 25 asseblief.
22. Hoe gereeld praat jy met jou ma oor seksuele onderwerpe?
1. Dikwels
2. Nou en dan
3. Nooit
23. Watter werk doen jou ma? (Spesifiseer: Indien jou ma nie werk vir betaling nie, skryf asseblief
"werkloos" in, of dat sy 'n "staatstoelaag" kry)
24. Hoeveel verdien jou ma per maand? (kies slegs een opsie)
1. Werkloos 5. R1601,00 - R 3200,00
2. R1, 00 - R450,00
3. R451,00 - R 800,00 7. Meer as R6401,00
4. R801,00 - R 1600,00 8. Ek weet nie.

25 .	Werk jy vir betal	ling buite skoolure	?
	1. Ja		
	2. Nee		Gaan na vraag 29 asseblief.
26.	Indien jy wel we	rk, watter tipe werl	s doen jy?
27.	Hoeveel verdien	jy per week?	
28.	Hoe oud was jy t	toe jy vir betaling b	egin werk het?
29 .	Hoeveel vertrekk	ke het jou huis?	
30 .	Hoeveel slaapkar	mers het jou huis?	
31.	Wie slaap saam r	met jou in een slaaj	okamer?
32.	Met wie deel jy s	saans 'n bed?	
33.	Is daar 'n badkan	mer in jou huis?	
	1. Ja		
	2. Nee		
34.	Is daar elektrisite	eit in jou huis ?	
	1. Ja		
	2. Nee		
35.	Gaan jy ooit na p	oartytjies toe waar j	ong mense saam kuier?
	1. Ja		
	2.Nee		Gaan na vraag 37 asseblief.
36 .	Indien jy bogeno	emde vraag 'JA ' g	eantwoord het, hoeveel keer in die laaste maand het jy me
	jongmense gekui	ier by partytjies?	ke
37.	1 Dra jy altyd 'n l	kondoom op jou w	anneer jy uit gaan na partytjies of net kuier met vriende?
	1. Dikwels		
	2. Nou en dan		
	3. Nooit		
37.	2. Hoekom dra jy	dikwels/nou en da	n/nooit (soos aangedui by vraag 37.1) 'n kondoom op jou
	wanneer jy uit	gaan na partytjies	of net kuier?

38.1 Hoe laat, volgens jou ouers/voog, moet jy op 'n weeksaand (vanaf Sondag to Donderdag) in
die huis wees?
1. 17h00 - 18H00 4. 23h00 - 24h00
2. 19h00 - 20H00 5. Later as 24H00
3. 21h00 - 22H00 6. Word nie toegelaat om uit te gaan nie
38.2 Hoe laat, volgens jou ouers/voog, moet jy op 'n Vrydag en Saterdag in die huis wees?
1. 17h00 - 18H00 4. 23h00 - 24h00
2. 19h00 - 20H00 5. Later as 24H00
3. 21h00 - 22H00 6. Word nie toegelaat om uit te gaan nie
39 . Het jou ouers/voog spesifieke reëls met watter <u>tipe</u> vriende jy toegelaat word om mee te kuier?
Indien 'ja', vertel vir my met wie word jy toegelaat om mee te kuier. Indien 'nee', Gaan na
vraag 40 asseblief.
40 W 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
40 . Wat doen jou ouers/voog indien jy jou ouers se reëls oortree?
41. Beskryf vir my wat jy gewoonlik tydens 'n tipiese naweek sal doen?
Pectura roborant cultus recti
42. Wat het jou ouers/voog jou geleer oor 'seksuele omgang'?
43 . Rook jy?
1. Ja
2. Nee Gaan na vraag 46 asseblief.
44 . Wat is die sigarette se naam wat jy rook?
45 Hoeveel sigarette rook jy per dag?

46 .	Gebruik jy soms alkohol?
	1. Ja
	2. Nee
47 .	Wat is die naam van die alkohol wat jy baie sal drink
48 .	Hoeveel <u>dae</u> in die laaste maand het jy alkohol gedrink? dae.
49 .	Het jy al ooit 'n graad gedruip?
	1. Ja
	2. Nee
50 .	In watter graad was jy verlede jaar?
51.	Wanneer beplan jy om skool te verlaat?
52 .	Wat is jou toekomsplanne na skool?
53.	Aan watter kerk of geloof behoort jy?
54.	Hoeveel keer het jy in die laaste 3 maande godsdienstige dienste bygewoon?
Die	volgende vrae handel oor seksuele gedrag en seksualiteit. Ek wil jou weer verseker dat die
inli	gting wat jy hier verskaf vertroulik hanteer sal word. Wees asseblief eerlik.
[Oı	nthou, wanneer daar na <u>seksuele omgang</u> verwys word, beteken dit wanneer die manlike
ges	lagsdeel binne die vroulike geslagsdeel geplaas word]
55.	Watter woord of woorde gebruik jy wanneer jy van 'seksuele omgang' praat?
56 .	Watter woord of woorde gebruik jy wanner jy van die 'manlike geslagsdeel' praat?
57 .	Watter woord of woorde gebruik jy wanneer jy van die 'vroulike geslagsdeel' praat?
58 .	Watter woord of woorde gebruik jy as jy praat van mans wat seksueel verkeer met ander mans?

