CORE

RISKY SEXUAL BEHAVIOURS AMONG ADOLESCENTS IN A RURAL **SETTING IN RUSTENBURG**

Ву

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DECLARATION

I, Moraope Nompikelelo Doris, student number 41620402 declare that the dissertation entitled "Risky sexual behaviours amongst adolescents at a middle school located in the rural setting of Rustenburg", is ownwork. All sources quoted in the study have been properly acknowledged. The dissertation has been submitted for the degree in Master's of Education in Inclusive Education at the University of South Africa.

Moraope, N.D

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ABSTRACT

Early engagement in sexual activities amongst adolescents has become a worldwide concern, with studies finding them to begin as early as 12 or earlier (Booysen & Summerton, 2000; Dowsett & Aggleton, 1999). The behaviour becomes even more concerning when youths engage in sexual relationships which are considered as "risky", that is, that put their health and wellbeing in danger. According to Trends (2010), such behaviour increases one's risk of contracting sexually transmitted infections (STIs) and unintended pregnancies.

Guided by Bronfenbrenner's ecological model, this study investigated risky sexual behaviours amongst adolescents living in the rural areas. The motivation was twofold, namely: to change the behaviours and to strengthen school sexuality education programme. The study aligned itself to qualitative paradigm and adopted a case study design. Data was collected using focus interviews with 20 adolescents (10 boys and 10 girls) in the age range of 15-17 years, who were selected following purposive sampling.

The findings revealed adolescents' tendencies of engaging in risky sexual behaviours such as: sexual relationship with older people, involvement with multiple partners, unstable relationship, pornography, sex in exchange of money. Factors contributing to these behaviours include: limited sexuality education, parents not teaching about sexuality education, lack of good role models, poverty, and fear to disclose problems to teachers, ostentatious lifestyles, peer pressure, and myths about sex. Suggestions put forth for preventing involving risky sexual behaviours include: appropriate school programmes, good learner-teacher relationship, effective communication with parents, strengthening of the learning content of Life Orientation, discipline at home, good friends, closing down of illegal taverns, illegalising sex with young boys and girls and restricting access to pornography on the internet. In conclusion, I suggest that the problem be addressed ecosystematically.

Keywords: Risky sexual behaviours; Adolescents; Multiple partners, Peer pressure, sugar daddy/mummy.

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ABBREVIATIONS AND ACRONYMS USED IN THIS DISSERTATION

AIDS Acquired Immune Deficiency Syndrome

CDC Centres for Disease Control

DoE Department of Education

FAMSA Family and Marriage society of South Africa

HIV Human Immunodeficiency Virus

LO Life Orientation

NGO Non-governmental Organisation

PSUNCParent Speak Up National Campaign

STI Sexually transmitted infection

TADA Teenage Against Drug Abuse

UK United Kingdom

USA United States of America

VCT Voluntary counselling and testing

CHAPTER ONE

INTRODUCTION

1.1. BACKGROUND

Early engagement in sexual activities amongst adolescents has become a worldwide concern, with studies finding them to begin as early as 12 or earlier (Booysen & Summerton, 2000; Dowsett & Aggleton, 1999). The behaviour becomes even more concerning when youths engage in sexual relationships which are considered as "risky", that is, that put their health and well-being in danger. According to Trends (2010), such behaviour increases one's risk of contracting sexually transmitted infections (STIs) and unintended pregnancies.

Risky sexual behaviour may include early initiation of sexual intercourse, high risk partners or sex with a partner who has one or more partners at a time (Berry & Hall, 2009). For Taylor-Seehafer and Rew (2000), inconsistent use of condoms and unprotected sexual intercourse are also risky sexual behaviours, owing to their association with transmitted diseases, unplanned pregnancies and risk reputation. Thomas's (2009) study, conducted in Gauteng, South Africa, amongst 1,139 learners, found that most sexually active adolescents were practising unsafe sex. Of the number, a total of 55% had multiple partners and 52% indicated having engaged in sex without a condom. Similarly, a study conducted by Khoza (2004) in Limpopo amongst 60 adolescents revealed teenagers' tendency to engage in risky sex practices, such as unprotected sexual intercourse, prostitution, sex at an early age, coercion and partnering with older men, thus increasing the risk of human immunodeficiency virus (HIV). These behaviours occurred in spite of comprehensive school-based HIV and acquired immune deficiency syndrome (AIDS) policy and preventative measures in place.

Internationally, studies also reveal teenagers' tendencies to engage in risky sexual behaviour. For example, a study conducted by Moore, Miller, Sugland, Morrison, Glei and Blumenthal (2010) in the United States of America (USA) amongst 368 adolescents, reported that most had engaged in sexual intercourse by their 18th birthday. The study further highlighted that the younger the age of

first sexual intercourse the greater the risk of unwanted pregnancy and STIs. Research conducted in Los Angeles reported that males between 12 and 20 living in settings without family members were likely to have multiple partners, with drug abuse seen as the primary predictor of risky sexual behaviour in females (Booysen & Frederick, 2009).

Factors associated with youth's involvement in risky sexual behaviour include tendencies to please partners and a fear of rejection or being beaten (Morojele, Brook, and Kachienga, 2006), and gift giving, an element that entitles one partner to physical and sexual rights to the other's body (Kaufman & Stavrou, 2002) and the financial benefits associated with such behaviour (Nicholas, 1994). According to Booysen and Summerton (2000), the interest of youths in financial gain makes it difficult for them to withstand force and coercion of their partners. Some studies associate the behaviour with poverty, suggesting the need for money as a driving force for involvement in this form of behaviour and early sexual relationship formation amongst the youth (Booysen & Frederick, 2009; Pettifor, Measham, Rees & Padian, 2004; Kaufman & Stavrou, 2002). Male youths claim physiological and social forces as limiting their ability to take responsibility for their own and partners' reproductive health (Lesch & Brembridge, 2006).

Some studies associate involvement in risky sexual behaviour with poverty, suggesting the need for money as a driving force for involvement in this form of behaviour and early sexual relationship formation amongst the youth (Booysen & Frederik, 2009). Similarly, a cross-national study conducted in Burkina Faso, Ghana, Malawi and Uganda revealed tendencies for poorer youths to engage in earlier sexual relations and non-use of protection when compared to their wealthiest counterparts, who tend to delay sexual debut (Madise, Zulu & Ciera, 2007). Due to financial benefits associated with their behaviour they are sworn to secrecy by their sexual partners (Nicholas, 1994), whilst their interest in financial gain makes it difficult for them to withstand force and coercion (Booysen & Summerton, 2000). Also, gift-giving was associated with sexual leverage, an exchange which entitles one partner's physical and sexual rights to the other's body (Kaufman & Stavrou, 2002).

1.2. PROBLEM STATEMENT

The research problem pertains to risky sexual behaviours among middle school learners in a rural setting close to platinum mine in Rustenburg. The learners knowingly and/or unknowingly engage in risky sexual behaviours. Cohabitation with older men and exchanging sex for gifts has become common practices, whilst some have turned to prostitution and/or involvement with multiple partners. Other than putting them at risk of contracting sexually transmitted diseases, and HIV/AIDS, and unplanned pregnancies (van Niekerk & Prins, 2001), the behaviour poses a challenge to schooling as it results in irregular attendance, increased failure rate and loss of learners to early pregnancy. These problems occur in a context in which schools provide limited guidance about sexuality and relationships, and public discourse on the subject is restricted by religious, social, legal and political norms (Nicholas, 1994). An understanding of these trends and patterns in sexual behaviour is essential to the design of appropriate school intervention programmes to improve sexual health status (Taylor-Seehafer & Rew, 2000).

1.3. RATIONALE

Adolescence is a crucial stage in which an individual begins to know or recognise his or herself as a person. Whiteside and Sunter (2000) explained that it represents one of the key critical transitions in the lifespan and is characterised by growth, change, considerable risk-taking and experimentation. Many adolescents find it difficult to resist pressure to use alcohol and drugs, and to initiate sexual relationships. It is at this stage that a teenager's lifestyle could be influenced in a positive way.

Adolescents' early involvement in risky sexual behaviours has negative consequences on their life, with unprotected intercourse perhaps leading to the contracting of STIs and/or unplanned pregnancies (Harrison, 2008). Consequences of teenage pregnancy and HIV/AIDS-related illnesses and deaths impact on school performance and can lead to poor academic and low

educational attainment, extended periods of absenteeism, and dropping out (Zwane, 2000). These problems directly influence their education as learners are often incapable of meeting scholastic demands satisfactorily (Le Roux, 1994). For pregnant learners, an embarrassment in attending classes may lead to school dropout (Sympson, 1999), as can economic factors (Donald, Lolwana & Lazarus; 2000). In the case of substance and alcohol abuse, girls might be raped (Khoza, 2004), and adolescents can experience alcohol-related injuries, academic, behavioural and social problems, as well as long-term health problems (Visser, 2003). These may leave them unable to concentrate at school (Thomas, 2009). Failure to complete school often prevents young adolescents from progressing to post-secondary education or from participating in many vocational training programmes, leading to fewer employment opportunities and lower wages (Docalavick &Livingstone, 2008). For adolescent mothers it may sometimes also be difficult for them to find employment and so pay for food, clothes and medicine for their babies (Phillips & Malcom, 2006).

Schools provide very poor guidance to their pupils and sex education is the exception (Nicholas, 1994), leading many adolescents to turn to prostitution and so increase the possibility of contracting STIs and HIV/AIDS (Van Niekerk & Prins, 2001). The Department of Education (DoE) in South Africa has introduced a comprehensive sexuality programme, commonly known as 'life-skills' or 'Life Orientation' in schools, to help young people take responsibility for their lives (Maluleke, 2003). Non-governmental Organisations (NGOs) such as FAMSA, *Love Life* and *Arise and Shine* have taken initiatives to educate children about healthy lifestyles with specific emphasis on HIV/AIDS, substance abuse and teenage pregnancy. Programmes of FAMSA and Love Life run nationally in their endeavor to promote healthy life-style and to stabilize families. However, despite the initiative taken to address sexual risks among adolescents such behaviour persists.

Communicating sexual issues to children has been a taboo in most of African communities. Thus, due to lack of parental guidance and supervision, adolescents fall pregnant at an early age. As stated by Nyovani, Zulu and Ciera (2007), an adolescent who talks more with the mother about sexual issues than

with a friend is less likely to initiate sexual intercourse and more likely to have conservative values. This implies that children who perceive that their mother disapproves of their having sex or who have talked with them about condom use, are at less risk (Jarlais & Semaan, 2005).

1.4. AIM OF THE STUDY

The aim of this research is to investigate risky sexual behaviours amongst adolescent living in the rural areas in order to change behaviour and strengthen sexuality education programmes.

The objectives are as follows:

- To identify sexually behaviours amongst adolescents living in the rural settings.
- ii. To explain risky sexual behaviours envisaged among adolescents.
- iii. To make future recommendations regarding ways in which sexuality education programmes could address this problem.

1.5. RESEARCH QUESTIONS

Against the above background the research question is posed as follows:

 What risky sexual behaviour is prevalent amongst youths living in the rural area of Rustenburg?

Sub-questions are as follows:

- i. What are common risky sexual behaviours amongst adolescents living in the rural setting of Rustenburg?
- ii. What factors contribute to adolescents' engagement in risky sexual behaviour?

iii. What sexuality education programme should be put in place to address this problem?

1.6. BRONFENBRENNER'S ECOSYSTEMIC THEORY

Urie Bronfenbrenner is the primary contributor to the ecological system theory (Yukti, 2009), with the term 'ecology' from which it is derived referring to the interdisciplinary scientific study of the living conditions of organisms in interaction with each other and their surroundings (Ceci, 2006). The ecosystem approach is both analytic and synthetic, and involves analysis of living systems by disciplinary science (Kay, 1994). The ecosystem perspective provides a framework for understanding the impact of the environment on development by examining the complexity of interrelationships between various systems with which an individual is constantly and dynamically interacting (Brendro, 2006).

Bronfenbrenner's theory was used in the study to help the researcher understand adolescents 'personal interaction with parents and school (microsysytem), and the role of the society (mesosystem) in the development of children with regard to risky sexual behaviours. It also assisted in understanding the influence of cultural values (macrosystem) on the topic under investigation, and how parents impact on an individual's development (exosysytem). These systems are discussed below.

1.6.1. The microsystem

The most basic system, the microsystem includes an individual's most immediate environment and the interpersonal interactions within it, such as the home, school or work setting, and/or systems in which he or she is operating (Yukti, 2009). The child's interaction within the environment will enable his/her developmental process to be properly realised (Lohman & Billings 2008). For such interaction to take place, parents should provide full support and encouragement to the child (Sigelman & Shaffer, 2009). Positive youth

development requires caring parents, supportive teachers and positive peers (Newfield & Mate, 2005). The family, peer group and classroom or neighbours are the primary units which influence the child's development (Yukti, 2009). In the family, the parent and the child influence each other and at school the teacher has an impact on the child, who in turn has an effect on the teacher's behaviour (Bronfenbrenner, 1994). Parents pass on skills needed by their children as adults, while assisting them to develop a sense of right and wrong within the system (Donald, Lolwana & Lazarus, 2000). Those individuals or groups with whom an adolescent interact have a dramatic impact on how he/she views his/her sexual behaviours (Newfield & Mate, 2005).

1.6.2. The mesosystem

The mesosystem is the setting with which the developing individual interacts (Bronfenbrenner, 1994). It is a more generalised system, referring to the interactional processes between multiple microsystems, influenced by the macrosystems, such as the governmental administration of health and welfare as well as of education. The mesosystem supports the transition of children from the family to society, as they grow and develop (Kobayashi, 2008).

1.6.3. The macrosystem

The term 'macrosystem' refers to cultural values and larger societal factors that influence an individual (Yukti, 2009). Understanding societal influences on risky sexual behaviours may be important because adolescents who engage with older people will be unlikely to insist on condom use. Adolescents who are repeatedly exposed to risky behaviour by pornography may be more likely to model such behaviours. Gender stereotyping in societies has portrayed girls as submissive to boys (Harrison, 2008).

1.6.4. The exosystem

The exosystem is defined as those systems that affect family members and through their impact on family members affect the child (Bronfenbrenner, 1994). Chang and Fine (2008) regard it as the setting in which an individual does not interact but has an impact on the person's development. Yukti (2009) is also of the opinion that a parent's workplace is an environment in which an individual is indirectly involved, and which affects him or her despite being external to personal experience. Some parents are unable to fulfil their parenting role due to shifts in socio-economic factors that have led them to migrate to towns (Donald, Lolwana & Lazarus, 2000). The absence of parents is likely to create major changes in the child's environment that may affect their interactions (Bronfenbrenner, 1994), with serious implications for the systems in the community and the society as a whole. Children raised in such environments may suffer unprecedented hardships (Chang & Fine, 2008). Adolescent behaviour is influenced by the media, which tends to overemphasise the importance of certain limited images of physical attractiveness to girls and present few models of successful women in professions (Donald, Lolwana & Lazarus, 2000).

1.7. DEFINITION OF KEY TERMS

Terms that are important to the study are clarified as follows:

Risky sexual behaviour is defined by Taylor-Seehafer and Rew (2000) as any sexual activity that increases the risk of contracting HIV or other STIs, or becoming pregnant. It includes early sexual debut; unprotected sexual activity; inconsistent use of condoms; high-risk partners; drug use; sex with a partner who has more than one partner at a time; oral, vaginal or anal sexual contact without a condom; and unreliable or inconsistent methods of birth control.

The concept 'adolescent' is clarified by Pisani (2000) as a young person who is no longer a child but who is not yet an adult. According to Sigelman and Shaffer (2009), he or she is experiencing the period of development between childhood

and adulthood, namely 'adolescence', believed by many authorities on human development to begin about the age of 10.

Coercion, according to Kaufman and Stavrou (2002), is an exchange of sex with money or gifts. Talks (2010), defines it as the process of convincing someone to do something he or she would not normally do, using threats, bribes, intoxicating or drugging.

Multiple partners are defined by Fora (2011) as having two or more partners that overlap in time.

Burtney and Duffy (2004) give examples of **peer pressure** as being to have sex, either directly, or through feeling of wanting to belong or seeking approval.

A so-called **sugar daddy/mummy** is an older person, perhaps the age as one's father of mother, who provides financial support in exchange for sexual favours or a relationship.

1.8. FURTHER DEVELOPMENT OF THE STUDY

Chapter1 presents the background of the study, the statement of the problem, the research questions, the aims of the study, theoretical framework and the rationale, and the theoretical framework adopted by the study, namely Bronfenbrenner ecosystem theory. Key definitions of terms are also covered.

Chapter 2 covers both international and national literature on risky sexual behaviours amongst adolescents. Topics suh as common forms of risky sexual behaviour, factors associated with risky sexual behaviours, implications of risky sexual behaviours, strategies to deal with risky sexual behaviours form part of the literature.

Chapter 3 presents research methods followed in investigating the problem posed by the study. It discusses qualitative research approach, the research design, the research site, sampling and procedures, compliance with the ethical

standards, data collection techniques, data analysis, and strategies followed to enhance the trustworthiness of the study.

Chapter 4 presents the research findings. It discusses common forms of risky sexual behaviours among adolescents, factors promoting risky sexual behaviours, and strategies for preventing risky sexual behaviours among adolescents.

Chapter 5 presents the findings of the research study, strategies for prevention and conclusion.

Chapter 6 covers the recommendations, limitations, recommendation for further study and conclusion.

1.9. SUMMARY

This chapter outlined the background of the study, that is, risky sexual behaviours envisaged among adolescents. The aim of conducting the study and the problems related to risky sexual behaviours were outlined. Bronfenbrenner's ecological system theory was used to show how the systems of school, family and peers interact and how external forces such as workplace and cultural values and beliefs influence the child's development and his or her interaction with the other systems.

CHAPTER TWO

LITERATURE REVIEW

2.1. INTRODUCTION

This chapter reviews literature on risky sexual behaviours among adolescents using international and local studies conducted in urban and rural areas. The discussion will begin with an overview of risky sexual behaviour amongst adolescents, followed by their forms or types, their implications, factors contributing to them and strategies for combating them amongst adolescents.