59 .	Hoe voel jy oor mans wat seksueel verkeer met ander mans?	
60.	Watter woord of woorde gebruik jy wanner jy van jou 'eie geslagsdeel' praat?	
61.	Wat verstaan jy onder die woord "verkragting"?	
62.	Hoe oud was jy toe jy vir die eerste keer met 'n meisie (of seun) uitgegaan het op 'n 'date' (m teenoor wie jy spesiaal gevoel het)? jaar oud.	ı.a.w
63	Het jy al seks met 'n meisie/vrou gehad?	
05.	1. Ja	
	2. Nee Gaan na vraag 69 asseblief	
64 .	Hoe oud was jy toe jy die eerste keer seks met 'n meisie/vrou gehad het?	
	Hoe oud was die meisie/vrou met wie jy vir die eerste keer seks gehad het	
	Gee 'n kort beskrywing van wanneer jy vir die eerste keer seks gehad het en hoe dit gebeur he jy seks gehad het	et dat
67 .	Waar het jy vir die eerste keer seks gehad?	
68.	Indien jy reeds seks gehad het, wat het daartoe gelei dat jy die heel eerste keer seks het?	
69 .	Het jy al ooit seks gehad met 'n ander seun of man?	
	1. Ja 2. Nee	
70 .	Het 'n vrou/meisie al ooit druk op jou geplaas/jou geforseer om seks met haar te hê?	
	1. Ja	

	2. Nee	Gaan na vraag 73 asseblief
71 .	Indien jy JA geantwoord het by vr	aag 70, het jy toe seks met haar gehad?
	1. Ja	
	2. Nee	
72.	Indien jy vraag 70 ja geantwoord l	net, was hierdie vrou 'n
	1. Ma	
	2. Suster	
	3. Girlfriend	
	4. Ouma	
	5. Ander familielid	
	6. Vriendin	
	7. Ander (spesifiseer)	
73.	Wat verstaan jy onder "geforseer/d	
	Dit beteken	
74 .		u ge <mark>plaas om seks met</mark> hom te hê? Indien ja, vertel vir my wat
	het gebeur en of jy toe seksuele or	ngang met hom gehad het. Indien nee, gaan na vraag 75
	asseblief.	Pectura robocant cultus recti
75 .	In jou eie woorde, wat sal jy sê is	'n voorbehoedmiddel?
76.	Watter voorbehoedmiddel glo jy w	verk die beste?

77. Hoekom sou jy sê die voorbehoedmiddel wat jy noem in 76 werk die beste?
78 Op daardie eerste keer wat jy seksuele omgang gehad het, het jy en jou 'partner' enige iets gedo
om swangerskap te verhoed?
1. Ja
2. Nee
3. Nie op my van toepassing nie. Gaan na vraag 94 asseblief
79 . Watter metode het julle gebruik?
1. Kondoom
2. Pil
3. Inspuiting
4. Ontrekking
5. Veilge periode
80. Het jy en die meisie met wie jy vir die eerste keer seks gehad het gepraat oor voorbehoedmidde
Indie ja, het julle daaroor gepraat voor, tydens of nadat julle seks gehad het?
1. Voor eerste seksuele omgang
2. Tydens seksuele omgang
3. Na seksuele omgang
4. Nooit
5. Nie op my van toepassing nie
81. Hoeveel keer het julle voluit seks gehad?
82. Was jy ooit bekommerd dat jy Vigs/enige ander seksuele oordraagbare siekte by die meisie ko
opdoen?
1. Baie bekommerd
2. Bietjie bekommerd
3.Onseker
4. Nie bekommerd nie
5. Nie op my van toepassing
83 . Was dit moontlik vir julle om enige iets te doen om die risiko van infeksie te verminder?
1. Ja
2. Nee