2.2. RISKY SEXUAL BEHAVIOURS AMONGST TEENAGERS

Many adolescents become sexually active around the ages of 13 and 14 (Mordaunt, 2008) as they begin engaging in increasingly adventurous activities, such as petting and kissing with tongues (Castrucci & Martin, 2002), thereafter following a progression of sexual activities leading to vaginal intercourse (Burtney & Duffy, 2004). A study by Krauss (2013) in the USA suggests that boys initiate sex at age 12 and girls at 14. The study further claims the prevalence of sexual intercourse to be higher amongst African-Americans before age 13, having four or more sexual partners, and the prevalence of unintended pregnancy reflecting a similar statistic (Mordaunt, 2008). Most of adolescents reported to have practiced unsafe sex with four or more partners, including men older than them, by Grade 12; 55% with multiple partners; 52% without condom use; and 44% under the influence of alcohol (McIntosh & Walker, 2008). A similar study amongst young urban women showed that they were more likely to engage in longer sessions of sexual acts, including oral, anal and vaginal, without the use of condoms (Sonkin & Hinde, 2007).

2.3. COMMON FORMS OF RISKY SEXUAL BEHAVIOUR

An analysis of the literature reveals various forms of risky sexual behaviour amongst adolescents, as presented in this section.

2.3.1. Multiple partners

Fora (2011) defines multiple partners as having two or more partners that overlap through time, a phenomenon amongst adolescents of both genders, with young women who engage in multiple partnerships tending to date men older than them. Leclere-Madlala (2009) writes that age disparity is often associated with multiple concurrent relationships, as well as financial and social security, in the sense that the relations enable partners to alleviate certain social pressures. For Berry and Hall (2009), having a number of sexual partners and concurrent sexual partners at the same time are all risk factors for HIV infection, especially in situations in which males are five or more years older than their female sexual partners.

Amongst men, having multiple sexual partners is viewed as establishing a man's status and wins admiration amongst same-sex peers (Maddock, 1997). The behaviour increases risk of HIV transmission through sexual networks (Berry & Hall, 2009; Robinson, Scheltema & Cherry, 2005). Morojele *et al.*, (2005) argue that male adolescents are more likely to have multiple partners if they live in settings without family members and if they abuse drugs, whilst Krauss (2013) suggests that drug use may increase the chance of the youth's engagement in unsafe sex with multiple partners. Risky sexual behaviours include having anal intercourse and sexual experiences with prostitutes and people with STIs (Rwenge, 2000). Young men may also be under pressure to have multiple partners and to give full sexual expression to their desires within a context informed by peer norms on male sexuality and desires that see them as unable to think rationally or control themselves (Walker, Reid & Cornell, 2004).

2.3.2. Sexual coercion

Studies show a high prevalence of sexual coercion in South Africa and globally (Talks, 2010). Research conducted in KwaZulu-Natal showed that young women who had been coerced into first sex were more likely to be Blacks (Mahara & Munthree, 2007), a social and public problem that has a serious impact on their reproductive health and behaviours. Many studies exploring forced relationships have also associated coercion with power imbalances and large age differences (Kaufman & Stavrou, 2002). In South African schools, teachers promised learners marks in exchange for sex (Shiff & Zeira, 2005), labelled by Kiff (2013), when strictly applied within an educational context and mostly directed to children, as 'pedagogic coercion'. Most adolescents who are involved in exploitative behaviour are trapped by the need to survive, having been cast into their situation by abuse, neglect, abandonment and/or poverty (Goldstein, 1999). According to Richter, Dawes and Higson-Smith (2004), coercion, choice and sexual exploitation are linked to poverty. Adolescents in such living conditions may be pioneered by an economic exchange in the form of gifts or favours for sex, and for Kaufman and Stavrou (2002) the economic context of gift-giving or receiving and its relationship encourage patterns of risky sexual behaviour, such as unsafe sex practices. This has led to the suggestion that, in South Africa, schoolgirls sometimes seduce teachers in order to inveigle them into buying expensive gifts and clothes (Richter, Dawes & Higson-Smith, 2004).

McCoy and Oelschlage (2002) regarded coercion as the act of using pressure, alcohol, drugs or force to have sexual contact with someone against his or her will. It includes bribes, threats, intoxicating a person or convincing him or her to do something he/she would not normally do (Talks, 2010). According to Noward and Wang (2003), in the United Kingdom (UK), victims of coercion are frequently forced into unwanted sexual behaviour, partially or fully, which may expose them to STIs or unwanted pregnancies (Shiff & Zeira, 2005). Adolescents who have had sex before the age of 15 are at risk of been coerced. Research conducted by the California Family Health Council (CFHC, 2013) shows that adolescents feel it easier to say 'yes' to sexual activities than to say 'no', due to

an imbalance of power that prevails in coercive relationships, as one party is forced to act against his or her will.

Sexual liaisons between teachers and students are another type of power imbalances in relationships that have received attention in recent years (McCoy & Oelshlage, 2002). According to Deque (2004), adults use non-physical tactics to gain sexual contact with an unwilling female partner. The wide gap between the teacher and the students is another indication of power imbalances and can lead to unwanted sex or unhealthy relationships. The literature confirmed that males are more likely to control females or use violence against them to enforce their dominance in longer and more committed relationships (Sherer & Sherer, 2005). A study conducted in London (UK) showed that women subjected to sexual abuse often find themselves in coercive sexual relationships, are vulnerable to non-condom use and frequently remaining faithful to their abusive partners (Frasca, 2003). Moore, Miller, Sugland, Morrison, Glei and Blumenthal (2010) associated coercion with poor protection from pregnancy and STIs.

Most adolescents in rural Japan are very poor, and for Wang (2003), adolescents who live in poor housing are depressed, find it difficult to interact with peers and have poor self-confidence. They are also likely to engage in coercive behaviour. Montgomery, Burr and Woodhead (2003) regard poverty as a driving force behind risky sexuality, leaving adolescents at risk of unwanted sexual attention (Djamba, 2005). It is also important to recognise that although adolescent males and females may be coerced by their partners their experiences are not necessarily the same.

2.3.3. Prostitution

Prostitution in South Africa, as in other countries, is a major concern. Most young people worldwide are on the street trading or selling sex for survival, associated by Gould and Fick (2008) with poverty, being orphaned due to HIV/AIDS, and unemployment. Aggleton, Ball and Mane (2006) estimated that 10,000 of children in South Africa are living or working on the streets, with most

exchanging sex for money, goods or protection. The same street-workers in Cape Town indicated that they had not been forced into prostitution, but some indicated that they had been forced by addiction to drugs, financial needs, or sickness (Gould & Fick, 2008). In Tanzania, children living on the street had been orphaned as a result of AIDS (Selvan & Kurpad, 2004), whilst in the UK, Earle and Sharp (2002) showed that many young women market their personalities through websites, using words such as 'fun-loving', 'bubbly', 'charming' and 'intelligent', to encourage clients. A study in Liverpool (UK) found that men paid women according to physical characteristics (Barber, 2011).

2.3.4. Sexual involvement with older people

Adolescents' sexual relationships with older partners have become a social trend in South Africa, associated by Kaestle, Morisky and Wiley (2002) with an early sexual debut, whilst the national longitudinal study of adolescent health in London showed that adolescents with a sexual partner who is older by more than two years are less likely to use condoms (Voydanoff & Donnella, 2000). According to Kaestle, Morisky and Wiley (2002), this places females at a higher risk than males of contracting STIs and unplanned pregnancies. In Gould and Fick (2008), females aged 13 or younger who engage in sex with men four years older are more likely to have had sex than those who were with a partner of the same age or younger. Females who become involved with older partners are less likely to engage in voluntary sex or use contraceptives, and more likely to become pregnant than young adolescents of the same age (Marin et al., 2006).

It is evident from the common forms of risky sexual behaviour discussed that most adolescents engage in sexual relationships with more than one partner. Some engage in prostitution or coercive behaviours, exchanging sex for money or gifts with older partners. Due to power imbalances or age differences, such adolescents are unlikely to initiate condom use, thus placing their lives at risk, contracting HIV or falling pregnant.

2.4. FACTORS ASSOCIATED WITH RISKY SEXUAL BEHAVIOUR

Behind teenager's engagement in risky sexual behaviour are various motivating factors, which include the following.

2.4.1. Lack of knowledge

According to Booysen and Summerton (2009), owing to relative lack of knowledge about risky sexual behaviours, lack of access to condoms and lack of empowerment with respect to the negotiation of safer sex, adolescents are at a great risk of contracting HIV and of falling pregnant. Adolescents whose parents talk more about sex, coercion and its effects will be less likely to engage in risky sexual behaviours.

In South Africa, as in other countries, communication about sexuality has been restricted particularly from parents (Harrison, 2008), thus allowing children to learn from peers who have a great influence on their lives. Similarly, research in the UK found talking about sex to be taboo and adolescents often embarrassed to talk about it (Petchery, Farnsworth & Heron, 2001). Lack of knowledge placed many at risk of engaging in sexual behaviours, for example, in the belief that they could not become pregnant because of their frequency of intercourse or if they did not want to (Voydanoff & Donnella, 2000).

2.4.2. Poverty-stricken home background

For Brook, Morojele, Zhang and Brook (2003), adolescents from disadvantaged families are often victims of risky behaviours since they are afraid to negotiate safer sex, fearing relationship breakage. Zimmer-Gembeck and Collins (2007) viewed them as having more elevated behavioural, social and emotional problems than other groups. Many adolescents are caught in a trap of engaging in sexual relationships with more than one partner.

Krauss (2013) indicated that money and reward are extremely important in sexual relationships among adolescents and that indeed sex does not occur without economic exchange. Kissing, petting and oral sex were exchanged for

gifts as signs of appreciation and the worth of the gift was often determined by the type of sex given (Kaufman & Stavrou, 2002:16). Kissing among both Africans and Whites was seen as an act of intimacy but could also be exchanged for a drink or soft drugs (Wood & Jewkes, 1997:43). Kaufman and Stavrou (2006:19) claim that girls from rural areas are less sophisticated and so easily seduced by worthless gifts (Pettiforet al., 2004:1996). Young women speak of money as the driving force behind sex and relationship formation (Deque, 2004).

2.4.3. Peer pressure

According to Marsh (2013), peer pressure is defined as the influence that peer group, observers or individuals exert to encourage others to change their attitudes, values or behaviours to conform to group norms. Morojele, Brook and Kachienga (2006:21) regard a social norm as one of the factors that either promotes or hinders behavioural changes. The term 'social norm' refers to perceptions and beliefs that influence an individual (Zwane, 2000). Selvan and Kurpad (2004) have regarded peer pressure as having a great influence on the adoption of behaviours risky to health, both positive and negative. Life experience has shown that most adolescents are more confined to negative group norms than to positive ones, and some behave in order to be liked or to fit in the group.

Individuals undergo a major life transition when moving from childhood to adolescence, and as Prinstein, Boergers and Spirito (2001) argue, they undergo many physiological changes at puberty, and spend more time with their friends and less time under their parents' supervision, thus influencing their lives without them realising it. Peers can influence each other in many ways, for example, suggesting they have sex when not ready, being involved with older people at an early age, or leaving school and working as prostitutes. Pressure from peers to have sex, perhaps directly, through wanting to belong or seeking peer approval, is an important issue (Burtney & Duffy, 2004). Sometime teenagers' fear of being excluded from a particular group may be a strong factor behind sexual behaviour among those who have experienced rejection and who

are seeking approval (Krauss, 2013). Young people feel under pressure to engage in activities for which they do not feel ready (Wang, 2003).

Peer pressure compels members to conform and live up to expectations of the group (Morojele, Brook & Kachienga, 2006). Teenagers' peer group culture is believed to play a significant role and empirical observations have revealed that having friends with risky behaviours constitute a strong predictor of teenagers also adopting them (Keenan et al., 1995). Many adolescents, particularly boys, are under pressure from friends to lose their virginity, to be able to say that they have 'done it' (UNESCO, 2006). Being able to prove that one is a 'man' is the foremost pressure on a male adolescent, thus, having sex with a partner can provide the entry ticket to the group (Burtney & Duffy, 2004). The desire to have sexual intercourse was described as being associated with a need to fit in with friends (Krauss, 2013), whilst some young people believe that having a sexual relationship will make them more grown-up (Marsh, 2013).

Traditionally, it has been accepted that peer pressure plays an important role in adolescents' motivation to engage in risky activities (Eaton, Flisher & Aaro, 2003), but this has recently been challenged following studies that show limited support. For instance, Ungar (2000) indicated that peer pressure was a myth that enables adults to explain youths' troubling behaviour, and that adolescents' adoption of the behaviour of peers was a consciously employed strategy to enhance personal and social power. For Eaton, Flisher and Aaro (2003), an adolescent's relationship to friends' behaviour is a serious common threat in all the theoretical models of risk behaviours.

2.4.4. Drug use

Risky sexual behaviour is associated with substance abuse among adolescents (Castrucci & Martin, 2002). As noted by Brook et al. (2003), adolescents who engage in risky sexual behaviours are more likely to have peers who consume alcohol and take drugs. It is estimated that 5.8% of South Africans over 15 are alcohol-dependent (Mwamwenda, 2004), placing them at risk of engaging in

early sexual acts. Frasca (2003) has indicated that living with non-family members and drug users appear to be the most salient in explaining social risks. Drug use is a major problem amongadolescents in South Africa (Morojele, Brook & Kachienga, 2006), with most taking drugs because they are easily accessible. According to Mwamwenda (2004), most of the addictive drugs are primarily available through the lucrative informal economy. Research has revealed that adolescents who are 'high' on drugs think irrationally and are less likely to negotiate the use of condoms (Walters, Simoni & Evans-Campbell, 2002), thus exacerbating their vulnerabilities to risky sexual behaviour.

Adolescents who have associated themselves with deviant peers and who are also taking alcohol and drugs are more likely to engage in risky sexual behaviours (Brook et al., 2006). The National Institute on Drug Abuse identifies parental issues, ready drug availability and poverty as three key factors that put teens at high risk of choosing to take drugs (McIntosh & Livingstone, 2008). For Morojele et al. (2005), young adolescents from socio-economically unstable families are more likely to frequent drinking venues, meet and have sex with typically older men. Krauss (2013) regarded lack of access to the wider reinforcement-rich society as a contributory factor in substance use and addiction. Morojele, Brook and Kachienga (2006) considered drugs to be primarily associated with sexual behaviour due to their psycho-normacological effects. Most teenagers who take drugs do so as a result of peer pressure, curiosity or attraction to the culture of clothes, music and language that goes with drug use (Marsh, 2013).

Alcohol is the most prevalent substance used by most adolescents (Walters, Simoni & Evans-Campbell, 2002), which like drugs may affect their judgment and lead to unplanned, unprotected and casual sex (Stalls & Hart, 2008). People who have had too much to drink share some typical behaviour, such as slurring of speech, poor balance, difficulty in walking or writing, acting stupidly, falling asleep and losing consciousness. There is evidence of a significant number of young people engaging in risky sexual behaviour under the influence of alcohol (Krauss, 2013), particularly between the ages 13 and 15 (Mcintosh & Livingstone, 2008).

2.4.5. Ignorance

Ignorance was cited as a factor by Shiff and Zeira (2005), who found that urban Black South African women, though knowledgeable about AIDS, did not use condoms because they did not believe that they were likely to contract it. Many adolescents perceive sexual intercourse with a condom as not pleasurable, artificial or too indirect (Zwane & Mngadi, 2004) while for others it is a difficult topic to broach (Kaufman & Stavrou, 2006). Many African males, like their white counterparts, argue that condom use is restrictive and that they prefer to have sex without one (Burtney & Duffy, 2004). Due to high rates of unprotected intercourse, adolescents are at risk of STIs and unplanned pregnancies (Bryan & Stallings, 2001).

2.4.6. Low perception of risk

Berry and Hall (2009) write that biological and behavioural factors, combined with low perceptions of risk, create an environment in which young women place themselves at risk of infection through unsafe sex. Thus, young people represent the main focus for altering the causes of this epidemic.

2.4.7. Cultural influences

An individual's sexual behaviours are influenced by norms and values in his or her culture. In KwaZulu-Natal, the social construction of young people's sexuality reflects both complex historical process of cultural and religious integration, as well as the contemporary resurgence of traditionalism (Harrison, 2008). Most Zulu women do not view sexual intercourse as necessary to their relationship and most do not want their male partners to use condoms because they believed they could move directly from the vagina to the throat (Harrison, 2008). They believe that the concept of an AIDS virus is incompatible with their belief that a person is bewitched by an *umthakathi*, or that angry ancestors have let evil spirits loose to spread the disease (MacPhail & Campbell, 2001).

Zulu women remain at high risk of HIV owing to a range of complex and interrelated factors, that is, social, psychological, economic, structural, environmental and interpersonal factors (Prather et al, 2006).

The risk factors discussed in this section indicate ignorance, poverty and peer pressure as core factors that influence adolescents' engagement in risky sexual behaviour.

2.5. IMPLICATIONS OF RISKY SEXUAL BEHAVIOURS

Risky sexual behaviour has a number of implications, elaborated upon in this section.

2.5.1. Health implications

One of the important health effects associated with involvement in risky sexual behaviour is contraction of HIV/AIDS, and becoming sexually active at an early age places youth at risk of contracting HIV and other STIs (Leigh, 2003). Those who begin having sex at young ages are generally exposed to risk for a long time, are less likely to use contraception, have more sexual partners and tend to engage in high risk sexual behaviours such as alcohol or drug use prior to sexual intercourse and having multiple concurrent sexual partners. Whilst young people are at risk of unintended pregnancies and STIs, including HIV and AIDS (Rwenge, 2000), Burtney and Duffy (2004) have indicated that people who embark on relationships at a relatively early age are those who are better looked after by their parents, as they provide them with basic necessities such as food and clothes.

AIDS is not only a worldwide problem but also an African and South African one, both in terms of health and the economy (Mwamwenda & Jadezweni, 2000). Globally, South Africa is second only to Botswana in the number of people living with HIV, with over 5.5 million (Berer, 2003), and more than half of all new infections among people between 15 and 21 (Rees, 2009). Earle and Sharp (2002)

found Chlamydia to be the most common health problem diagnosed in UK clinics, and increasing, with an estimated 53,000 people living with HIV, compared to 49,000 in 2002. Many researchers have demonstrated that adolescents and young adults with high levels of knowledge about STIs and HIV/AIDS continue to practice unsafe sex (Zwane & Mngadi, 2004).

2.5.2. Educational implications

Risky sexual behaviours have been identified as the main cause of school dropouts. For example, pregnant learners, who are less likely to bear social stigma, are at high risk of dropping out from school (Kohler, Manhart & Lafferty, 2008). Schiff and Zeira (2005) have indicated that adolescents who have dropped out of the regular school systems are characterised by behavioural problems, learning disabilities, substance abuse and exposure to sexual violence. Docalavich and Livingstone(2008) argue that dropping out from school at 15 or 16 will limit their future opportunities.

2.5.3. Behavioural implications

Many young people engage in sexual behaviours that could put themselves and their lives at stake, commonly sex at an early age, multiple partners, sex under the influence of drugs, and unprotected sexual behaviour. For example, many female adolescents choose not to refuse sex in order to avoid physical abuse and to maintain stability in a relationship (Eaton, Flisher & Aaro, 2000). Some young people engage in sexual activities without using a condom, while others are not consistent in using them. A research study in Chicago, USA, reported that rates of consistency in condom use are as low as 37% (Adefuye et al, 2009), whilst according to Earle and Sharp (2002), individuals who use illegal drugs, including marijuana, are more likely to report inconsistent condom use. Such risky behaviour can have unintended results, such as HIV infection, STIs and unintended pregnancies (CDC, 2011). For Guzman and Bosch (2007), risky behaviours can affect youth by disrupting their normal development or prevent

them from participating in typical experiences of their age group. For example, teenage pregnancy can prevent youth from progressing in their education.

2.5.4. Social implications

The communal or societal factors play a major role in shaping an individual's sexual behaviour, and the use of drugs and sexual exploitation of adolescents by older people may have a negative influence. Stigmatisation is a social problem and can also have negative implications. Adolescents, who happen to contract HIV or fall pregnant at an early age, are more likely to be labelled with bad names, gossiped about or discriminated against in the community. In a study conducted in Baltimore, USA, by Gretchen, Shang-En and Jonathan (2009), found the social implications in HIV-positive people to be associated with a number of negative factors, including decreased social support, depressive symptoms and engagement in risky behaviour.

2.5.5. Job implications

Africa, Deventer and Barnard (2008) found that adolescents who engage in behaviours risky to health, such as sexual intercourse at an early age, have less economic productivity than their peers later in life. For example, young women who choose to bear children at an early age are more likely to fail to complete their high school than their counterparts who have completed schooling, thus reducing their career opportunities (Kohler, Manhart & Lafferty, 2008). According to Eaton, Flisher and Aaro (2000), only 11% of teenage mothers in a UK study who had not completed high school received a salary, while the remaining 89% were unemployed.

2.6. STRAREGIES TO PREVENT TEENAGE INVOLVEMENT IN RISKY SEXUAL BEHAVIOURS

Africa, particularly Southern Africa, remains the global epicentre of the AIDS epidemic (Robryn, 2009), with STI clinics having been established to provide secondary prevention services through the early detection and treatment of infected individuals, and thus controlling the spread by providing easy access to curative therapy (Coury-Doniger et al., 2000). Carey et al., (2008) have suggested that sexual health promotion and disease prevention programmes should also be established to help people reduce their risk of contracting STIs by providing information about their epidemiology and transmission, and by encouraging risk reduction strategies such as condom use and avoidance of multiple sex partners.

Programmes such as an HIV/AIDS strategic plan for South Africa were used to reduce the rate of new HIV infections by 50% by the year 2011 (Berry & Hall, 2009). Recent UNAIDS data highlighted the continuity in ensuring sustained and effective prevention and protection efforts addressing particularly the vulnerability of young women and girls (Coury-Doniger et al., 2000). NGOs programmes, such as *Love Life* and *Famsa* centred on schools to teach learners about healthy lifestyles associated with condom use, teenage pregnancy, HIV/AIDS and drug use, and played a prominent part in the fight against HIV/AIDS. Most pregnant and HIV-infected adolescents are encouraged to become positive in life so as to deal with communal or societal stigma attached to them.

The most basic means of preventing HIV infections are to ensure that body fluids, whether blood, seminal or cervical, do not enter the bloodstream of a non-infected person (Johnson, et al., 2009). Most prevention programmes in Southern Africa carry the abbreviated message of ABC, that is, *Abstain, Be faithful and Condomise* (Pisani, 2000). Around one third (33%) of such programmes have had a positive impact on two or more behaviours or outcomes in the USA, increasing the abstinence rate, reducing the number of sexual partners, increasing condom use and reducing unprotected sex. In Tanzania, the MEMA Kwa Vijana intervention has reduced both the number of sexual partners

among boys and increased condom use among both boys and girls (Kirby, Laris & Rolleri, 2006).

Consistent use of condoms serves the dual purpose of contraception and disease prevention, and therefore represents a key strategy in the prevention of STDs and pregnancy (Luke, 2003). Voluntary counselling and testing (VCT) is also the most likely intervention strategy because those who learn that they are HIV-positive may increase their use of condoms in order to reduce the risk of transmitting HIV to their sexual partners (McPhail & Campbell, 2002).

Content analysis of sexual health promotion materials regarding sexual behaviour in young people would reveal the extent to which emphasis has been placed on external influences, such as peer pressure, family influence, social deprivation and commercial interests (Burtney & Duffy, 2004). Wu et al., (2003) defined high-risk sexual behaviours in such programmes as sex without a condom, sex with multiple partners, frequent sexual activity or sex with a highrisk partner. According to Robryn (2009), prevention programmes must emphasise that sexual transmission of HIV remains the most important mode of infection. As part of the national AIDS prevention strategies, many NGOs in developing countries have implemented peer sexual health interventions among adolescents (Agha & Van Rossem, 2004), thus, encouraging good sexual health is paramount in the fight against HIV infection. Whiteside and Sunter (2000) have suggested two HIV preventative measures, firstly, that a biomedical intervention be set to ensure whether a person who has had sex with someone infected, and then reduce the risk; and secondly, that the practice of 'dry sex' in which a woman uses a drying agent in the vagina with the belief of deriving more pleasure, be discouraged.

Campbell (2003), in her book *Letting them Die* provides a detailed account of a multi-component project aimed at mobilising a local community in a mining town in South Africa to prevent HIV/AIDS. Campbell's project included interventions to promote peer education among sex workers and young people, as well as to encourage various stakeholders to work together to prevent HIV/AIDS. For Coury-Doniger et al. (2000), education aimed at changing people's high risk of sexual behaviour is important in the battle against HIV. Teenagers

need to understand that satisfying sexual relationships, like other relationships, require careful thought and wise action (Kirby, Laris & Rolleri, 2006). Campbell (2003) urges that attention be paid to the macro-social factors that influence sexual behaviour in groups and communities. Berger (2009) argues that in translating knowledge about the potential danger of exposure to HIV into action one needs to feel that one is at risk of infection. On the other hand, Campbell found this became difficult when the disease was categorised as 'the disease of others'. Nattrass (2004) places the blame on the South African AIDS management, which she describes as a 'sorry' tale of missed opportunities, inadequate analysis, bureaucratic failure and practical mismanagement. Nattrass compares AIDS management with the philosophy of triage, whereby resources are only allocated to those with a good chance of recovery once treated.

Chan and Reidpath (2003) urged that innocent victims be protected by stopping those with HIV from infecting others. This can be accomplished by teaching people about risky sexual behaviours (Kirby, Laris & Rolleri, 2006). A variety of variables, such as acceptance and comfort with sexuality, guilt and sexual selfesteem have been found to be associated with safer sex behaviours (Robinson, Scheltema & Cherry, 2000). Parental involvement in the children's lives and their confidential transmission of religious and moral values, have been seen as a successful mode of preventing risky and moral behaviours in children (Kirbyet al., 2006). It is evident from the studies conducted nationally and internationally that risky sexual behaviours are global problems. Earlier research argued that the specific ones that put one at high risk for HIV infection and other STDs are more likely to be practiced by deviance-prone adolescents (Wu et al., 2003).

2.7. CONCLUSION

There are many factors that contribute to risky sexual behaviours, notably coercion, multiple sexual partners, unprotected sexual intercourse and alcohol and drug abuse. Such factors have a negative impact on adolescents' lives,

particularly those from poor socio-economic background. Some engage in coercive behaviour for economic survival, with exchange of sex for gifts, clothes or money. Sometimes, due to power imbalances, they are seduced by adults or male teachers into having sex with them. Some adolescents engage in multiple sexual partnerships without the use of condoms, generally regarded as the most indicative risk of sexual behaviour as it increases the risk of HIV through sexual networks for both young men and women. Adolescents more likely to have multiple partners are those who abuse drugs and alcohol and who have sexual experience with prostitutes. Most adolescents become involved in sexual behaviour through pressure to belong or to be liked by their peer group. Young people are pressurised into engaging in activities for which they are not ready. Peer approval and conformity to the group is an important issue for most young people. Adolescents who engage in risky sexual behaviours are at risk of contracting HIV/AIDS or falling pregnant. Many studies have shown that young women are more likely to be at risk of contracting HIV/AIDS than are young men. Pregnant adolescents may find it hard to relate to other adolescents who are not pregnant. Most of them choose not to complete their studies due to the stigma attached to their behaviour.

CHAPTER THREE

RESEARCH METHOD

3.1. INTRODUCTION

The previous chapter covered literature pertaining to risky sexual behaviours. In this chapter the focus is on the methods and procedures followed to obtain data, including the research site, type of sampling and sampling procedures. It also outlines the type of participants invited in the research proceedings, and presents an analysis of how trustworthiness was achieved.

3.2. QUALITATIVE RESEARCH APPROACH

Qualitative research was deemed appropriate for the investigation of the problem posed by this study. Qualitative research embraces interpretative assumptions which hold the view that reality lies within an individual and therefore, there is no single reality (Guba & Lincoln, 1994); people are unique and they may experience a phenomenon differently. Reality can be understood when the researcher and the researched are in a relationship.

Baxter and Jack (2008) clarifies qualitative research as a method of inquiry employed in many academic disciplines, particularly social sciences, which aims at gathering an in-depth understanding of human behaviours and the reasons that govern them. According to Key (1997), qualitative methods investigate the "why' and 'how' of decision-making and produce information only on a particular case studied. Qualitative research is used when exploring issues, understanding phenomena and answering questions (Ereaut, 2013). In qualitative research, participants are observed in their natural habitat and in-depth interviews are used to allow the researcher to find out detailed information about one individual participant (Johnson, 2013). According to Silverman (2011), a qualitative research approach has the following characteristics:

- It often begins with a single case, chosen because of its convenience or interest.
- It often studies phenomena in the context in which they arise through observation, recording or the analysis of printed and internal materials.
- Hypotheses are often generated from the analysis rather than stated at the outset.
- There is no agreed way to analyse data. Multiple research models exist, for example, grounded theory, constructionism, and discourse analysis.
 Sometimes these are in conflict with each other.
- Where numbers are used they are usually in the form of simple tabulations designed to identify deviant cases and not lead to statistical correlations or tests.

The choice of qualitative approach over quantitative approach in this study has been justified by a number of factors. Firstly, it assisted in gathering more indepth information through face-to-face interviews with participants. It also allowed participants to give the required information because the research was conducted in their natural setting (school). The collected data was not measured with numbers, as in quantitative research, but through verbal expression during focus group interviews. The use of open-ended questions prefaced by 'why' and 'how' rather than 'yes' or 'no' also influenced the approach. Through qualitative research the researcher was able to investigate, explore and understand issues evolving around risky sexual behaviours among adolescents between 15 and 17 years of age.

3.3. RESEARCH DESIGN

This research is a case study, in which the researcher focused on one phenomenon to understand it deeply (McMillan & Schumacher, 1993). Baxter and Jack (2008) defined a case study as a research approach between concrete data collecting techniques and methodological paradigms. According to Soy (2006), it excels at bringing about an understanding of a complex issue or object and can extend experience or add strength to what is already known. A case study is

considered when the focus of the study is to answer "how" and "why" questions, or when the behaviours of those involved cannot be manipulated (Maluleke, 2010). The case study research design was applied in the study to gather indepth information of the situation and what it meant to those involved.

A case study allowed me to focus on one case, namely one middle school, focusing on risky sexual behaviours among adolescents. A pilot study was conducted in a rural area and characteristics revealed were similar to the findings of four focus group interviews. It was conducted within a qualitative research paradigm. According to Berkwits and Sinui (1998), qualitative research is a form of inquiry that analyses information conveyed through language and behaviour in natural settings. Studies within a qualitative research paradigm are driven by a desire to understand human behaviour and experiences from the participants' perspectives (Golafshani, 2003), and to permit in-depth understanding of the phenomenon studied. The approach to qualitative research is naturalistic in the sense that phenomena are studied in context-specific settings, such as real world settings, with the researcher not attempting to manipulate them (Patton, 2002:39).

3.4. THE RESEARCH SITE

The study was conducted in a school formally known as a middle school from a rural setting in Rustenburg. The area is predominately a Tswana area which includes refugees from other countries. My choice of the site was informed by a number of factors. Firstly, the school was situated in the vicinity of illegal taverns, which some learners visited during break to buy drugs, leading behavioural change. Secondly, the learners were left at home on their own. Most of the parents were working in towns and due to lack of parental guidance, children started to behave unethically, by involving in risky sexual behaviours with older people, having multiple partners and using drugs which put them at risk of contracting HIV and teenage pregnancy.

A third factor was the number of children who are affected by HIV/AIDS as a result of early sexual debuts. Many affected children are unable to cope academically due to absenteeism as a result of going for treatment or due to HIV-related sicknesses which eventually lead to drop-outs. Fourthly, there was a higher rate of teenage pregnancy among adolescents, most of whom became pregnant at an early due to lack of sexuality education in schools, and through engagement in unprotected sex. Some were unable to complete their grades due to stigma attached to the situation.

3.5. POPULATION

A sample was obtained from 568 learners between the ages of 15-17 years at the research site. Following purposive sampling the researcher selected 20 adolescents comprising 10 males and 10 females whose parents consented to their participation. The learners were in Grades 7, 8 and 9.

3.6. SAMPLINGAND PROCEDURES

Selection of the participants was by purposive sampling in which the individual limits are selected (Davis, 2013). According to Marriott (2013), it relies on the judgement of the researcher when it comes to selecting the units, for example, people, cases, events or pieces of data to be studied. Crossman (2014) regarded it as useful in reaching a target sample quickly. A small sample (20) was selected between 15 to 17 learners, targeting male (10) and female (10) adolescents whom the researcher thought were sexually active and able to talk.

3.6.1. Description of participants

Participants comprised 10 girls and 10 boys, with ages ranging from 15 to 17 years. Each group participated in two sessions that is for gender and mix. Details of the participants are described in the table below.

Table 3.1: Participants in the study

PARTICIPANTS	AGES			TOTAL	GRADES			TOTAL
	15	16	17		7	8	9	
FEMALES	6	4	-	10	2	4	4	10
MALES	2	6	2	10	4	3	3	10

I was able to retain all the groups through the interview, although some were unable to talk freely on issues pertaining to sex due to cultural background and taboo. Two girls aged 15 and 16 and one 15 year old boy spoke Xhosa, whilst the others were Tswana speaking.

3.7. COMPLIANCE WITH THE ETHICAL STANDARDS

The DoE, as the overseer of these schools, was approached for approval. Ethical clearance was obtained from the Research Ethics Committee of the Faculty of Education at the University, and permission to conduct the research at the site was obtained from the school principal, School Governing Bodies (SGBs) and educators. Written requests to participants were given to the children and their parents, with details about the study disclosed to them and any questions or concerns addressed. Participants were informed about the purpose of the study face to face before the research proceedings and were assured of the confidentiality of their responses. Participants were informed that the participation was voluntarily and that there would be no payment. The following ethical issues identified by Mora (2005) were adhered to in this study:

Participation was voluntary, based on understanding of the nature of the research project. During the discussion, participants were assured that they would be protected from physical or any other form of harm. They were not coerced into participating but rather were informed about their rights to withdraw without punishment, and their data would not be shared with their teachers or parents. Their real names were replaced by pseudonyms. Tapes were locked in a safe place until completion of the research study and support

offered to those who were emotionally and psychologically affected. Participants were invited to sign a confidentiality letter in which they promised not to share the views expressed during the interviews with other people.

3.8. DATA COLLECTION TECHNIQUES

Even though there are various research methods that could be employed in a qualitative research study, such as individual interviews and observation, I selected a focus group as the most convenient method of this study.

3.8.1. Focus group interviews

A focus group is a strategy for obtaining better understanding of a problem or making an assessment of a problem, concerns, a new product, programme or idea, by interviewing a purposefully sampled group of people rather than each person individually (Ndebele, 2005). According to Garbers (1996), focus groups are used to share values of loyalty and solidarity which do not necessarily apply to individuals and individual behaviour. For this topic, the focus group interviews were important for facilitating dialogue and free flowing of ideas among peers. They allowed participants to express their views freely, pertaining to issues with regard to risky sexual behaviours.

The situation may be otherwise if individual interviews were used because some participants might have felt threatened to engage in a discussion about sexual behaviours with an adult, and some might find the method confrontational, which could lead to bias because participants would be unable to reflect the truth about the topic under investigation.

The groups were four in total, with two separated groups of learners comprising 10 males and 10 females each, as well as two groups of mixed genders. The researcher facilitated the interview and encouraged each participant to respect each other's views. The interviews lasted between 45 and 50 minutes in all groups, with similar questions asked in all the groups.

The following questions guided the interviews:

- a. What are factors that contribute to risky sexual behaviours?
- b. Why do adolescents get involved in such behaviours?
- c. What are the effects of such behaviours to adolescents?
- d. How could those risk behaviours be dealt with?

For the sake of convenience and safety, interviews took place at school and in the afternoons, thus ensuring that the normal school programme was not disturbed. To ensure accuracy and reliability of data, and completeness of the verbal interaction, interviews were recorded with participants' permission.