84.	Indien u by vraag 83 JA geantwoord het, wat het julle gedoen?		
85 .	Indien jy al seks gehad het, hoe dikwels gebruik jy enige vorm van voorbehoedmiddels?		
	1. Altyd		
	2. Somtyds		
	3. Nooit		
86 .	Wat is jou rede hoekom jy altyd/somtyds of nooit (soos aangedui by vraag 85) enige vorm van		
	voorbehoedmiddels gebruik wanneer jy seks het?		
0=			
8 7.	Indien jy kondome gebruik,wat is die rede/redes hoekom jy kondome gebruik?		
88 .	Het jy al ooit 'n meisie swanger gemaak?		
	1. Ja		
	2. Nee Gaan na vraag 92 asseblief		
89.	Indien jy JA geantwoord het by vraag 88, wat met die baba gebeur?		
	1. Onseker		
	2. Aborsie (beëindiging swangerskap voor ongebore baba 16 weke oud is)		
	3. Aanneming (baba word deur 'n ander familie grootgemaak as eie kind)		
	4. Miskraam		
	5. Het die baba gehad		
	6. Huidiglik swanger		
90 .	Indien die meisie die baba gehad het, was of is jy as pa betrokke by die kind se grootmaak?		
	1. Ja		
	2. Nee		
	3. Nie op my van toepassing nie.		

2.	Tydens die afgelope 3 maande, met hoeveel verskillende mense het jy seks gehad?
3.	Het jy al ooit seks gehad het met 'n meisie vir wie jy nie spesiale gevoelens gehad het nie, ne
	sodat jy seks kan hê?
	1. Ja
	2. Nee
4.	Wie dink jy behoort te sorg vir voorbehoedmiddels wanneer 'n man en 'n vrou seks het?
	1. Die man
	2. Die vrou
	3. Albei
5.	Het dit al ooit gebeur dat jy seks met 'n meisie wou hê, maar dat sy nie wou nie?
	1. Ja
	2. Nee Gaan na vraag 97 asseblief
6.	Indien JA by vraag 95, beskryf asseblief hoe jy in hierdie situasie opgetree het.
7.	In watter omstandighede, sou jy sê kan 'n seun 'n meisie forseer om seks met hom te hê?
10	In watter emeter dichede gay iv sê is dit OV vir 'n sown om 'n maisie te sleen?
σ.	In watter omstandighede sou jy sê is dit OK vir 'n seun om 'n meisie te slaan?

Wat sal jy doen indien die meisie met wie jy seks het weier dat jy 'n kondoom gebruik?		

Blaai om na die volgende bladsy asseblief.



Hoe dikwels het jy elkeen van die volgende ondervindinge gehad tydens die laaste drie maande (merk asb die blokkie wat die meeste op jou van toepassing is. Met 'n regmerkie $\sqrt{}$) [frekwensies t.o.v seksuele gedrag]

	(1)	(2)	(3)	(4)
	NOOIT	TEN MINSTE EEN KEER PER MAAND	TEN MINSTE EEN KEER PER WEEK	DAAGLIKS
100. UITGEGAAN OP 'n 'DATE' (Met 'n spesiale boyfriend of girlfriend)				
101. SAAM MET 'n VREEMDE MEISIE/VROU HUIS TOE GEGAAN WAT JY BY bv, PARTYTJIE ONTMOET HET?				
102. SAAM MET 'n GROEP VRIENDE (MEISIES EN SEUNS) UITGEGAAN OP 'N DATE				
103. GESOEN ('French kiss')				
104. VRYERY				
105. SEKS GEHAD MET 'N MEISIE/VROU	4			
106. MEKAAR STREEL EN VASHOU	E C			
107. MASTURBASIE ALLEEN (wanneer jy jou penis streel en vryf vir stimulasie)		rtura robucant cultus reett		
108. MASTURBASIE MET VRIENDE				
109. 'n PORNOGRAFIESE FILM OF VIDEO GEKYK (Waarin naak mans en vrouens openlik seksuele omgang het)				
110. 'n PORNOGRAFIESE TYDSKRIF GELEES (Waarin mans en vrouens kaal getoon word en hul geslagsdele openbaar word.)				
111. SEKS GEHAD MET 'n SEUN OF MAN				
112. SEKSUELE FANTASIEë (Drome van jou en iemand anders waarin julle seksuele omgang het/ seksueel met mekaar verkeer.)				
113. VOORBEHOEDMIDDELS GEBRUIK				