3.9. DATA ANALYSIS

Data analysis is primarily an inductive process of organising the data into categories and identifying pattern among the categories (McMillan & Schumacher, 1993). Data analysis provides basis for organising findings and for explaining its significance and presenting the findings (Lesch & Bremridge 2006). In this study, analysis was based on four focus group interview sessions, conducted among 10 male and 10 female adolescents. Participants' responses were tape-recorded, transcribed in the interviewees' language (Setswana) and translated into English. The researcher followed the transcripts of the taperecorded interviews in verbatim, analyse data, compare, order and organise it in a meaningful research format. The result of the pilot study are not included in the main study. The tape recorder was locked in a safe place after use to ensure confidentiality as stated in chapter 3 under ethical standards. The collected information was classified according to themes and sub-themes. Similarities and differences collected from the participants' responses were identified and linked with each other to provide detailed understanding or explanation of rural learners' involvement in risky sexual behaviours. The findings were based on focus groups' interviews. Discussions were made with reference to both national and international sources. The limitations of the study were outlined and

conclusions drawn and recommendations made on the basis of the analysed data.

3.10. TRUSTWORTHINESS

Marteleto et al. (2005) have recommended that trustworthiness be examined to ensure reliability of the research study. The following research approaches were used to ensure trustworthiness of this study.

3.10.1. Credibility

The purpose of credibility is to determine whether the data provides information that is true and factual (Golafshani, 2003). Mora (2005) argues that it can be difficult to establish credibility at times as all historical data is humanly constructed and contains personal bias and interpretation. In this study credibility was enhanced by asking an independent researcher to check the transcripts and the analysis. The idea was to ensure that participants' views are accurately captured. Participants were also allowed to read the transcript to verify whether what was transcribed was what they had said.

3.10.2. Transferability

Transferability refers to the degree to which the results of qualitative research can be generalised or transferred to other contexts or settings (Trochim, 2006). In this study, as recommended by Key (1997), transferability was enhanced by detailing the research methods, contexts and assumptions underlying the study. Although one cannot guarantee transferability in qualitative research, participants of this study were described sufficiently to enable another person to decide on a situation to which it could be transferred.

3.10.3. Dependability

Dependability emphasizes the need for the researcher to account for the everchanging context within which the research occurs (Trochim, 2006). Trochim has also indicated that is the responsibility of the researcher to describe the changes that occur in the setting and how these changes affect the researcher's approach of the study. Dependability in qualitative research can be enhanced by altering the research design as new findings emerge during data collection (Key, 1997). In this study, alterations in the research design will be made and all research procedures, changes incurred in the process of data collection and research paradigm will be explained.

3.10.4. Confirmability

Confirmability refers to the degree to which the results can be confirmed or corroborated by others (Trochim, 2006). The following strategies, as suggested by Key (1997), were used to enhance confirmability. Firstly, confirmability was enhanced by keeping raw data and personal notes, and secondly by documenting the procedures for checking and rechecking the data. After the study, the researcher conducted a data audit to examine the collection and analysis procedures, and made judgments about the potential for biasness or distortion (Trochim, 2006). Bias was avoided by asking participants to read the transcript and the analysis to help the researcher identify biasness. Discussions were based on the information collected. The raw information was tape-recorded, listens to and notes made.

3.11. SUMMARY

This chapter described the research methods used to collect information pertaining to risky sexual behaviours. A case study research design was used to obtain in-depth information about the issue focusing on one phenomenon. The research takes a qualitative approach. Data was collected through in-depth

interviews, with the results recorded and analysed. Purposive sampling was used to select the participants. Data was collected through focus group interviews among 15-17 years 10 male and 10 female adolescents. The methods used for sampling research participants were outlined. Procedures taken to ensure trustworthiness of the study were also explained.

CHAPTER FOUR

RESEARCH FINDINGS

4.1. INTRODUCTION

Participants of this study identified four forms of sexual behaviours as risky and prevalent amongst middle school teenagers in their area. They defined the behaviours as risky in the sense that they could lead to teenage pregnancy and ultimately school dropout, gynaecological complications later in life, contraction of sexually transmitted diseases and HIV/AIDS. Particular behaviour, such as having relationship with older people, could destroy families and ruin friendships. The risky sexual behaviours outlined are: (a) involvement with older partners (sugar daddies and mummies); (b) multiple partners; (c) unstable relationships and (d) pornography.

4.2. VIEWS ABOUT RISKY SEXUAL BEHAVIOURS AMONG ADOLESCENTS

From the information collected through focus group interviews, sugar daddies, multiple partners, cohabitation and unprotected sex, were seen as the most behaviours adolescents engaged in their life-time. All adolescents between 15 and 17 years shared the view that adolescents in general evidently engage in such sexual behaviours. It was interesting to note that even though the participants were involved in risky sexual behaviours, they were aware of the dangers.

4.2.1. Sexual relationships with older men (Sugar daddies/mummies)

All twenty youths shared a sentiment that a tendency for engaging in sexual relationships with older people was common in youth of all genders. It was indicated that females fell for men in the categories of teachers, taxi drivers, and men who work in the mines. It was also revealed that some of them went to

the extent of having relationships with their own stepfathers, their friends' fathers and neighbours. The following excerpts were attested to such a tendency:

Bona (15 years old boy):

These girls go out with our fathers. Hey, you know I am talking about men who are hand with those old *doppies* (street name for old men), sometimes kissing them ... *eish ke mathata fela* (just problems).

Magala (17 years old):

They are not ashamed of anything. They have relationships with the fathers of their own friends.

Rama (16 years):

They love taxi drivers too much and they even fight over them.

Mmathapelo (16 years):

They get involved with taxi drivers, contractors and even their stepfathers. Some get involved with teachers.

Bona (15 years):

They live with old men who work in the mines. It is pathetic that those men have left their own wives at home and now they are staying with these little girls, whom they call mabhobhodlwane. The old men say they are fresh and exciting.

It was interesting to note that some girls (5) attested to these and indicated that they found a way of inviting men to fall to them by using tricks such as: (a) throwing themselves to older men in the shebeens, walking alone in the main roads, and/or dressing inappropriately and stopping the cars in the road.

According to Tshoki (15 years):

Adolescents encourage the situation by going to taverns without money for beers and when they get there they throw themselves to sugar daddies who buy them beers in exchange for sex.

She further mentioned:

We girls do not dress properly; you will find some of us wearing G-string with a transparent short or a stoffy (tight pants) or even a low waist pair of jeans only. Some walk around without a panty. So as we walk, men can see the buttocks moving up and down so all these send out a message that we are looking for them.

Rori (16 years):

When we see a nice car passing by we just scream woooo... obviously the car will stop and the driver will call me and people will envy me that I am going out with a man who drives a slathla (nice car).

Kele (15 years):

I just walk on the tarred road in dirty clothes and when the car approaches I will pretend as if I am playing games with little stones. Then they will call me.

An exploration of female learners' reasons for their preference of older men over males of their ages reveals perceptions that their faces are familiar, still young to satisfy them sexually. Magala (17 years) expressed it clearly as he stated that:

Other girls say we are wasting their time because they see us every day at school. So they are enough of our faces and that it is better if they go for older men.

In the same vein, Kgosi (16 years) noted that:

The girls at this school say we are small boys, we are kids and we know nothing about sex. They say we just tickle them and we are doing nothing on bed.

Mmathapelo (16 years) agreed that:

Yes, sometimes you do not even feel that you are with someone because they do not satisfy us like those ou doppies nor spoil us like they do.

Interestingly, four male learners alluded to the tendency for developing sexual relationships with older women because of the accompanying benefits. It was eluded that such relationships boosted their egos, making them feel like 'real Ben 10', a street term commonly associated with young and energetic men. It was also mentioned that some had relationships with their stepmothers.

Keso (17 years):

It is very common in situations when your mum has passed away and your dad decided to marry a younger wife. We just decide to have the relationship behind the old man's back because these ou doppies (men) decides to marry very young women of 40 years who have slender figures, so we also get attracted to them as well.

Also, Magala (17 years):

What can you do if the stepmother is youngereh... like almost your age? We fall for them because they also fall for us.

Dille (16):

Boys like older women because they give them money and their cars to drive around. They run after them and tell them that age is not a problem.

Since such relationships come with benefits it can be difficult for a young man to end them. As highlighted by Matome (17 years), one becomes "hooked to it". Sello, also 17 years old, added that "one becomes addicted" to such a relationship.

It was very interesting to note that both girls and boys know very well that such kind of relationship would not last. They knew that the sugar daddies were using them. These were reasons given for becoming involved with older men:

Kele (15 years):

Older people give us money as compared to male of our ages. We also look at the cars these men are driving because they can take us anywhere we want. So these school boys cannot match older men because they have no money.

To Mafa (16), older men had money to buy them expensive shoes and items such as cell phones and airtime. In the same note, Boi (16) indicated girls' tendency for having relationships with taxi drivers:

They like to be seen sitting in the front seat of the taxis without paying any cent, taken to and from school and given "carry" [pocket money] to buy food during break time but not seeing that their studies are disturbed in the process and that in turn they are just being used for sex.

To Martha (16 years), some girls went for older men because they gave them money to support their families. Maria (17 years) said some had relationships with their teachers:

They get extra marks. For example, if they fail a subject, the teacher will add extra marks and passes her. They even give them money to buy clothes, sanitary towels and many other things.

4.2.2. Multiple partners

Twelve participants (8 boys and 4 females) indicated that getting involved with more than one partner was very common amongst them. To Keso (16 years), having more than one partner is a common practice in the area, especially among female adolescents. Moleki (15 years female) said she had two boyfriends, of whom one was her age and the other was a taxi driver, noting that the practice was fashionable. She added that a boy of her age would accompany her during school trips whereas an older one was for financial support. Kgosi (16) said each one has a role to play:

There must be one for buying me airtime, another one for buying me grocery, one for buying me clothes and transport fare to school and the other one for buying me beers at the tavern. Things work like that here at Mzantsi....

Mmathapelo (16 years):

These men ... do not give money in the same way. Others are money poppers and others are just so stingy. So ... sticking to one stingy somebody will be a waste of time.

To boys having multiple partners was thought to be "manly". As noted by Magala (17 years), a car cannot move without a spare wheel and, according to Moshe (16 years), a man cannot walk with one foot, he needs two feet. Rama (17 years) claimed that most of them cannot help it because our blood is hot and boiling all the time, so when we see girls we think of "it". When participants were asked to explain the motivation behind this behaviour they reasoned: (a)

lack of trust of the other partner; (b) peer pressure; (c) financial gains; and (d) family situation.

Tshoki (15 years):

If one leaves or dumps you, there must be another one available, just like a spare wheel.

Lorna (15 years):

Sometimes we do that to conform to the group - eh ... just to fit in the group because if you do not do what they do, they will think that you are a fool, ignoring you, labelled as "stiff". So no one wants to be seen as stupid and me either.

Moeketsi (16 years):

Sometimes ..., the situation becomes out of hand; for example if both of your parents are not working, you have no option but "go zola-zola". This leaves you with no choice but to have as many as you can.

Pinkie (16 years):

You know ..., to be an orphan is painful because there is no one who can look after you like your real parents and seeing you sibling suffering is another issue. I know that is wrong and is not we like what we are doing but going to sleep on an empty stomach can make you think twice and seeing your sibling struggling can make things even worse.

4.2.3. Unstable relationships

A tendency of changing partners within a short time was considered a problem amongst 16 participants. Magala (17) believed sex was not a big deal and faithfulness does not exist anywhere. Most young men noted that the problem was common amongst girls, whereas the girls themselves indicated that boys engaged in unstable relationships more often. Mmathapelo (16) said the problem of boys is that they double two or more of you and pretending to love you all and that is not fair.

Moshe (16 years):

..., if someone fancies you while knowing that you are in a relationship, what should you do? *Re shapa lepanta rona* [we do it in a belt]. We cannot have steady relationship; and it seems that these girls like it too.

Magala (17):

The rule that we should stick to one partner is irrelevant to us boys because we are highly active and these girls ah... you know they come to us. So leaving them will be stupid. If she comes ... I gave her what she wants; mogatla wa tshwene [baboon's tail].

To girls, having unstable relationships or changing partners within a short time was due to young cheating on them. This was clearly articulated by Mmathapelo (16):

Girls do not want to move from relationship to the next. But they are forced by the situation. For example, you will find that a girl is disappointed by a boyfriend who she trusts and loved badly. So if she found him with another girl, she will also find herself someone to love.

She further highlighted that:

Some boys just like going around with all girls ... not that they love them, madam. They just want to use us and tell their friends that they have many conquests or that girls love them. These boys are jokes.

Bonang (15 years) supported the view:

Some girls are not good, they just like to have sex with all the boys in the village so they can start boasting about it to other girls and or ridiculing us ... saying we have small things or we cannot perform well in bed.

4.2.4. Indulgence in pornography

A total of 14 participants indicated that they watched pornography more than they read their books, and such a tendency was risky in the sense that it made them imitate what they had watched. It was interesting to note that male adolescents knew very well that these behaviours put them at sexual risk. They aluded to the following as the risks associated with such behaviours.

Rama (16 years):

Watching pornographic CDs can make you have sex with anybody without thinking because it will make you do what you are watching. You do not even have time for thinking about condoms; you just want to do it.

Bethuel (17 years):

You can even force yourself on to your cousin or your younger sister because the sexual arousal becomes so uncontrollable. One can end up having sex with her ah... own sister saying I am going to do it nicely and what is that...? Rape.

Magala (17 years):

Seeing people having sex or seeing the movement in bed, make us sexually aroused, especially we boys. Then we just wanna do it (laughs).

Bona (15 years):

A girl who watched pornography can be tempted to take herself a naked photo or throw herself onto other men for sex. She can even end up addicted to the behaviour just for money.

Participants highlighted easy accessibility of pornography, such as pictures and films at a cheap price of R10 per DVD. They also indicated that they could watch it in on the cell phones and computers. On commenting about the accessibility of pornographic pictures, Sipho (16 years) noted that:

In our area pornographic pictures or CDs are easy to get in the streets. The CDs are sold by foreigners for ten Rand each. So we buy them to learn about good styles of doing "it". Who want to be left behind? We buy them and watch. Sometimes if one of us buys it, we will all download it on the empty CDs and sell them to our friends.

Bona (15 years):

And ..., these foreigners who sell pornographic pictures and CDs to youths should be arrested and deposited to their countries because eh... it is not like eh...they are destroying only youth but the country as a whole.

When probed further about the motivating factors behind their indulgence in pornography, two participants, Lorna (15 years) and Moeketsi (16 years), indicated the seriousness of the behaviour amongst males:

Lorna (15 years):

Some boys ..., are coward; they proposes us for love but not knowing--- (smiles) how to start when initiating sex, so they think through watching pornography they will learn how to do it.

Moeketsi (16):

Boys like competitions. They like to compete over girls - like how they satisfied them on bed. The DVD teaches them styles to do it, so that they can start bragging to other boys.

Male adolescents declared that their involvement in pornographic behaviours lay in young males' tendencies to talk about sexual relationships with their partners, and this reached their unconscious mind. They also said that such discussions encouraged those who were not sexually active to start practising it. Two males and one female attested thus:

Kgosi (16 years):

..., you know what; we, boys when we are in groups we usually talk about our 'cherries', so I will be telling my friends that Oh! Guys ... it was so pleasurable with a new style and if there is someone in the group who did not experienced it, it will be like 'Oosh ... I am going to try it'.

Tshoki (15 years):

The problem is that ...; boys hate to be labelled as 'gashus' (someone who fears girls). So you make sure that you do it so as to make your mark too in the group.

Magala (17 years):

Learners, who are involved with pornography, encounter behavioural problems at school and are always at logger heads with educators and with other learners.

4.2.5. Exchanging sex for gifts /Prostitution

There was a general view that going to taverns (shebeens) promoted teenagers' involvement in risky sexual behaviour. Although it was regarded as the youth's only means of "viping", meaning entertainment in the area, participants were

able to point out that it put them at risk of being raped by older men who bought them drinks in exchange of sex or drugged them into having sexual intercourse with them. This was clearly articulated by 16 year old Mmathapelo:

Going to taverns is risky because if someone does something for you, he is also expecting something in return, there is nothing for *mahala* [free] these days and he can have sex with you anywhere - in the toilets, behind the toilet or the tavern.

She further clarified that:

Some of these old men pour brake fluid in our glasses to drug us and then have sex with us out there in the grass and when you come into your senses you will find yourself wet but not knowing with whom did you had sex with. Sometimes they leave them lying on the field.

Kele (17 years):

Eh ..., in life there is no fairness, sometimes my boyfriend's friend will be fancying me but not knowing where to start or get me but when seeing me at the tavern it is like oh! Gosh - 'modimo ga a fe ka letsogo' [God does not give by hand] and because of the status you are in, you...eh ...end up falling for him and tomorrow when you are sober you regret everything.

Participants acknowledged that it was sometimes difficult to deal with the tavern problem since the community itself contributed greatly to it by allowing their children to go to taverns at an early age and by engaging in sexual activities with them. They indicated that most adolescents grow fast, and a 16 year old adolescent would look like an 18 year old adolescent, thus attracting men. When asked what the community/youth should do to make tavern owners adhere to age restrictions, two male adolescents responded:

Bona (15 years):

I blame the community for the youth's behaviour because what adolescents are doing, they have seen it from their elders. So, it becomes difficult for parents to reprimand us because we are modelling them with what we are doing, but ... I think police must play their role of making sure that youth don't enter taverns. Maybe... that will help.

Mmathapelo (16 years):

Adolescents also grow fast they look as if they are eighteen at age sixteen, so I think it will be better if age restriction of going to the taverns was twenty five years and above because by then, the face will indicate that you are old.

Another male adolescent, Dile (16 years) argued:

And that twenty five years is still a problem because you can be tall and fat, and that will make you look old whereas you are not, so I think identity documents should be checked at taverns gate and securities be hired.

4.3. FACTORS PROMOTING RISKY SEXUAL BEHAVIOURS

In addition to contributory factors discussed alongside various forms of risky sexual behaviours in the previous section, I deemed it appropriate to provide a detailed discussion in this section. The following contributing factors are discussed.

4.3.1. Limited sexuality education

A total of 19 adolescents said that the Life Orientation learning area, which is supposed to equip them with life skills, did not offer enough information to sensitise them about risky sexual behaviour. They believed that the subject should help them stay informed.

Magala (17 years):

Life Orientation (LO) does not guide us from the beginning to the finish line about eh sex issues. It summarises them. LO syllabus must come up with complete things like -'the time you have sex with someone, this and this is going to happen', even in the textbooks authors have also summarises sexual issues.