	(1)	(2)	(3)	(4)
	NOOIT	TEN MINSTE EEN KEER PER MAAND	TEN MINSTE EEN KEER PER WEEK	DAAGLIKS
114. MET VRIEND/ VRIENDINNE OOR SEKS GEPRAAT		REEKT BROWN IN	TEELCE BROWNERS	
115. MET OUERS OOR SEKS GEPRAAT				
116. MET GIRLFRIEND OOR SEKS GEPRAAT				
117. Watter pornografiese tydskrift				
118. Watter van die volgende het j	y al self go	edoen/aan deelgeneem'	(merk alles wat jy al	deelgeneem
het aan)				
1. Anale seks				
2. Orale seks				
3. Seks in 'n Groep				
4. Seks met meer as een meis	sie/vrou te	egelyk		
5. Seks met 'n ouer vrou (5 j	aar en oue	er)		
6. Seks met 'n ouer man (5 ja	aar en oue	r) ora roborout cultus teo		
7. Nie op my van toepassing nie.				
Jong mense het verskeie opinies	oor seksu	ele verhoudings. Kyk	of jy met die volgend	le opinies
saamstem, nie saamstem en of jy	onseker i	is daaroor. Onthou we	eereens dat dit wat jy	in hierdie
vraelys in vul is vertroulik en nie	mand sal	weet dit is jou opinie	nie.	
119 Ek glo dit is in orde vir seuns en meis	sies 1	. Stem volkome saam		
om te soen (vry), drukkies te gee en	2	. Stem Saam		
mekaar te bevoel.	3	. Is onseker		
	4	. Stem nie saam nie		
120. Ek glo daar is niks verkeerd met		. Stem volkome saam		1
ongetroude seuns en meisies om seks te hê as hulle lief is vir mekaar nie.		. Stem Saam		
	3	Is onseker		

	4. Stem nie saam nie	
121 . Ek dink dat somtyds moet 'n seun 'n meisie forseer om seks te het met hom.	1. Stem volkome saam	
	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
122. 'n Seun sal nie 'n meisie respekteer wie instem om seks met hom te hê nie.	1. Stem volkome saam	
instem our sexs met nom te ne me.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
123. Meeste meisies wie seks het voor die	1. Stem volkome saam	
huwelik is spyt agterna	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
124. Meeste seuns wie seks het voor die	1. Stem volkome saam	
huwelik is spyt agterna	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
125.'n Meisie en 'n seun moet seks hê voor	1. Stem volkome saam	
hulle verloof raak om te sien of hulle bedoel is vir mekaar.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
126. EK glo meisies moet virgins bly totdat	1. Stem volkome saam	
hulle getroud is.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	

127. Dit is somtyds aanvaarbaar vir 'n seun om sy meisie te slaan.	1. Stem volkome saam	
om sy meisie te situan.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
128. Meeste van my vriende dink dat 'one- night stands' is OK	1. Stem volkome saam	
night stands is OK	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
129. Dit is OK vir seuns en meisies om seks te het, solank hulle voorbehoedmiddels	1. Stem volkome saam	
gebruik om swangerskap te verhoed.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
130. Meeste van my vriende wie seks het gebruik kondome	1. Stem volkome saam	
groum nondom	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
131. Ek is trots daarop dat ek kan aandring om 'n kondoom te gebruik elke keer	1. Stem volkome saam	
wanneer ek seks het.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
132. Ek sal NOOIT my meisie aanraai om ,'n aborsie te kry nie.	1. Stem volkome saam	
doored to my me.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
133. Dit is hoofsaaklik die vrou se verantwoordelikheid om te sorg dat	1. Stem volkome saam	
voorbehoedmiddels reg gebruik word.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	

134. Ek dink jy moet verlief wees op iemand	1. Stem volkome saam	
voordat jy seks het met hulle	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
135. Ek voel dat ek weet hoe om 'n kondoom ordentlik te gebruik.	1. Stem volkome saam	
ordentiak te geordik.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
136. Meeste van my vriende sal dit NOOIT aanraai dat hul meisies 'n aborsie	1. Stem volkome saam	
ondergaan nie.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
137. Meeste van my vriende glo daaraan dat jy moet verlief wees voordat jy seks het	1. Stem volkome saam	
met iemand.	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
138 . Mans het meer seks nodig as vrouens.	1. Stem volkome saam	
	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
139 . Ek sal weier om seks te hê met iemand wat nie 'n kondoom wil gebruik nie.	1. Stem volkome saam	
	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	
140. One-night stands is nie goed nie, maar ook nie sleg nie	1. Stem volkome saam	
	2. Stem Saam	
	3. Is onseker	
	4. Stem nie saam nie	

. Hoeveel van jou vriende het al seks gehad? Sou jy sê baie, sommiges, 'n paar	Baie	
of niemand?	Sommiges	
	'n Paar	
	Niemand	
	Onseker	
142 . Het jy al ooit 'n girl/boy friend geha spesiaal gevoel het en wie jy "gedate	0 ;	riend, bedoel ek iemand teenoor wie j
1. Ja		
2. Nee		
143. Hoeveel girl/boy friends het jy al ge	ehad?	
144. Dink terug aan die eerste keer toe jy	/ seks gehad het. Sou j	y sê jy het die meisie:
1. Geforseer om seks met jou te het t	een haar wil	
2. Jy het haar oortuig om seks met jo	ou te hê	
3. Jou meisie het jou oortuig om sek	s met haar te hê	
4. Jou meisie het jou geforseer om se	eks met haar te hê	
5. Albei van julle wou seks hê.	CAMPINE	
6. Nie op my van toepassing nie	Pectora robocaut cultus recti	Gaan na vraag 148
145. Hoe oud was jy toe jy vir die eerste	keer seks gehad het?	
146. Was jy ooit spyt dat jy op daardie o	uderdom met daardie r	neisie seks gehad het?
1. Ja		
2. Nee		
147 . Indien jy ja geantwoord het by vraa	g 146, hoekom sê jy so	?
3, 3, 6		
		·
148. Sommige jongmans is seksueel aan		dieselfde geslag. Was jy al ooit
seksueel aangetrokke tot 'n ander ma	an?	
1. Ja		
2. Nee		

149 .	Het jy al ooit seksuele kontak gehad met 'n ander man?
	1. Ja
2	2. Nee Gaan na vraag 153
150 .	Indien jy JA by 149 geantwoord het, wat het gebeur?
-	
151 .	Indien jy JA geantwoord het by vraag 149, met hoeveel mans of seuns het jy al ooit seksuele
(omgang gehad .
152.	In bogenoemde gevalle, sou jy sê jou partner of jy het gereeld, somtyds of nooit kondome gebrui
1	nie.
	1. Gereeld
2	2. Somtyds
<u> </u>	3. Nooit
2	4. Onseker
153 .	Wat sê jou vriende oor mans wat homoseksueel is?
_	
_	Pectora roborant cultus recti
154 .	Indien dit bekend word dat 'n man/vrou in jou dorp homoseksueel is, hoe behandel die
٤	gemeenskap so 'n man/vrou?
-	
155.	Sal jy sê jy is meer aangetrokke tot mense van die teenoorgestelde geslag, meer aangetrokke tot
1	mense van dieselfde geslag as jy, of is jy aangetrokke tot albei geslagte op dieselfde manier?
	1. Teenoorgestelde geslag
2	2. Dieselfde geslag
3	3. Beide geslagte

156. Is jy bereid om deel te neem aan die volgende fase van die navorsing: die individuele				
onderhoude met die navorser?				
1 .Ja				
2. Nee				
Slegs vir die wie nog nie seksuele omgang gehad het nie!				
157. Sommige mense het gemengde gevoelens oor seksuele omgang. Wat sal jy sê is jou persoonlik				
rede hoekom jy nog nie seksuele omgang gehad het nie?				
·				
158. Wat van die volgende beskryf jou toekoms planne om seksuele omgang te hê die beste?				
1. Ek sal wag totdat ek eendag in die huwelik tree				
2. Ek sal wag tot ek eendag verloof raak				
3. Ek beplan om te wag vir iemand wie ek lief is				
4 Ek beplan om seks te het sodra ek 'n geleentheid kry.				
159. Voel jy enige druk van andere om seksuele omgang te het?				
1. Baie druk				
2. Nie so baie druk				
3. Onseker				
4. Ontvang nooit druk nie				
160. Van wie sou jy sê ontvang jy die <u>meeste</u> druk om seks te hê?				

Weereens, baie dankie vir jou samewerking. Dit word baie waardeer!

Indien jy enige iets nie verstaan het in die vraelys, of jy is onseker oor enige iets wat in die vraelys gevrae word, skryf asseblief 'n nota aan my sodat ek kan verstaan wat vir jou onseker was en dit dadelik regstel. Ons sal dit ook miskien op 'n ander dag kan bespreek.

Indien jy ook iets met my wil deel wat ek nie gevra het in die vraelys nie, en wat jy voel belangrike inligting is wat jy graag met my wil deel, word jy hartlik uitgenooi om dit te doen en 'n nota vir my skryf.

161. My nota aan navorser is:



Weereens baie dankie vir jou samewerking; dit word regtig baie waardeer!