Kgosi (16 years):

In LO some of the educators are afraid to talk straight about sex. They forget that some of us know nothing about our rights, so I will not know

what to do in the case when I get raped if I do not have enough information about sex related matters.

Rori (15 years):

Eh --- I think that LO should not be treated as another subject that prepares learners to pass to another grade but um--- as a special subject that moulds and shapes learners behaviour as far as sexuality is concerned.

4.3.2. Parents not teaching about sex education

Parents were also blamed for not talking about sex issues with their children. Those who did attempt it tended not to talk directly about it, whilst a limited number who did were said to have had little impact since some of adolescents did not take heed of their parents' advice. The following views were expressed by two females and a male adolescent:

Rama (16 years):

Most parents do not talk about sex issues with their children. They forget that TV is there, we see people kissing each other or having sex on it and at school we are also taught about sex.

Tshoki (15 years):

Sex education is not there in our homes but when girls are pregnant, parents support them throughout... even these girls know that, but some other parents do try to talk about sex-related issues but they spoil that by giving support to pregnant learners because this makes girls not to consider their parents when they are advising them, knowing very well that they are going to give them support when they are pregnant.

Kele (15 years):

The problem is that...in most cases parents are not firm in their decisions and we know that, so we do whatever we do to please ourselves because there are no advices and reprimanding is not there in our families.

4.3.3. Lack of good role models

Two girls and one boy shared the view that some parents were bad role models for their children. Participants raised a concern that some parents slept with their boyfriends and children in the same bedroom. They believed that such a "mistake" not only destroyed the parent-child relationship but also encouraged engagement in risky sexual behaviour by the children. This was clearly captured in Kele's words:

Sometimes you find that other parents are jollying in front of their children, sometimes you will find a married woman having an affair with a married man of other family, and have sex in the same bedroom in the presence of children, what does that teaches us? If old people do that in our presence because when she starts to reprimand me I will say: 'Mom, I have seen that from you'.

Rama (16 years):

Eh..., I am speaking from experience some parents are misleading us. I have met mothers and fathers who I knew that are married hugging someone else other than his or her spouse at night..., people I respected.

4.3.4. Poverty

Twelve participants (7 boys and 5 girls) believed that adolescents were influenced by the family socio-economic background to engage in risky sexual behaviours. The motivation was unemployment, when the father and the mother would not be working. Two adolescents, a boy and girl, responded as follows.

Magala (17 years):

Sometimes there is no one who is working in the family...so you will meet a man *telling you that I am going to give you so much per month if you eh ... have sex with me* and you agree to have sex with him, looking at the fact that you are also going to be like other children and have some money.

Rama (16 years):

The problem is that some adolescents are from poor families, so an adolescent will be telling herself that if I get involved with a taxi man, he

will give me R500 every month to help with at home and sometimes some will not be looking at the effects, she will be saying, "ok I get money and I can use it to assist in the situation at home, that is what matters".

4.3.5. Fear to disclose problems with teachers

Participants indicated that most adolescents did not consult their teachers with problems because of fear or lack of trust, instead turning to their taxi drivers' boyfriends who were married. There follow the views of two female and one male adolescent about those who would not consult their teachers about their personal problems:

Boi (15 years):

..., you know what, other girls say they are afraid to tell educators and social workers about their problems and they turn to taxi men and that is not 'sharp'; 'imagine that you are married and your husband is a taxi men and she is involved with a scholar and you found about it, how are you going to feel...?

Kele (15 years):

I will be going to a taxi man because I am close to him and he knows my problems, so ... I will be afraid to tell the teacher, thinking that she will talk about me in the staffroom.

Bona (15 years):

We are afraid to tell educators ..., thinking that after telling her, if she is in the class she will be looking at me imagining what I have told her or sometimes you will be afraid to tell her with the fear that she is going to shout at you.

4.3.6. Ostentatious lifestyles

Adolescents believed that wanting to leave an ostentatious lifestyle also contributed greatly to risky sexual behaviours. Adolescents living in this style engage in competitive behaviours, such as wearing fancy or fashionable clothes and carrying a large amount of money. They started going to taverns to exchange sex for money. When asked what encouraged an adolescent to go after

money and not accept their family situation as it was, three male adolescents responded:

Kgosi (16 years):

The things that make girls to be after money are the fact that they like competition, so they engage in risky sexual behaviours to get money, money ... , money is Satan, it has killed Jesus Christ -they don't care about the risks as long as they get money.

Keso (17 years):

Sometimes ..., it is not like they want to - it is like there is no money at their homes and they want to complete their studies and since there is no one working in the family, so that is why they are looking for boyfriends who can assist them with money.

Mafa (16 years):

Problem is that we, girls go with fashion and we like competition forgetting that due to our family situations, we cannot afford that and as a result we go to taverns with the purpose of 'go tswara baki'. Youth ..., they no longer check with whom they get involved with as long as they get money.

4.3.7. Peer pressure

Participants (20) agreed collectively that they engaged in risky sexual behaviours due to peer pressure. Seemingly, fear of rejection by the group was indicated as the main source for conforming to the group. It was also interesting to note that even though they were conforming they were also aware of the pros and cons of peer group influence. Three male and two female adolescents said:

Kiosk (16 years):

We, boys we are mostly influenced by our friends, if a friend drinks and he has money, he will come to your place to collect you - to go to the tavern where he will buy beers for you and tell you to rape.

Rama (16 years):

For girls ..., a friend will be having a lot of money, 'bragging' in the tavern - saying yesterday I was with so and so, he gave me so much, so as a girl it is like: 'wow, jollying e ya dlisa', and start following suit.

Mafa (16 years):

Others they are afraid that their friends will reject them saying that they are boring them if they are not doing like them, so what...? I end up joining.

Lorna (15 years):

Even if our parents could talk to us about sex issues, we are pressurised by our friends who told us that if you have not have sex yet, you are nothing and that you supposed to break your virginity if you are a girl.

Mmathapelo (16 years):

My friends told me that if I fall into the trap because the saying that if I break my virginity later, it will be painful when I started doing at the age of 18 and above, so ... I did it and I felt like I was cheated after finding out that there is no such.

4.3.8. Myths about sex

Three participants mentioned that there were many myths about sex, claiming that some people engaged in sexuality activities without using protection because they believed that sex with a condom was unpleasant. They also indicated that some older men wanted to have sex with them because they believed that their HIV would be cured.

Kgosi (16 years):

Most of us adolescents we have sex without using a condom because we say that we don't derive pleasure when we use a condom, we prefer it flesh to flesh.

Ona (16 years):

Adolescents say when they use condom they don't reach climax, so that is why we, adolescents don't prefer to use a condom.

Tshoki (15 years):

There is also a saying ..., that when an infected old person has sex with me, his HIV will be cured; so that is why these old people want to have sex with us, to cure their HIV/AIDS while they are putting our lives at risk.

4.4. STRATEGIES FOR PREVENTING RISKY SEXUAL BEHAVIOURS AMONG ADOLESCENTS

All 20 participants indicated that risky sexual behaviours were a threat to their lives and futures. They believed that all the concerned groups, for example, schools and NGOs, should take initiatives to prevent such risks to adolescents. Strategies to prevent risky sexual behaviours were outlined as follow:

4.4.1. Appropriate school programmes

Adolescents pointed out that there should be programmes in schools dealing specifically with risky sexual behaviours. The two female adolescents attested as follows with regard to prevention programmes at schools: Mmathapelo (16 years) suggested: *Risky sexual behaviours can be prevented by putting into place programmes that can educate youth about these risks*, whilst Tshoki (15 years) added that programmes such as *LoveLife*, *FAMSA*, and *Arise and Shine* should be allowed to render their services in schools, starting from primary to secondary school in teaching children about sexuality issues, and this should be compulsory for all schools. The matter was supported by Magala (17 years), who highlighted that *Love Life*'s strategy of three "B's" ("boys bring babies" - so steer clear) could be an effective strategy for preventing risky behaviours among adolescents.

4.4.2. Effective communication with parents

All 20 participants agreed that parents did not communicate with them about sex issues, believing that parent-child communication on risky sexual behaviours could reduce the risk of teenage pregnancies and STIs. Four adolescents regarded effective communication between parents and children as an effective strategy in dealing with risky sexual behaviours. Tshoki (15 years) noted that few parents talked about sexual issues with them and if they did the likelihood of broaching the subject of the risks of STIs and teenage pregnancy would be low.

Bona (15 years):

Community-based programmes or workshops should also be arranged to empower parents about skills of communicating with their children, especial with regard to sex issues.

Rori (15 years)

If parents do not communicate sex-related matters with their children will hear about them from their peers.

Children, whose parents are effectively communicating sex related matters with, are less likely to engage in risky sexual activities.

4.4.3. Good learner-teacher relationship

Participants believed that a mutual relationship between teacher and learner is vital in dealing with risky sexual behaviours among teenagers. They also believed that educators should be open and approachable so that they could be relied upon if they had problems. As highlighted by Kele (15 years), teachers should not be "like roaring lions" as this would discourage learners from communicating their problems freely to them. Keso (17 years) believed that

teachers should be open and approachable so that learners could rely on them whenever they had problems, including ones associated with sexuality.

If there is a mutual relationship between teachers and children, adolescents will not turn to boyfriends for help and so ultimately suffer from sexual exploitation.

4.4.4. Strengthening of Life Orientation

Adolescents agreed collectively that the learning area of LifeOrientation (LO) should be strengthened by adding sexuality content in the subjects. They believed that information pertaining to sex was limited and lacked clarity in some topics. They also believed that LO could be strengthened by training relevant teachers in the subjects who would then be free to talk about sex issues to adolescents:

Bona (15 years):

..., the problem is that Life Orientation summarises, the information about sex is not up to scratch and other teachers also don't get into facts about sex and this place us in great risks. So, I am saying let there be programmes which will help in strengthening Life Orientation also in schools.

Magala (17 year old):

I think... um... education about sex in schools, especially in Life Orientation, must be detailed, because we need to be taught everything about sex.

Ona (16 year):

Workshops should also be organised eh---to educate or empower educators on sexual related issues and give them books or hand outs which will assist them on teaching the subjects.

4.4.5. Discipline at home

Participants agreed that lack of discipline in their respective households contributed to risky sexual behaviours. They believed that discipline should be

maintained by laying down clear family rules which would be followed by all family members, and those parents should not hesitate in reprimanding their children:

Tshoki (15 years):

You know what ...; some parents do not reprimand their children if they have done something wrong. In some households everyone do as she pleases, you can sleep where you want one day, weeks--- nobody is going to say nothing to you. So ..., parents must talk to us; reprimand us so that we don't go astray.

Mmathapelo (16 year girl):

I think parents also, need to be work-shopped about disciplinary measures in their respective households. Some parents are unable to discipline their own children and there is a saying that "charity begins at home".

4.4.6. Having good friends

Two adolescents indicated that the type of friends with whom they engaged could also affect their decision-making with regard to sex and personal choices. They thought that choosing good friends and affirmation were measures of preventing risky sexual behaviours among adolescents:

Rori (15 years)

..., prevention is better than cure, if I don't want trouble and I want to safe myself, I need to stay away from bad friends and stick to what I believe in.

Keso (17 years)

Ma...m, girls must stay firm if they don't want something, because it is not like... eh... they are forced to do something against their will. If they don't want to do something they must say "no" and their "no" must be "no".

4.4.7. Closing down illegal taverns

Three adolescents, two males and one female, indicated that police should play their prominent role in closing down all illegal operational taverns. They also believed that police should play a vital role in controlling the use of drugs among youth by patrolling illegal taverns and ensuring that they had relevant documentation. They also pointed out that older people who were sexually involved with younger children should be arrested:

Kgosi (15 years):

Police must play their role and do what they are hired for. They must control the use of drugs in the area, because they are the source of risky sexual behaviours. Those who are smoking drugs including dagga in public must be put into books.

Keso (17 years):

Illegal taverns should be closed ..., they destroy adolescents' future and police should also make sure that the legal ones operate according to rules of liquor, if not they should also be closed.

Lorna (15 years):

..., in the illegal taverns there is no order; they sell beer to anyone irrespective of what age he/she is. I am also supporting the notion that they should be closed.

4.4.8. Illegalising sex with young boys or girls

Participants (15) noted that older people who initiated or entered into sexual activities with young boys or girls should be incarcerated. They regarded such behaviours as illegal and inhuman since young people would not be sufficiently mature to argue with an old person. One female and one male spoke on the topic as follows:

Mmathapelo (16 years):

I... eh..., I think that old men/women who have sex with little girls/boys should be put into jail because that ... it is like rape and at that age, I will not be mature enough to stand against his or her pressure.

4.4.9. Restricting access to Internet and pornographic pictures

Another two males regarded media, especially the Internet and TV as the greatest influences on sexual behaviours among young people. They viewed the rules of accessing the Internet as not sufficiently restrictive to forbid adolescents to access pornographic pictures. They also regarded some TV programmes, such as drama and soap operas that showed sexual activities and romances as driving forces behind risky sexual behaviours, hence proposing the following strategies:

Keso (17 years):

..., eish ... Internet, Internet it is also a big problem in dealing with risky sexual behaviours. I think there should be strict rules which will prevent us youth, eh... from getting access to Internet or there must be a law which should strictly prohibit the posting of pornographic pictures to the Internet.

Rama (16 years):

Parents also eh... um... should try to monitor programs that their children should watch on TV.

Lorna (15 years) closes the debate by saying:

I think that people who have studied sex or with more information about risky sexual behaviours among adolescents, should be invited in schools eh... to come eh... at least once a week to teach us everything about sex. Maybe that eh... can help us to quit or refrain from such behaviours.

4.5. CONCLUSSION

It is evident from the study that adolescents engage in sexual activities with older men or women, such as teachers, taxi drivers and mine workers, for money. For girls, improper dress code, such as transparent tights and miniskirts, have been regarded as major causes of such behaviours. Boys engage in multiple partnerships because they believe a sexual partner should have a backup ("spare wheel"); while girls believed that having multiple partners assisted them with

pocket money for school, airtime and buying beers in the tavern. They engaged in such behaviours owing to untrustworthiness and cheating in the relationship. Some of these behaviours were influenced by indulgence in pornography, since they wished to practice sexual styles learnt from watching pornographic CDs.

Risky sexual behaviours were promoted by limited sex education in schools, especially in the learning area of Life Orientation (LO), which was supposed to provide more education on sexual issues. Strengthening LO with more sex topics should have a significant impact on adolescents' sexual behaviours.

Parents' inability to provide sexuality education to their children, poverty due to unemployment, flashy life style and peer pressure were also regarded as major contributory factors behind risky sexual behaviours.

Appropriate programmes such as *FAMSA*, *Love Life* and *Arise and Shine* should be put into place in schools to promote healthy lifestyles among adolescents. Parents must be encouraged or equipped with necessary skills on how to talk about sexual matters with their children. There must be a good relationship between the teachers and learners so that the latter can approach them with problems instead of resorting to sexual partners of their parents' age. All illegal taverns in the area must be closed down and operators put into prison. Adolescents' access to Internet pornography must be restricted and parents should monitor programmes children watch on TV.

CHAPTER FIVE

DISCUSSIONS OF THE FINDINGS

5.1. INTRODUCTION

The findings of this study were drawn from focus interviews with 10 male and 10 female adolescents between 15 and 17 years of age at one school located in a rural area close to the mining area of Rustenburg. The study posed the following three research questions:

- a. Which forms of risky sexual behaviours do adolescents engage in?
- b. What are the factors that contribute to youths' engagement in risky sexual behaviours?
- c. Which strategies can be used to prevent risky sexual behaviours among adolescents?

The findings were synthesised, analysed and interpreted under the following three broad headings: (a) forms of risky sexual behaviours; (b) factors contributing to risky sexual behaviours; and (c) strategies for preventing risky sexual behaviours.

The following risky sexual behaviours were revealed, namely: (a) relationship with older people, (b) having multiple partners, (c) unstable relationships, (d) pornography, and (e) going to taverns.

The study also revealed that both male and female adolescents were involved with older people, with females preferring teachers, taxi drivers and mine workers, because they provided them with money to feed their families and maintain a trendy lifestyle. Financial gains were important for boys who engaged in sexual relationship with older women, including their younger step-mothers. However, boosting their ego appeared to take precedence.

Morojele, Brook and Kachienga's (2006) study in KwaZulu-Natal noted that the age gap between an adolescent and older man hinders the chance of negotiating

condom use, a problem which heightens the risk to HIV infection. The financial benefits associated with a relationship renders girls powerless to negotiate when or when not to have sex, and leads them to engage in unwanted sexual activities for fear of rejection by their partners, and to please them all the time (Morojele, Brook & Kachienga, 2006).

The tendency for engaging in sexual relationships with more than one partner was mentioned as another risky sexual behaviour common amongst adolescents. Similar to sexual relationships with older partners, those with more than one partner expose an individual to sexually transmitted diseases. Such individuals can also fall victims of unplanned pregnancy. Within the South Africa context, such relations are very common. For example, a study conducted in the Western Cape by Phillips and Malcolm (2006) revealed that the majority of school-going adolescents had one or two partners in their life time and so was another study conducted in the Western Cape by Thomas (2009). Once more, financial gains were cited by participants as a motivating factor. Most importantly, they alluded to lacking trust in their partners, suggesting that one partner would be there for them when the other one left them. However, to male students, the behaviour was motivated by a need to boast their ego. For Di-Meglio (2003), men want to be superheroes and want their girlfriends to see them in that light when they satisfy them sexually. This suggests that males define themselves in terms of the number of girlfriends they have. This behaviour is risky to adolescents because it can contract HIV/AIDS while girls may fall pregnant, and being pregnant while at school may also have negative implications for female adolescents' academic performance.

Pornography has become readily accessible in most rural areas, and as revealed in this study CDs are purchasable for only R10 on the street corners of Rustenburg. As noted by Maluleke's (2007) study in Limpopo, TV programmes which expose the body and sexual activities tend to be destructive to a young developing adolescent's mind. They may even exert a great influence on adolescents' sexual experiences. This study is different from the one conducted in Limpopo by Free Essays (2006), which indicated that some of the TV programmes can be used to promote young people's healthy sexual behaviour,

depending on the type of standards and norms of that particular programme. Indulgence in pornography could induce irresistible sexual feelings that encourage carrying out rape amongst the weaker individuals, and other forms of sexual violence such as touching one's private parts and kissing someone without consent.