Geagte ouer/voog,

Ek is Alvino Wildschutt, 'n Mphil (Gender studies) student aan die Universiteit van Stellenbosch en 'n navorsingsprojek vorm deel my kursus. Ek wil graag die volgende navorsing doen:

Binne die konteks van die HIV/VIGS epidemie in ons land is dit belangrik om te ondersoek hoe mense in verskillende gemeenskappe hulle seksualiteit verstaan. Hierdie kennis sal die daarstelling van verskillende toepaslike voorkomingsprogramme wat gerig is op die behoeftes van spesifieke gemeenskappe, bevorder. Dit is veral belangrik om hierdie kennis oor tieners in te win en effektiewe voorkomingsprogramme vir hierdie ouderdomsgroep te voorsien aangesien die meeste mense die infeksie opdoen in hul jonger ontwikkelingsjare. Ek wil spesifiek fokus op jongmans in'n landelike gemeenskap in die Wes-Kaap en het die Langeberg-distrik gekies.

Die doelwit met die navorsing wat ek hoop om uit te voer, is om te verken hoe jongmans oor seksualiteit dink, voel en watter seksuele gedrag hulle openbaar.

Indien u wel toestemming verleen dat u seun wel kan deelneem aan hierdie studie, sal u seun vanaf 26 Julie 2004 vir drie weke tydens hul lewensorienteringsperiode, aan die volgende deelneem:

- 1. Vraelyste sal deur die seuns ingevul word waartydens hul opinies oor seksualiteit en manlikheid versoek sal word.
- 2. Klas fokus groepe sal met die seuns gehou word, waartydens ons hierdie bogenoemde onderwerpe verder sal eksploreer.
- 3. Slegs 'n geselekteerde groep leerders sal daarna gekies word vir individuele onderhoude.

U kan verseker wees dat die inligting verkry van die leerders vertroulik hanteer sal word en dat geen leerder se naam in enige publikasie van die navorsingsprojek sal verskyn nie. Nie eens die skool se naam, waar die navorsing plaasgevind het, sal in die navorsingsdokument verskyn nie. Die leerders se deelname aan die studie is vrywillig.

Hiermee verleen ek, (ouer/voog voorletters en van)	, toestemming
dat my seun (naam en van),	aan hierdie navorsingsprojek kan
deelneem. Ek verstaan dat sy deelname hieraan vry	willig is en dat alle inligting ontvang met
die nodige vertroulikheid en hanteer sal word.	
Handtekeing van ouer:	Patum
Handtekening van getuie: I	Datum
Indien u enige navrae het, kan u die navorser konta	k by 084 776 1570, of u kan sy supervisor,
Prof Amanda Gouws kontak by	
Baie dankie vir u samewerking.	
Mnr Alvino Wldschutt	
Prof. A. Gouws	ecti.

Indien u wel toestemming verleen, vul asseblief die onderstaande gedeelte in.

Ingeligte toestemmingsdokument:

Liewe deelnemer

Ek is 'n finalejaar student by die Universiteit van Stellenbosch in Gender-Studies en hierdie navorsingsprojek is deel van my kursus. Ek sal dit hartlik waardeer indien jy kan deelneem in hierdie navorsingsprojek van my. Die navorsing handel oor die gedrag van jongmans in seksuele verhoudings. Dit handel ook oor wat jongmans verstaan onder manlike seksualiteit en vroulike seksualiteit.

Ek weet dat dit 'n baie sensitiewe onderwerp is en dat julle dalk ongemaklik sal voel oor die tipe vrae wat gevra sal word. Ek kan julle verseker dat die inligting wat julle aan my sal verskaf sal konfidensieel hanteer word en dat niemand behalwe ek dit sal sien nie. Deelnemers se name sal nie op die werkstuk verskyn nie en sal op geen ander manier bekend gemaak word nie.

Indien jy bereid is om deelteneem aan my navoringsprojek sal ek die volgende van jou verwag:

- 1. Jy sal 'n vraelys moet voltooi wat by jou skool afgelê sal word. Geen onderwysers sal toegelaat word in die lokaal of gang waar die vraelys afgelê sal word nie.
- 2. Nadat jy die vraelys voltooi het, sal dit na die Universiteit van Stellenbosch geneem word waar dit toegesluit sal word en ek die enigste persoon sal wees wat toegang tot die vraelyste sal het.
- 3. Jou naam sal nie op die vraelys verskyn nie en ek sal dis nie weet dat dit jou vraelys is nie.
- 4. Ek sal ook op die vraelys vir jou vra of jy bereid sal wees om 'n onderhoud met my te voer. Indien jy bereid sal wees, moet jy verstaan dat hierdie onderhoud op band geneem sal word. Jy hoef nie jou naam aan my te verskaf op die band nie en jy kan selfs 'n skuilnaam ook gebruik. Hierdie onderhoud sal na skool geskied op enige tyd wat jou pas.
- 5. Indien jy nie aan die onderhoud wil deelneem nie en slegs die vraelys wil voltooi, moet jy slegs **NEE** op die vraelys invul.
- 6. Indien jy wel aan die onderhoud wil deelneem en **JA** antwoord op die vraelys, sal 'n plek en tyd met jou gereël word. Die onderhoud sal slegs 'n uur neem. Vervoer sal ook

verskaf word aan jou. Gedurende die onderhoud sal aan jou vrae gevra word oor jou perspektief oor seksualiteit en seksuele verhoudings.

Jy is nie verplig om die vraelys te voltooi nie en kan op enige tyd weier om die vraelys te voltooi. Jy is ook nie verplig om die vrae te beantwoord in die onderhoud nie en kan ook enige tyd die onderhoud stop. Ek verstaan dat die vrae jou dalk ongemaklik sal laat voel en respekteer jou besluit ten volle.

As jy na die onderhoud voel dat iets in die onderhoud jou ongemaklik laat voel het of dat iets jou pla, kan jy gerus enige van die volgende nommers skakel vir professionele hulp:

Riversdal hospitaal Voorligtingdienste- Me E Prins:

Dr. E Lesch (Stellenbosch- Kliniese Sielkundige):021 808 3455

Prof. A Gouws (Politieke Wetenskap Departement):021 808 2414

Verklaring deur navorser:

Ek, <u>Alvino Wildschutt</u>, die navorser van hierdie projek, verklaar hiermee dat die inligting wat in hierdie vraelys ontvang sal word, vertroulik en konfidensieel hanteer sal word.

Dat die enigste manier waarop ek vir jou sal kan kontak, is deurmiddel van die inligting wat jy aan my sal verskaf in die verklaringsvorm waarin jy toestemming gee om 'n onderhoud met my te voer.

Dat ek die enigste persoon sal wees wat hierdie inligitng sal het en dat niemand anders tot hierdie inligting toegelaat sal word nie.

Dat jou vraelys en die band waarop die onderhoud opgeneem is in 'n veilige plek toegesluit sal wees.

En dat na afhandeling van hierdie projek sal 'n afskrif van hierdie navoringsprojek aan jou skool se biblioteek beskikbaar gestel word, waar jy dit kan lees en bestudeer.

Ek verklaar ook dat nie een van die deelnemers se name sal in hierdie werkstuk sal verskyn nie.

Indien jy alles deur gelees het en wil graag aan hierdie navorsingsprojek van my deelneem, lees asseblief die volgende verklaring en vul dit in asseblief.

Verklaring deur deelnemer:

Ek bevestig hiermee dat ek uitgenooi is om deelteneem aan bogenoemde navorsingsprojek en dat ek vrywillig deel kan neem. Ek is bewus daarvan dat ek ter enige tyd my deelname aan hierdie projek kan staak en weier om voort te gaan. Ek is ook bewus daarvan dat my naam of my skool se naam nooit in hierdie werkstuk sal verskyn nie. Ek verstaan dat indien ek enige vrae het ten opsigte van die vraelys, dit my vry sal staan om hierdie vrae te lig aan die navorser of aan enige van die kontakte wat aan my gegee is. Ek verklaar dat ek hierdie ingeligte toestemmingsvorm gelees het, dat dit aan my verduidelik is en dat ek dit ten volle verstaan. Ek stem dis hiermee vrywillg saam om deelteneem aan hierdie navorsingsprojek.

Naam en Van:	
Handtekenig:	
Datum :	
Navorser se handtekenig:	
Navorser se Naam en Van: Alvino Wildschu	itt
Kontak telefoonnommer : 084 776 1560	ant cultus recti

Baie dankie vir jou samewerking!

Ingeligte toestemmingsvorm vir onderhoude

Liewe deelnemer,

Dankie dat jy hierdie vraelys voltooi het. Jou samewerking word regtig baie waardeer. Hiermee wil ek jou graag nooi om verder deel te neem aan hierdie projek deur 'n persoonlike onderhoud met my te voer. Soos ek voorheen aan jou bekend gemaak het, handel hierdie navorsing oor jongmans se konstruksies oor hul seksualiteit en die van jong dames se seksualiteit. Ek wil graag meer verstaan oor hoe jongmans optree in seksuel verhoudings en hoe hulle hierdie verhoudings verstaan.

Ek soek ten minste 20 mense om 'n individuele onderhoud met my te voer oor hierdie onderwerp. Ek weet dit is 'n sensitiewe onderwerp, maar ek kan jou verseker dat niemand sal weet dat jy die onderhoud met my gevoer het nie. Die inligting wat jy aan my sal verskaf sal vertroulik en konfidensieel hanteer word.