For adolescents, the following factors surfaced as risky sexual behaviours: (a) school-related factors; (b) family-related factors; (c) poverty; and (d) Peer pressure.

In the current study, participants regarded the school as a place in which to receive information about HIV/AIDS and sexually related issues. The study revealed that adolescents engage in risky sexual behaviours even though they had all the necessary information about the HIV/AIDS because they believed in proving or seeing things for themselves. The findings also indicated that the reason behind engagement in risky sexual behaviour was that Life Orientation (LO) did not do enough in dealing with sexually related issues. The content thereof is seen as being limited, and omitting most important facts about sexuality.

The study revealed that educators are unable to talk freely about sexual issues to learners and this creates a problem. The implication thereof is that adolescents will turn to their peers for clarity and sometimes false information which will expose them to more sexual risk. The study is in line with one conducted by Africa, Deventer & Barnard (2008) in Cape Town, which confirmed that traditional educators who are driven by old traditional norms and standards suppress adolescents' holistic growth. It is essential that the Department of Education (DoE) gradually develop educators' communication skills and ensure that appropriate sexuality education is provided in schools.

A study conducted in USA by Kottler and Kottler (2000) revealed that communication skills were extended to the children's home environment where there was insecurity, instability and lack of trust. Many endeavours aimed at alleviating the problem, had been made by the DoE, through workshops and seminars, to empower educators about sex-related factors, including drugs, HIV

and teenage pregnancy. However, as confirmed by Phillips and Malcolm (2006) in a study conducted in the Western Cape, these were all in vain. The study confirms the current findings on the part of workshops, but differs with regard to seminars; hence the study calls for extensive training programmes for educators as far as risky sexual behaviours are concerned. The study also correlates with the study conducted in Cape Town by Harrison (2008), which indicated that the South African government's national life skills programme, intended to provide sexuality education to school-going youth, generally failed in its objectives and could be revitalised. If educators are well-trained with all necessary sexual communication skills they will be able to transfer such skills to learners and thus reduce adolescents' chances of indulging in risky sexual behaviours.

In the study, parents' role and contributions towards the prevention of risky sexual behaviour was not recognised. The study revealed parents' negative poor parent-child relationships, words to teenagers, parents' relationships with young adults, and strictness as major contributory factor to risky sexual behaviours. The study is consistent with Maluleke's (2007) study conducted in Limpopo, which indicated that poor parent-child relationships, strictness and vigilance would have negative effects on young people, especially female adolescents. The study revealed that some parents possess limited knowledge about their sexuality role as parents to their children, and prefer to leave all the responsibility to educators. Such parents tend to be very strict and vigilant overyoung adults. They often push their children away to peers, who provide them with information, including indulging in sexual activities that in turn lead to unplanned pregnancies and HIV/AIDS. According to Bronfenbrenner (2006), children reared in such disrupted ecologies experience a host of emotional and behavioural problems.

The findings indicated that most parent have boyfriends with whom they sleep in the same environment as their children, and this makes it difficult for parents to communicate with their children, thus creating instability, insecurity and untrustworthiness. Fathers are regarded as cheats, who care little about their families and who go to taverns where they spend their money with young

adolescents. Sometimes they take out their rage on young adolescents by raping them in the taverns. The results of such behaviours were also noted in studies conducted in settings other than rural areas. For example, Small, (2012) conducted a study in an urban area around Philadelphia and concluded that girls from such destructive homes might be urged by their evolutionary voices to move into adulthood as soon as possible, by having a baby. In the same vein, another South African research study conducted by Brook et al. (2006) in Durban revealed similar findings. According to the authors, poor parent-child relationships may give rise to personality and behavioural attributes characterised by delinquent behaviour and depressed mood. Participants believed that there could be positive sexual practices in adolescence if there was a mutual parent-child relationship, which in turn would mean reduction in teenage pregnancies and HIV/AIDS contraction.

Similarly, the study confirms one conducted in Norway by Eaton, Flisher and Aaro (2003), which indicated further that poor communication within the family about both supervision and lack of supervision from parents might contribute to unsafe sexual behaviour. Marston, (2004) in a study conducted in Mexico, regarded inability of parents to talk about sex issues with their children as stereotyping, which creates further barriers to communication. Marston explained breaking down of communication strategies as twofold, for example as helping to increase or improve sexual health outcomes. Sex is a societal problem, therefore it is vital for children to learn about it from their households at their early ages. Another study that stressed the importance of sexual communication was conduct in a similar setting in KwaZulu-Natal, in which Varga (1997) found that, in traditional Zulu culture, education regarding sexual matters was undertaken separately for boys and girls by their elder peers. For girls, virginity testing was also used as a strategy to encourage young women to retain it. In this light, adolescents cannot indulge in sexual relationships at an early but rather choose to wait until the right time.

Poverty is seen as the main contributory factor to risky sexual behaviours in the study. The study revealed that most young people live in poverty due to a high rate of unemployment in the area. As a result, most female adolescents become

involved in sexual behaviours with older people in exchange of money, so as to see their families fed, and hence they do not insist on protection when engaging in sexual activities. The study confirms that of Steyn, Groenhof and Schaalma (2009) in South Africa, which posited that poverty can influence young people's actual behavioural control and, due to poverty, young women engage in situations in which they receive presents or car rides in exchange of sex. The study conducted by the Gilmer Mirror (2014) in Texas found that lengthy unemployment and poverty may increase sexual appetite and risk-taking in young people. Exchanging money for sex will impact negatively on an adolescent who is desperate for money to survive. Adolescents living under financially unstable environment are unlikely to insist on condom use and this could place them at risk of contracting HIV/AIDS.

In line with Pettifor et al's (2006) study which suggests that peer pressure is a major factor influencing youth sexual involvement, this study linked peer pressure with involvement in risky sexual behaviour. Girls bragged to their peers about the gifts they received from their older partners, whereas boys saw it as a proof of manhood. In a study conducted in Ghana, Foku (2011) noted that peers were pressurised to engage in risky sexual behaviour to gain status, attention from the opposite sex or a sense of belonging. Peer pressure is a most destructive tool, especially to adolescents with low self-concept. The findings in this study indicated that most adolescents acted to please their friends or to be part of the group through fear of rejection. The study further revealed that peer pressure has both negative and positive influences, able to advise or make sense to an adolescent's mind or destroy him/her only through verbal power. A South African study by Brook et al. (2006:268) found that peer influence has a greater influence on the behaviour of male adolescents than on females.

5.2. STRATEGIES FOR PREVENTING RISKY SEXUAL BEHAVIOUR AMONG ADOLESCENTS

Policies and programmes developed to address the problems and challenges facing the youth in South Africa include media campaigns, life skills programmes

and peer education. Love Life, FAMSA and Arise and Shine could be used as vital intervention strategies in preventing risky sexual behaviours among adolescents. The findings revealed that the effective implementation of these services could minimise the risk of HIV/AIDS and the rate of teenage pregnancy in adolescence. These findings were also noted in other studies conducted in Atlanta (USA) by Kirby (2008), where prevention programmes were implemented in schools to reduce sexual risk behaviours. The study is also in line with one conducted in Atlanta by Weinstock, Berman and Cates (2000), which found that prevention programmes reduced risky sexual behaviours and related health problems among youth, and help young people to adopt lifelong attitudes and behaviours that support their health and well-being, including behaviours that reduce their risk for HIV, other STDs and unintended pregnancy. The implementation of such programmes in schools could change and shape adolescents' sexual behaviours.

The study also suggested that parents should be trained with parent-child communication skills so as to equip them with appropriate knowledge with regard to sex-related matters. Effective parent-child communication can be used strategically to reduce individual risks and factors that lead to involvement in unhealthy sexual behaviours. The study correlates with that of Riesch, Anderson and Kruger (2006), study conducted in the USA, which revealed similar findings. On that note, the study is consistent with that of Gresham and O'Shaughnessy (2010), conducted in Philadelphia, where parent training programmes were developed to counteract the parent and family risk factors and help parents deal effectively with behaviour problems in their children so that they did not escalate. With regard to sexual involvement with older people, Marin et al. (2006) maintained that programmes and parents need to find creative ways to address the risks of having older boyfriends without making such activities appear more attractive than they already are. In the current study, no campaigns or programmes were found to have been launched to promote parent-child communication about sex, unlike in the study conducted in the USA by Davis, Blistein and Evans (2010), with the Parents Speak Up National Campaign (PSUNC) launched to reduce the prevalence of sexual intercourse and unwanted pregnancies among teens. Parents should be encouraged to address and deal with youths' sex-related issues from their homes.

This study regarded effective teacher-learner relationship as another strategy that can be used in preventing risk sexual behaviours among adolescents. The study confirms the one conducted by Rimm-Kaufman (2014) in Washington, which argued that if a student experiences frequent connection with a teacher and receives more guidance and praise than critics from that particular teacher, he or she will be unlikely to engage in risky sexual behaviours. In accordance with strengthening Life Orientation as a subject in schools, the study is in line with that of McKeon (2006), also conducted in Washington, which revealed the necessity for the curriculum to provide accurate information about abstinence and contraception, including condoms; to have clear goals for preventing HIV, other STIs and teenage pregnancy; to instil respect for community values; and to respond to community needs. This implied that adolesents that have more knowledge or information with regard to risky sexual behaviours and community needs and values will be unlikely to engage in risky sexual behaviours.

The study suggested that all taverns operating illegally should be closed down since they are not operating according to liquor licensing laws. The study agrees with the study conducted by Hart (2013) in Primrose, where five illegal taverns were closed, as were others in Polokwane, due to their no-compliance with the Liquor Act. Closing down of non-compliant taverns would reduce the rate of drug abuse among adolescents, which eventually leads to risky sexual behaviours such as sexual engagement with older people, multiple partners and prostitution. Alongside the issue of illegal taverns, strategies to reduce teens' access to the Internet and pornography were also suggested in the current study. These findings are different from those from other international studies conducted in a formal setting in Europe. For example, in a study conducted in Britain by Gross (2014), Prime Minister David Cameroon had already rolled out a plan that would block pornography on most computers, smart phones and tablets, and has also called Google and other search companies to hide pornography. The current study found the problem still requires public attention. Similarly, another study which is contrary to the current one, also conducted in the United Kingdom, reported on content-control software Bess, Net Nanny and others that had been designed to help parents monitor online activities (Winslow, 2014). In contrast, no organised programmes designed to address children's access to the Internet

or parental control add-ons were found in the current study in South Africa. Designing programmes such as these is crucial in monitoring youth access to pornography.

5.3. CONCLUSION

The study provides key elements regarding risk factors associated with risky sexual behaviours among adolescents. The findings revealed that having multiple partners, involvement with sugar daddies and pornography resulted in risks such as teenage pregnancy and contraction of HIV/AIDS. These risks are also increased by the myth centred on the use of condoms. The implication for adolescents' engagement in risky sexual behaviours includes poverty, association with deviant peers, drug abuse and poor parent-child relationship. Poverty forms the core for vulnerability in most adolescents. For girls, poverty was associated with promiscuous behaviours such as cohesive behaviours (behaviours where sex is exchanged for money or gifts) and prostitution. Programmes and other initiatives to deal with poverty in different households are fundamental, as they should equip parents with necessary skills to manage, monitor and develop positive relationships with their children. The findings, through Life Orientation and relevant NGOs, suggested that adolescents should be taught about sex issues and how to deal with pressure from their peers relating to sex engagement and taking drugs, including alcohol.

CHAPTER SIX

RECOMMENDATIONS, LIMITATIONS AND CONCLUSION

6.1. INTRODUCTION

The literature reviewed in Chapter 2 discussed some of the risky behaviours amongst adolescents in South Africa. I looked at the suggestions from an ecosystemic perspective, relevant to this study because it considers various levels with which an individual interacts. This study has revealed that adolescents in a rural area of Rustenburg, close to mines, engage in risky sexual behaviours such as involvement with older partners, multiple partners, unstable relationships, indulgence in pornography, going to taverns and prostitution. Factors which motivate such behaviours are lack of knowledge, poverty-stricken home background, peer pressure, drug use, ignorance, low perception of risk, and cultural influences.

Based on the findings of this study, I suggest that strategies for preventing risky sexual behaviours amongst adolescents are appropriate programmes, effective communication with parents, good learner-teacher relationships, strengthening Learning Orientation, discipline at home, good friends, closing down illegal taverns, illegalising sex with young boys and girls, and restricting access to the Internet and pornography. Teenagers should be equipped with peer pressure-resistant skills that will help them to stand up to pressure from peers. According to Arcy (2012), such skills will give teenagers the right to say no without having to give a reason and the right to walk away from a situation. Smalley (2012) also noted that teens can be helped to resist negative peer pressure by being taught how to be confident with their identity. Programmes should be designed to equip educators with communication skills to assist learners to deal with problems that could lead to risky sexual behaviours. Learners need to be taught affirmation skills so that they may be able to say 'no' if they do not want or do something, and their 'no' must mean 'no'. This refers specifically to sexual

initiation from older people, involvement with more than one sexual partner, unstable relationships and indulging in pornographic activities.

Religious education must be reinstated in schools to promote religious and moral values to children. Religious Education has worked previously in moulding children's behaviours; it can still work today. For example, previously learners in schools were taught how God will punish sin and there were religious versions from the bible included in the curriculum which learners were to memorise. In that light, reinstating Religious Education in the school curriculum will instil moral values and thus reduce adolescents' indulgence in risky sexual behaviours.

Life Skills and Life Orientation should be strengthened. Most importantly, there must be designed governmental programmes in schools, especially in LO, scheduled to deal with risky sexual behaviour among adolescents. Advanced topics on sexuality should be included in Life skills and Life Orientation, because learning about sex at an early age will eliminate the risks children may run as teenagers. Educators should also be provided with skills necessary for talking freely about sexuality.

Teenagers against Drug Abuse (TADA) groups must be implemented and made compulsory to all schools, in an endeavour to deal with drugs from the school level. With the assistance of Life Orientation lessons, the educators should devise programmes that could be used to make other learners aware of the dangers of drugs.

Parents need to be provided with necessary skills, and relevant stakeholders, governmental and non-governmental organisations should work together in designing well-organised programmes, specifically for parents so as to educate and equip them with skills on how to deal with sexual issues in their households, and how to impart the acquired information to their children. Such programmes must try to promote a mutual parent-child relationship and should be specifically based on issues of sex.

The importance of involving the people of the community is very important, as whatever consequences emerge from the adolescents' risky behaviour rebound

upon them. The African proverb, "it takes a village to raise a child" may be extended to "it takes a community to raise a school". As in the United Kingdom (Smalley, 2012), there is a hope that collaboration initiatives involving teachers, community health practices, health promotion, staff, youth and community workers will help deal with difficulties in young people's sexual health. Inclusive Education also welcomes and embraces positive collaborative relationships between school staff and parents in support or providing the best learning environment for a diverse population of children (Marin et al., 2006).

Non-governmental organisations (NGOs) such as FAMSA, Love Life and Arise and Shine should help the schools in preventing adolescents' from partaking in risky sexual behaviour. Currently, the organisations are making strides in helping society deal with HIV prevention and awareness issues, teenage pregnancy and drug use in schools. Love Life runs a 21-day national programme designed specifically for 12 to 17 year old adolescents. It aims at encouraging youth to maintain an HIV-free lifestyle and to achieve their aspirations through youth leadership and self-motivation. FAMSA (Family and Marriage Society of South Africa) is a strategic preventative programme designed to offer counselling to teenagers from unstable households, whilst Arise and Shine is a local programme aimed at raising substance abuse awareness campaigns at schools and to provide support for drug addicts. Their involvement will augment the information provided by the school, in some instances helping fill the gap created by teachers who avoid addressing sexuality-related matters in class.

The Department of Health could design programmes which deal specifically with HIV and teenage pregnancy, and work in collaboration with NGOs that share common goals. Each school would be allocated a nurse to make frequent visits to the schools and work hand in hand with LO educators. Awareness campaigns to sensitise teenagers to HIV and teenage pregnancy could be launched and implemented. In 1996, the National Policy on HIV/AIDS for learners and educators in public schools was launched in line with section 3(4) of National Education Policy Act no 27 Of 1996. The purpose was to prevent the spread of HIV infection, reduce stigma, develop knowledge, skills, and values; and maintain behaviour that would protect them from HIV infection and to support the

infected and the affected. For optimal control in the fight against HIV infection, the policy should be implemented and all universal precautionary measures adhered to. In accordance with the policy, learners should be educated about their rights concerning their own bodies, so as to protect themselves against rape, inappropriate sexual behaviours and contracting HIV. The use of condoms should be encouraged from 12 years of age. Sexually active adolescents should be provided with condoms and practically shown how to use them by well-trained educators.

Older people's engagement with teens should be discredited. The law of South Africa (Hart, 2013) stated that teenagers younger than 12 years are too young to consent to sex and that people who force them to engage in sexual acts with them are committing rape or sexual assault. Noting the trauma envisaged by the victim, the government must conduct workshops to educate people about the laws of the country in general. Old people who engage in sexual relationships with children should be caught and victims encouraged disclosing such incidents to educators or parents. Old people should be role models to young people, not molesters, so sexual involvement with children would be classified as rape. Adolescents will not be reasonable enough to resist sexual pressure from an adult at that stage.

The Film and Publication Act also prohibits child pornography, but access to pornography by young people should be more actively discouraged. According to Cornell (2000), there are two types of child pornography: 1) Real Child Pornography, which evokes a strong and universal sense of moral outrage; and 2) Virtual Child Pornography, which includes painting, cartoons, sketches and written descriptions of children involved in sexual conduct. Parents need to be trained on how to block pornographic access through the Internet from their computers and telephones, and they should also be discouraged from buying Internet-accessible smart phones for their children. Drastic measures, such as imprisonment or paying a fine must be imposed on those who engage in pornographic activities with children, or who sell pornographic CDs or pictures on the streets. The strategy has worked in other part of the world, for example, in Los Angeles a law was passed which required pornographers to pay a fee that

was subsequently used to finance periodic inspections of filming. Violations of such were subjected to civil fines and criminal charges (Miles, 2011). Parents should also monitor programmes their children watch on TV, so that those showing nakedness or sexual activities are not seen.

The government should dispense with child support grants, as social grants are viewed by communities as the main source to teenage pregnancy. I therefore, recommend youth financial assistance which will help them to stand on their feet and work for themselves.