Die onderhoud sal om en by een uur duur wat op band opgeneem sal word. Slegs ek sal na hierdie band opname kan luister. Hierdie band-opname sal ook veilig bewaar word en toegesluit wees by die Universiteit van Stellenbosch. Slegs ek, die navorser van hierdie projek sal toegang het tot hierdie band-opnames .Die tyd en plek waar die onderhoud gevoer sal word sal met jou gereël word.

Ek is bewus daarvan dat van die vrae vir jou ongemaklik sal laat voel, en ook dat jy ter enige tyd kan weier om verder deel te neem aan die onderhoud. Ek glo ook dat dit 'n leersame ervaring vir jou sal wees en dat jy dit interessant sal vind. Indien jy enige verdere inligting oor hierdie onderwerp wil hê, sal ek aan jou die kontak telefoonnommers van proffesionele mense kan gee wie ook jou inligting proffesioneel sal kan hanteer.

Ek wil dit ook onder jou aandag bring dat indien ek tydens die onderhoud agterkom dat jy op enige manier mishandel word in jou huis of deur enige iemand buite jou huis, ek deur die wet verplig sal wees om dit met jou te bespreek en dat ons saam moet besluit watter stappe verder geneem sal moet word, asook wie die beste persoon sal wees om intelig oor jou situasie.

Indien jy wel instem om die onderhoud met my te voer, lees asseblief sorgvuldig die volgende paragraaf en vul dit in asseblief.

Ek (naam en van)	, verklaar hiermee dat ek die bogenoemde
inligting sorgvuldig deurgelees het, en dat ek	ingelig is oor my regte ten opsigte van hierdie
navorsingsprojek. Ek verstaan dat ek ten enig	ge tyd kan weier om deel te neem aan hierdie
projek en dat die informasie wat ek sal weergee	e, vertroulik en konfidensieel hanteer sal word.
My ouderdom is en ek is in graad_	Ek sal gekontak kan word by die
volgende telefoon nommer	
Ek kan by die skool gekontak word: Ja / Nee (omkring die een wat jy verkies)



Interview schedule

Seksuele aktiewe deelnemers

- 1. Kan jy onthou toe jy jou eerste seksuele sensasie ervaar het? (Gevoelens, denke, drome)
- 2. Wanneer het jy vir die eerste keer belanggestel in meisies as seksuele partners? Vertel vir my van daai eerste keer.
- 3. Wanneer het jy vir die eerste keer verlief geraak? Vertel vir my daarvan.
- 4. Vertel vir my van jou eerste verhouding.
- 5. Hoe sal jy daai eerste verhouding beskryf.
- 6. Het julle twee seks gehad? Indien nie, aan watter seksuele aktiwiteit het julle deelgeneem.
- 7. Beskryf vir my die eerste keer toe jy seks gehad het. Vertel dit vir my soos 'n storie.
- 8. Hoe het jy daardie eerste seksuele ervaring ervaar?
- 9. Het julle altwee 'orgams' bereik? (Het julle altwee *gekom*?)
- 10. Hou oud was jy gewees op daardie ouderdom?
- 11. Hoe belangrik was seks vir jou op daardie ouderdom?
- 12. Wat dink/voel jy voor/ terwyl/ na jy seks het?
- 13. Voel jy meer manliker tydens seks of wanner jy klaar seks gehad het? Hoekom sê jy so?
- 14. Het julle voorbehoedmiddels gebruik? Hoekom/Hoekom nie?
- 15. Was daar tye wat jy meer as een seksuele partners gehad het?
- 16. Al ooit iemand gedruk om seks te het met jou?

Nie seksuele aktiewe deelnemers

- 1. Hoekom dink jy het jy nog nie seks gehad nie?
- 2. Hoe gaan jy weet dis die regte tyd om seks te het en die regte meisie?
- 3. Wat is jou toekomsplanne om seks te het?
- 4. Voel jy onder druk omdat jy nog nie seks gehad het nie?
- 5. Verbeel jouself. Hoe dink jy sal die eerste keer wees wat jy gaan seks het. Beskryf die situasie vir my.
- 6. Beplan jy om voorbehoedmiddels (kondome) te gebruik wanneer jy vir die eerste keer seks het? (Hoekom/ Hoekom nie?)
- 7. Voel jy jou manlikheid is aangetas hierdeur omdat jy nog nie seks gehad het nie?

Vrae vir beide groepe

- 1. Wat beteken seks vir jou?
- **2.** Wat soek jy in seks?
- 3. Hoe voel jy oor mans wat seks het met ander mans?
- **4.** Dink jy mans wat seks het met ander mans is manlik (masculine)?
- **5.** In watter omstandighede is dit aanvaarbaar om n meisie te forseer om seks met jou te het of om 'n meisie te slaan?