6.2. LIMITATIONS

The study has several limitations that may have an impact on the data analysis. Firstly, it focuses on only one rural school, even though some of the participants were from different rural areas. Thus, the analysis does not represent the findings of the whole population of all the rural areas in Rustenburg. The participants were selected using purposive sampling and this may have some implications in the findings since the researcher has selected the participants herself. Some of the important information may have been left out, which could have brought strength to the findings, even though some of the participants were from rural areas other than the current one. One reason for the limitations might have been the distance between these areas. Research interviews were conducted after the last period, which was about 30 minutes to school out, and this could also have impacted negatively on the findings. Most of the participants were travelling by *scorf* (taxi) and thus some had to leave during the course of the interview.

The solutions to risky sexual behaviours in general were confined to educators and parents but not to the whole community. The research findings from both male and female participants were mostly centred on girls as the only ones vulnerable to risky sexual behaviours. However, I cannot make any assurance on lack of bias because most of the participants might have been less sexually active than youths who were not part of the research.

6.3. RECOMMENDATION FOR FURTHER STUDY

At least research findings could have been drawn from analysis from five rural schools. A variety of participants could have been used for each focus group. Research findings should be made available to all relevant stakeholders including, school management, including SGBs, educators, parents, learners and the DoE. The researchers should be given government-recognised leave so as to travel from point A to B (schools) to conduct their research studies, especially if the participants are learners. Similar research studies should be conducted with participants of the same age, but outside the school environment (drop-outs).

If the suggested recommendations can be tracked down and looked into, the risk of sexual behaviours at home, school and in the community could be reduced. All the mentioned stakeholders should play their major role in ensuring that they adhere to the call in a collaborate attempt of fighting risky sexual behaviours among adolescents. Conducting further studies about risky sexual in the same setting but with a larger scope will help redress the limitations of this study.

6.4. CONCLUSION

The chapter has provided recommendations for dealing with risky sexual behaviours. It is evident from the study that equipping educators with skills to support their children and to communicate effectively with them may also reduce adolescents' indulgence in risk risky sexual behaviours. Life Orientation is seen as the subject most suited for dealing directly with sexuality education, therefore strengthening its contents will be beneficial for young adults. The implementation or reinstating of religious education in schools might instil moral values to adolescence, and thus reduce sexual risks.

REFERENCES

- Arcy, D. (2012). Dealing with peer pressure: Paying attention to your own feelings and beliefs about what is right and wrong can help you know the right things to do. *Journal of Kid Health*, 5 (12): 73-89.
- Africa, E. K., Deventer, K. J. & Barnard, J. G. (2008). Adolescent girls' health risk behaviour. *American Journal for Physical, Health Education, Recreation and Dance*, 14(4): 473-484.
- Adefuye, A. S., Abiona, T.C., Balogun, J. A. & Lukobo-Durrel, M. (2009). HIV sexual risk behaviour and Perception of risk among College Students: Implication for planning interventions. Chicago: BMC Public Health.
- Agha, S. & Van Rossem, R. (2004). Impact of a school-based Peer Sexual Health Intervention on Normative Beliefs, Risk perceptions and sexual behaviour of Zambian Adolescents. *Journal of Adolescents health*, 34:441-452.
- Aggleton, P., Ball, A & Mane, P. (2006). Sex, Drugs and Young People: International Perspectives, Sexuality, Culture and Health. London: Routledge.
- Barber, K. (2011). Introducing the New Sexuality studies: Sex and Power. University of Southern California.
- Baxter, P. & Jack, S. (2008). Qualitative case-study methodology: Study design and implementation for Novice researchers. *The Qualitative Report*, 13(4): 544-559.
- Berer, M. (2003). HIV/AIDS sexual and Reproductive Health: *Intimately Related* in Reproductive Matters, 11(23): 6-11.
- Berger, J. (2009). Re-sexualizing the epidemic desire, March 2009.
- Berkwits, M. & Sinui, T. J. (1995). Making use of qualitative Research Techniques: *General Intern Medication*, 13(3): 195-199.

- Berry, L. & Hall, K. (2009). Multiple sexual partnerships: *HIV/AIDS and STI national strategic plan*, 2007-2011.
- Booysen, F. & Summerton, J. (2000). Periodicals, Poverty, risky sexual behaviours and vulnerability to HIV Infection.Bloemfontein: NISC Pty.
- Booysen, F. & Fredericks, K. (2009). Igneta connect HIV/AIDS, poverty and risky sexual behaviours. *South African Journal of AIDS research*, 34(3): 119-145.
- Brendro, L. K. (2006). The vision of Urie Bronfenbrenner: Adults Who are crazy about kids. *Reclaiming children and youth*, 15(2006).
- Bronfenbrenner, U. (1994). Ecological Models of Human Development: International Encyclopaedia of Education, 3(2):1643-1647.
- Bronfenbrenner, U. (2006). Unions: Challenging transnational capital Through Cross-border campaign. *Transnational Journal of Cross borders*, 5(10):198-245.
- Brook, D. W., Morojele, N. K. & Kachienga, C. (2006). South African Adolescents: Pathways to risky sexual behaviour. *Journal of AIDS Education AIDS and prevention*, 18(3): 259-272.
- Brook, D. W., Morojele, N. K., Zhang, C. & Brook, J. S. (2003). South African Adolescents: *Pathways to Risky sexual behaviour*, *8*(2): 175-190.
- Bryan, A. & Stallings, M. L. (2001). A case control study of Adolescent risky sexual behaviour and its Relationship to personality, dimensions conduct disorder and substance abuse, Dec. 2001.
- Burtney, E. & Duffy, M. (2004). Young people and sexual health: Individual, social and policy contexts. New York: Pelgrate MacMillan.
- Campbell, C. (2003). Letting them Die: Why HIV/AIDS prevention programmes fail in Cape Town. Cape Town: HSRC Press.
- Carey, M. P., Vanable, P. A., Senn, T. E., Coury-Donnger, P & Urban, M. A. (2008). Evaluating a two way approach to risky reduction in a public-funded

- STI Clinic: Rationale, design and baseline data from the Health Improvement Project-Rochester HIP-R). *Journal of Contemporary clinic Trials*, 29:569-586.
- Castrucci, B. C. & Martin, S. L. (2002). The association between substance abuse and risky sexual behaviours among incarcerated adolescents: *Mater child Health*, *6*(2002): 43-71.
- CDC (2011). Adolescent and school health: Centres for Disease control and prevention, May 2011.
- Ceci, S.J. (2006). The influence of Afrocentric values, self-esteem and Black identity on drug attitudes in African American 5th Graders. *The Journal of Black Psychology*, 61(2): 173-174.
- CFHC (2013). Unhealthy relationship: Learning the facts about sexual coercion, USA: California.
- Chang, V. & Fine, M. A. (2008). Modelling parenting stress trajectories among low-income young mothers across the child's second and third years; Factors accounting for stability and change. *Journal of Family Psychology*, 21: 584-594.
- Chan, K. & Reidpath, D. D. (2003). "Typhoid Mary" and "HIV Jane": Responsibility Agency and Diseases prevention in Reproductive Health Matters, 11(22):40-50.
- Chidester, D. (2007). Religious Education in South Africa: Teaching and Learning about Religions, Religious and Religious Diversity. Report from the preparatory Seminar held in Oslo, December 7-9.
- Coury-Doniger, P. A., Levenkron, J. C., McGrath, P. L., Knox. L. & Urban, M. A. (2000). From theory to practice: *Use of stage change to develop, cognitive and behavioural practice*, 7:395-406.
- Crossman, A. (2014). Purposive Sample: Tourism Grading Council of South Africa.

- Davis, K. C., Blistein, J. C., Evans, W. D. & Kamyab, K. (2010). Impact of parent-child sexual communication campaign: Results from a controlled efficacy trial of parents. *Journal of Reproductive Health*, 7:17.
- Davis, U. C. (2013). Sampling: Types of samples. Psychology of Education, March 2013.
- Djamba, Y. K. (2005). Sexual Behaviour of Adolescents in contemporary Sub-Saharan Africa: Department of Sociology and Criminal Justice. South-Eastern Louisiana University.
- Deque, S. (2004). Understanding Perpetrators of Non-physical sexual coercion: Characteristics of those who cross the line. University of Nabraska-Lincoln.
- Docalavick, H. &Livingstone, P. (2008). Grow up fast: Youth coping with teen pregnancy, Philadelphia: Mason Crest.
- Donald, D., Lolwana, P. & Lazarus, S. (2000). Educational Psychology in Social context: Challenges of development. Social issues and special needs in South Africa. Cape Town: Oxford.
- Dowsett, G. & Aggleton, P. (1999). Young people and risk-taking in sexual relations: A comparative analysis of multi-site in developing countries. *Journal of Society of PaediatricNurses*, 5, 56-78.
- Earle, S & Shapiro, K. (2002). Sec in Cyber space: Men who pay for sex. Burlington: Ashgate Publishing Company.
- Eaton, I., Flisher, A. J. & Aaro, I. F. (2003). Unsafe sexual behaviour in Southern African youth: *Social Science and Medicine*, 56(1): 149-165.
- Ereaut, G. (2013). What is qualitative research? QSR International: New York: MC Graw Hill.
- Foku, E. F. (2011). Stigma sexual risk and desire for HIV tests in Ghana: Department of Culture and Communication. Philadelphia: Hill Crest.

- Fora, A. (2011). Behavioural interventions: Multiple concurrent social partners, USAID.
- Frasca, F. (2003). Men *and* women still far apart on HIV/AIDS: *In Reproductive Health matters*, 11(22): 12-20.
- Free Essays (2006). Sex pressure, available at www. Freeways/cc.
- Garbers, J. G. (1996). Effective research in the Human Sciences. Pretoria: Van Schaik.
- Golafshani, N. (2003). Understanding reliability and validity in qualitative research. UJ CD. www.uj.ac.za.
- Goldstein, S. L. (1999). The sexual exploitation of children: A practical Guide to Assessment Investigation and Intervention, 2nd edition. Boca Ratan: CRC Press.
- Goud, C & Fick, N. (2008). Selling sex in Cape Town: sex work and Human Trafficking in a South African city. Pretoria: Brooklyn Institute for security studies.
- Gregson, S., Nyamukapa, C., Mason, P.R., Zhawai, T. & Carael, M. (2002). Sexual Missing patterns and Sex differentials in teenage exposure to HIV: *Infection in rural Zimbabwe*, 3(2): 1875-189.
- Gresham, F. M. & O'Shaughnessy T. E. (2010). Effective intervention strategies for behaviour problems. Philadelphia: Allyn Bacon Prentice Hall.
- Gretchen, C.; Shang-En, C. & Jonathan, M. E. (2009). Mediators of HIV-related stigma and risk behaviours in HIV infected young moment. *AIDS Care*, 21 (11): 1455-1462.
- Gross, D. (2014). UK wants to restrict access to online porn. United Kingdom: Cable News Network.

- Guba, E.G & Lincoln, Y.S (1994). Competing paradigms in qualitative Research. In N.K. Denzin & Y.S. Lincoln (Eds). Handbook of Qualitative Research (pp.105-117). London: Sage
- Guzman, M. R. & Bosh, K. R. (2007). High risk behaviours Among Youth: The status on high-risk behaviours among youth today are defined and discussed and suggestions offered for strategies to promote healthy behavioural choices for youth. *Journal of Educational Psychology*, 34(2): 78-95.
- Harrison, B. (2008). Hidden Love: Sexual ideologies and relationships ideals among rural South African adolescents in the context of HIV/AIDS. *Culture, Health and sexuality,* 10 (2): 175-89.
- Hart, M. (2013). Illegal taverns shut down in Primrose, SABC news May 2013.
- Jarlais, D.C.D. & Semaan, S. (2000). Interventions to reduce the sexual risk behaviour of injecting drug users: *International Journal of drug policy*, 165:558-566.
- Johnson, L. (2013). Qualitative and Quantitative Research Method. Coronation: Fund Managers.
- Johnson, L. F., Dorrington, R. E., Bradshaw, D., Pillay-Van Wyk, V. (2009). Sexual behavioural Patterns in South Africa: *Journal of Sexual Health*, 21(11):289-340.
- Kaestle, C. E., Morisky, D. E. & Wiley, D. J. (2002). All sexual intercourse and the Age differences between Adolescent females and their Romantic Partners: *Journal of Perspective on Sexual and Reproductive Health*, 34(6); 157-183.
- Kaufman, L. E. & Stavrou, S. E. (2002). "Bus fare, please": The Economics of sex and Gifts among Adolescent in Urban South Africa, no. 166. Population Council.
- Kay, J.J. (1994). The Huron Natural Area: An ecosystem approach, March 1994.

- Keenan, K., Loeber, R., Zhang, O., Stouthamer-Loeber, M., Van Kammen, W. B. (1995). The influence of deviant peers on the development of boys' disruptive and delinquent behaviour: A temporal analysis. *Journal of DevelopmentalPsychology*, 7: 715-726.
- Key, J. P. (1997). Qualitative Research. Research design in Occupational Education. Pretoria: Van Schaik.
- Khoza, L. B. (2004). Adolescents' knowledge, beliefs and experiences regarding sexual practices: *Health South Africa*, 9(3):34-41.
- Kiff, T. (2013). Coercion: Psychological Wikipedia, July 2013.
- Kirby, D. (2008). The impact of abstinence and comprehensive sex and STD/HIV education programs on adolescents' sexual behaviours: *Sexuality Research* and *Social Policy*, 5(3):18-27.
- Kirby, D. B., Laris, B. A. & Rolleri, L. A. (2006). Sex and HIV education programs: The impact on sexual behaviours of young people throughout the world: *Journal of Adolescent Health*, 40, 296-317.
- Kitshoff, M. & Van Wyk, W. B. (1995). Method of Religious Education and Biblical studies. Cape Town: Maskew Miller Longman.
- Kobayashi, N. (2008). Child ecology: A theoretical basis for solving children's problems in the world. *Journal of Children's Health*, 65, 211-219.
- Kohler, P.K., Manhart, L.E & Lafferty, W.E (2008). Sex education and the initiation of sexual activity and Teenage pregnancy: *Journal of Adolescent Health*, 42:344-357.
- Kottler, J. & Kottler, E. (2000). Counselling skills for Teachers. Thousand Oaks, CA: Gorwin Press.
- Krauss, S. (2013). The lingering Psychological effects of multiple sex partners. Whitbourne, April 2013.

- Leclere-Madlala, M. (2009). Technical meeting on young woman in HIV hyper endemic countries of sub-Saharan Africa: Stopping the HIV Epidemic Young Women, Girls and HIV in Sub-Saharan Africa. Report on the global HIV/AIDS epidemic, Geneve, UNAIDS 2009.
- Leigh, J. (2003). An introduction to the epidemiology of HIV/AIDS, Centre for Actuarial Research, February 2003.
- Le Roux, J. (1994). The Black Child in Crisis: A socio-educational perspective. Pretoria: Van Schaik.
- Lesch, E. & Bremridge, C. (2006). Safe sex and constructions of young malesexuality in one semi-rural Western Cape community: *South African Review of Sociology*, 37(2): 275-284.
- Lohman, D. J. & Billings, A. (2008). Protective and risk factors associated with adolescent boy's early sexual debut and risky sexual behaviour. *Journal of Youth adolescents*, 37: 723-735.
- Luke, N. (2003). Age and economic asymmetric in the sexual relationship of adolescent girls in Sub-Saharan. *Journal of African studies in Family planning*, 34(2): 67-86.
- Maddock, J.W. (1997). Sexuality Education: *Journal of Psychology and Human sexuality*, 9(3-4): 1-22.
- Madise, N., Zulu, E. & Ciera, J. (2007). Is Poverty a Driver for Risky Sexual behaviour? Evidence from National Survey of Adolescent in four African Countries: *African report of health*, 11(3): 83-93.
- Maharaja, P. & Munthree, c. (2007). Coerced first sexual intercourse and selected reproductive health outcomes among young women in KwaZulu-Natal, South Africa: *Journal of Biosocial Science*, 39)2):231-244.
- Maluleke, T. X. (2010). Sexual risk behaviours among in the Vhembe district of Limpopo Province of South Africa: *Journal of Interdisciplinary Health Service*, 15 (1): 35 76.

- Maluleke, T. X. (2007). The youths' perspective of sexuality in the Limpopo Province of South Africa: *Heal the South Africans*, 12 (3): 3 16.
- Marriot, F. H. C. (1013). Glossary of statistical terms: A Dictionary of statistical Terms, 5th edition.
- Marsh, D. (2013). Wikipedia Encyclopaedia: The style guide edition.
- Marston, C. (2004). Gendered communication among young people in Mexico: Implementation for sexual health interventions. *Journal of Social Science and Medicine*, 59 (2004): 455-456.
- Marteleto, L., Lam, D. & Ranchhod, V. (2005). Sexual behaviour, pregnancy and schooling among young people in Urban South Africa, July 2005.
- Marin, B. K., Kirby, D. B., Hudes, E. S., Coyle. K. & Gomez, C. A. (2006). Boyfriends, Girlfriends and Teenagers Risk of Sexual involvement: Perspectives on Sexual and Reproductive health, 39(2):2006.
- McCoy, K. & Oelschlage, J. (2002). Sexual coercion, Awareness and prevention. Florida: Chapman & Hall.
- Mcintosh, K. & Walker, (2008). Living with the Diagnosis: Youth with HIV/AIDS. Philadelphia: Mason Crest.
- Mcintosh, K. & Livingstone, P. (2008). Youth with Alcohol & Drug addiction, Philadelphia: Mason Crest.
- McKeon, (2006). Effective Sex Education: Programs and curricular, Washington.
- McMillan, J. h. & Schumacher, S. (1993). Research in education: A conceptual introduction, 3rd edition. New York: Harper Collins College.
- McPhail, C. & Campbell, C. (2008). Peer Education, Gender and development of critical consciousness: Participatory HIV prevention by South African youth. *Journal of Social Science and Medicine*, 53: 33-345.

- Miles, K. (2011). Measures B Passess: Condoms in Porn in LA country will now be mandated. Boston: The Huffinhton Post.
- Montgomery, W., Burr, R. & Woodhead, M. (2003). Changing childhoods, local and global, United Kingdom: The Open University.
- Moore, K., Miller, B. C., Sugland, B. W., Morrison, D. R., Glei, D. A. & Blumenthal, C. (2010). Adolescent sexual behaviour, pregnancy and parenthood: *A review of research and intervention, April 2010*.
- Mordaunt, A. (2008). Risky sexual behaviour in South African Teenagers: *Journal of Educational Psychology*, 25(3):225-286.
- Mora, M. (2005). Qualitative vs. Quantitative Research: When to use which? May 2005.
- Morojele, K., Brook, J. & Kachienga, M. A. (2006). Perceptions of sexual risk behaviour and substance abuse among adolescents in South Africa: Qualitative investigations. *Journal of AIDS care*, 18(3): 215-219.
- Mwamwenda, T. S. & Jadezweni, M. A. (2000). AIDS awareness at the University of Transkei: *Journal of Education and Training*, 21(1): 51-56.
- Mwamwenda, T. S. (2004). Educational Psychology: An African Perspective. 2nd edition, Durban: Butterworth.
- Natrass, N. 2004). The moral economy of AIDS in South Africa. New York: Cambridge University Press.
- Ndebele, M. (2005). Risky sexual behaviours among South African adolescent learners: Possible interactions (Wits school of Education). Gauteng Education.
- Newfield, G. & Mate, G. (2005). Hold on to your kids: Why parents need to matter more than peers. New York: Baltimore.
- Nicholas, L.J. (1999). Sex counselling in educational settings. Johannesburg: Skattaville.

- Nyovani, M., Zulu, E. & Ciera, J. (2007). Adolescent mental health and risky sexual Behaviour: *British Medical Journal*, *321: 251-252*.
- Oliver, P. (2006). "Purposive sampling": The Sage Dictionary of Social Research Methods. New York: Cambridge University Press.
- Patton, M. Q. (2002). Qualitative evaluation and research methods. 3rd edition. Thousand Oaks, CA: Sage.
- Petchery, R., Farnsworth, W & Heron, T. (2001). The maintenance of confidentiality in primary care: A survey of policies and procedures. *Journal of AIDS Care*, 13(2):251-256.
- Pettifor, A. E.; Measham, D. M.; Rees, H. V. & Padian, N. S. (2004): Sexual power and HIV Risk; South Africa: International conference of women and infectious diseases, 10 (11).
- Phillips, J. S. &Malcolm, C. (2006). Sexual risk behaviour among adolescent school girls in a local community in the Western Cape, South Africa: African *Journal for Physical, Health Education, Recreation and Dance, 12(4): 426-437.*
- Pisani, E. (2000). AIDS into the 21ST century: *Some critical considerations in reproductive Health matters*, 8(15): 63-76.
- Prather, C., Fuller, T. R., King, W., Brow, M., Moering, M., Little S. & Phillips, K. (2006). Diffusing an HIV prevention intervention of South African Women: Integrating Afrocentric component into the SISTA Diffusion Strategy. *AIDS Education and Prevention18 Supplement*. 17:149-160.
- Preston, D, B., D'Augelli, A. R. & Kassab, C. D. (2007). The influence of stigma on the social risk behaviour of rural men who have sex with men. *Journal of AIDS Education Preview*, 16(4): 291-303.
- Preston, D. B.; D'Augelli, A. R.; Kassab, C.D. & Starks, M. T. (2007). The relationship of stigma to the sexual risk behaviour of rural men who have sex with men. *Journal of AIDS Education Preview*, 19 (3):218-230.

- Pristein, M., Boereges, S. & Spirito, A. (2001). Adolescents and friends health risk behaviour: Factors that alter or add to peer influence. *Journal of Paediatric Psychology*, 26: 287-298.
- Rees, H. C. (2009). Technical meeting on young women in HIV hyper pandemic country of Sub-Saharan Africa: Delaying age of first sex is not helpfull; women cannot be helped to prevent infections in their adult life. *Journal of Health*, 52 (5):302-321.
- Richter, L., Dawes, A. & Higson-Smith, C. (2004). Sexual Abuse of young children in Southern Africa. Cape Town: HSRC Press.
- Riesch, S. K., Anderson, L. S. & Kruger, H. A. (2006). Parent-child communication processes: Preventing children's Health-Risk behaviour, February 12.
- Rimm-Kaufman, S. (2014). Improving Students: Relationships with Teachers to provide Essential Supports for Learning. American Psychological Association: Washington.
- Robinson, B.E. Scheltema, K. & Cherry, T. (2005). Risky sexual behaviour in low-income African American women: The impact of sexual health variables. *Journal of sex Research*, 44:119-123.
- Robryn, P. (2009). Risk and Resilience: A generation at Risk? HIV/AIDS, Vulnerable children and security in South Africa. Institute for Security Studies. New York: Baltimore.
- Rwenge, M. (2000). Sexual Risk behaviours among young people in Barneda, Cameroon, International Family Planning perspectives. New York: Alan Guttmacher Institute.
- Schiff, M. & Zeira, A. (2005). Dating violence and sexual risk behaviours in a sample of at-risk Israel youth: *Journal of Child Abuse and neglect*, 29(2005):1249-1263.

- Selvan, M. S. & Kurpad, A.V. (2004). Primary prevention: Why focus on children and young adolescents. *Department of International Journal of Intercultural Relations*, 32(2008): 17-34.
- Seth, P.; Lang, D. L.; DiClemente, R. J.; Braxton, N. D.; Crosby, R. A.; Brown, L. K.; Hadley, W & Donenberg, G. R. (2010). Gender differences in sexual risk behaviours and sexual transmissible infections among adolescents in mental health treatment: *Sex Health*, 19 August 2010.
- Sherer, P. & Sherer, M, (2005). Exploring reciprocity in dating violence among Jewish and Arab youths in Israel: *International Journal of Intercultural Relations*, 32(2008): 17-34.
- Sigelman, C. K. & Shaffer, D. R. (2009). The CEDA mata-profesion Project: Life-span Human development, July 2009.
- Silverman, R. (2011). What is Qualitative Research? London: Sage Publishers.
- Small, M. (2012). The Evolution of Adolescent Risky behaviour. Http://theEvolutionInstitute. Accessed 5 February 2012.
- Smalley, A. (2012). Helping Teenagers Resist Peer Pressure: Marriage Ministries for the consent relationship enrichment, Arkansas.
- Social Work (2006). Ecological factors associated with STD risk behaviours among detained female adolescents, January 2006.
- Sonkin, B. & Hinde, A. (2007). Defining risky sexual behaviours in the UK: A latent class Approach. Britain: E-Print Soton.
- Soy, S. (2006). The case study as a Research method. School of information, Texas: BMJ Publishers.
- Stalls, R. & Hart, G, (2008). Sexual transmitted infections. Germany: BMJ Publishing.
- Steyn, P. S., and Groenhof J. & Schaalma, H. P. (2009): Non-condom use behaviour of adolescents in South Africa: An integrated model of contextual

- factors and individual determinants. *Obstetrics and Gynaelogy Forum*, August 2009.
- Sympson, C. (1999). Coping with unplanned pregnancy, revised edition. New York: The RosemPublishing Group.
- Talks, M. (2010). Sexual violence. University of Michigan, SAPAC.
- Taylor, K., Dlamini, M. J., Meyer-Wetz, R., Sathiparsad, S. L., Jinahbai, F. & Estherhuizen, E. (2010). Sexual discourse in the context of AIDS: Dominant them on adolescent sexuality among primary school pupils in Magu district. *Journal of Sex Health Study, 21(7): 85-90.*
- The Gilmer Mirror (2014). Poverty spurs risky sexual behaviours, Texas.
- Thomas, C. (2009). Health risk behaviours of high school learners and their Perceptions of preventive services offered by general Practitioners: *Journal of Private Practice and Department of family medicine*, *51*(3): 216-223.
- Trends, C. (2010). Centres for Disease control and prevention. *Journal of Sexual Health*, *59*(*55*): 1-142.
- Tyler, K. (2002). Social and Emotional outcomes of childhood Sexual Abuse: A Review of Recent Research. Nabraska-Lincoln.
- UNAIDS (2004). Report on the global HIV/AIDS epidemic. Joint United Nativity Programme on HIV/AIDS held in Geneva, July 2004.
- UNESCO (2006): Masculinity for boys: Resource Guide for peer educators, March 2006.
- Ungar, M. T. (2000). The myth of peer pressure Adolescence: *Journal of health,* 35(137): 167-118.
- Van Niekerk, E. & Prins, A. (2001). Counselling in South Africa: A youth perspective. Cape town: Heinemann.

- Varga, C. A. (1997). Sexual decision making and negotiation in the midst of AIDS; Youth in KwaZulu-Natal, South Africa. *Health Transition Review*, 3 (7): 45 67.
- Visser, M. & Moleko, A. (2010). High-risk behaviour of primary school learners. *Department of Psychology*, University of Pretoria.
- Visser, M. (2003). Risky behaviours of primary school learners in a disadvantaged community: A situation analysis. *Department of Psychology*, University of Pretoria.
- Voydanoff, P & Donnelly, B. W. (2000). Adolescent sexuality and pregnancy: Family Students Text Series 12. London: Sage.
- Walker, L., Reid, G. & Cornell, M. (2004). Waiting to Happen: HIV/AIDS in South Africa-the bigger picture. Cape Town: Double Story Books.
- Walters, K. L., Simoni, J. M. & Evans-Campbell, T. C. (2002). Substance use Among American Indians and Alaska Natives: Incorporating culture an Indigenist stress-coping paradigm: *Journal of Public Health Reports*, 117: 235-255.
- Wang, D. E. (2003). Risk profiles of adolescent girls who are victims of dating violence: *Journal of Adolescence*, 38: 1-4.
- Weinstocks, H., Berman, S. & Cates, W. (2000). Sexually transmitted diseases among American youth: Incidence and prevalence estimate, 2000. *Perspectives on Sexual and Reproductive Health*, 36(1): 6-10.
- Whiteside, A. & Sunter, C. (2000). The challenge for South Africa. Human & Rousseau: Tafelberg.
- Winslow, K. C. (2014). How to restrict site on Mozilla Firefox in UK, Internet February 2014.
- Wikigender (2011). Ages of consent to sex in South Africa, March 2011.

- Wood, K. & Jewkes, R. (1997). Violence, rape and sexual coercion: Everyday love in South African township. *Journal of Gender and Development*, 5(2): 41-46.
- Wright, L. (2003). A phenomenological Exploration of spirituality Among African American women Recovery from Substance abuse. *Archives of Psychiatric Nursing*, 17 (4): 173 185.
- Wu, Y., Burns, J. T., Stanton, B. F., Li, X., Harris, C. V., Galbracht, J. & Wei, L. C. (2003). Influence of prior sexual risk experience in response to intervention targeting multiple risk behaviour among adolescents. *Journal of Adolescent Health*, 36(2005): 56-63.
- Yukti, A. (2009). Bronfenbrenner' ecological theory.

http://www.mymontessoriacademy.

- Zimmer-Gembeck, M. J., & Collins, W. A. (2007). Gender, mature, appearance, Alcohol use and Dating as correlates of sexual partner Accumulation from Ages16-26: *Journal of Adolescent Health*, 4 (2008): 564-572.
- Zwane, I. T. & Mngadi, P. T. (2004). Adolescents' views on decision-making regarding risky sexual behaviour. *International course of Nurses*, March 2004.
- Zwane, I.T. (2000). Knowledge of Sexuality transmitted diseases and attitudes towards condom use among At-risk adolescents in Swaziland: *Research Journal of Agriculture, Science & Technology, 3 (2): 5-11.*
- Zwane, J.T., Mngadi, R.T. (2004). Adolescents views on decision-making regarding risky sexual behaviour. International Council of Nurses: *Journal of International Nursing review*, *51*: 15-22.

APPENDICES: A- J

P.O Box 864 Saulspoort 0318

12 Mopitlwe 2010

The Principal & SGB
Moruleng Middle school
P.O Box 295
Saulspoort
0318

KOPO YA GO DIRA DIPATLISISO MO BARUTWANENG BA BA MAGARENG GADINGWAGA DI LE 15 GO YA GO TSE 17

Nna ke le Nompikelelo Doris Moraope ke kopa tetla ya go dira dipatlisiso mo sekolong se se magareng sa Moruleng mo tlase ga setlhogo se se reng: Maitsholo a a ka nnang kotsi a thoballano mo ba rutwaneng ba ba magareng ga dingwaga di le 15 go ya go tse 17. Maikaelelo a dipatlisiso tse, ke go tsibosa basha ka dilo tse di ka dirang gore ba feleletse ba tsene mo thaballanong e e sa letlelegang le gore ba ka dira eng go efoga seno.

Diphitlelelo tsotlhe tsa dipatlisiso di tla fetisediwa go ba tsaya karokolo botlhe.

Nka itumela thata fa kopo yame e ka amogelwa.

Wa Iona

N. D. Moraope

P.O Box 864

Saulspoort

0318

12 Mopitlwe 2010

Motsadi

Moruleng Middle school

P.O Box 295

Saulspoort

0318

KOPO YA GO DIRA DIPATLISISO MO NGWANENG WA GAGO

Nna Nompikelelo Doris Moraope ke kopa tetla ya go dipatlisiso mo ngwaneng ya lona ka setlhogo se: Maitsholo a a kannang kotsi a thoballano mo ba rutwaneng ba ba nang le dingwaga di le 15 go ya go tse 17. Batsaya karolo botlhe ba tlile go tlhalosetswa ka maikaelelo a dipatlisiso pele di simolola. Maikaelelo a dipatlisiso tse, ke go tsibosa bana ka kotsi ya go tsena mo thoballanong o santse o le mosha kwa ntle ga go dirisa mosomelwano, go ratana le bagolo, go nna le balekane ba le bantse le go rekisa mmele gonne seo se ka dira gore ba ime ba santse ba le bannye e bile b aka tshwaetsega ka malwetsi a thoballano jaaka HIV.

Ga go na motsaya karolo ope yo o tlileng go patelediwa go tsaya karolo, ka jalo ga go na tuelo epe e a tlileng go e fiwa. Motsaya karolo o na le tshwanelo ya go ka ikgogela morago nako engwe le engwe mo dipatlisiso fa a ikutlwa gore a ka se kgone go tswelela pele. Dipatlisiso di tla dirwa ka Setswana mme di fetolelwe mo Sejatlhaping. Go tla dirisiwa maina a seng a nnete a bana go diradipatlisiso.

Diphitlelelo tsotlhe tsa dipatlisiso di tla fetisediwa go ba tsaya karokolo botlhe. Nka itumela thata fa kopo yame e ka amogelwa.

Wa Iona

N. D. Moraope

94

P.O Box 864

Saulspoort

0318

12 March 2010

The Principal & Educators

Moruleng Middle school

P.O Box 295

Saulspoort

0318

Request to conduct research at Moruleng Middle School

I am a Master's student at the University of South Africa (UNISA). I am requesting permission to conduct a research in your institution. My research topic is: Risky sexual behaviours among adolescents in a rural setting in Rustenburg. The rationale of the study is to identify risky sexual behaviours among adolescents so as to come up with preventative strategies on how to address those behaviours.

I have identified Moruleng because learners have detected that some of learner's access to illegal drugs such as dagga in the school premises which can tempt them to engage risky sexual behaviours. Another reason is that most learners drink alcohol due to a number of illegal taverns which are operating in the area. Most of these learners fall pregnant at an early age meaning that they have engaged in unprotected sex which could also put them at risk of contracting sexually transmitted diseases including HIV/AIDS.

Ethical procedures for conducting this study will be explained to the participants. For example, that the information they have given will be

confidential and that their real names are not going to be used. The research will be conducted after school, so it does not temper with the effective running of the school. Twenty learners will be sampled for research interviews and divided into small groups comprising of 10 boys and 10 girls. The interviews will consist of four groups; the pilot group, 2 gender groups and a mixed group. The aim behind gender groups is to allow participants to express their views freely as boys or girls only without fearing opposition from any group. The research interviews will be conducted face-to-face and will lasts for 45 to 50 minutes. The interviews will be tape-recorded and transcribed according to an individual's response. I will allow them to express themselves in Setswana and translate the information in English. The information collected will not be shared with anyone before the research is completed except my supervisor.

I hope that my request will be taken into consideration.

Yours faithfully

Moraope, N. D.

P.O Box 864

Saulspoort

0318

07 March 2010

The Area Project Office Manager

Moses Kotane East

Mogwase

Request to conduct research at Moruleng Middle School

I am a Master's student at the University of South Africa (UNISA). I am requesting permission to conduct a research in your institution. My research topic is: Risky sexual behaviours among adolescents in a rural setting in Rustenburg. The rationale of the study is to identify risky sexual behaviours among adolescents so as to come up with preventative strategies on how to address those behaviours.

I have identified Moruleng because learners have detected that some of learner's access to illegal drugs such as dagga in the school premises which can tempt them to engage risky sexual behaviours. Another reason is that most learners drink alcohol due to a number of illegal taverns which are operating in the area. Most of these learners fall pregnant at an early age meaning that they have engaged in unprotected sex which could also put them at risk of contracting sexually transmitted diseases including HIV/AIDS.

Ethical procedures for conducting this study will be explained to the participants. For example, that the information they have given will be confidential and that their real names are not going to be used. The research will be conducted after school, so that it does not temper with the effective running of the school. Twenty learners will be sampled for research interviews

and divided into small groups comprising of 10 boys and 10 girls. The interviews will consist of four groups; the pilot group, 2 gender groups and a mixed group. The aim behind gender groups is to allow participants to express their views freely as boys or girls only without fearing opposition from any group. The research interviews will be conducted face-to-face and will lasts for 45 to 50 minutes. The interviews will be tape-recorded and transcribed according to an individual's response. I will allow them to express themselves in Setswana and translate the information in English. The information collected will not be shared with anyone before the research is completed except my supervisor.

I hope that my request will be taken into consideration.

Yours faithfully

Moraope, N. D.

A STATEMENT OF CONSENT

STATEMENT OF CONSENT FOR CONDUCTING RESEARCH INTERVIEWS ABOUT THE FOLLOWING TOPIC:

This is to confirm that the researcher, Moraope Nompikelelo Doris has explained the purpose of her study and disclosed her identification to us. She has also told us that we have the right to withdraw anytime when we feel to. She has indicated that our real names will not be used, but nicknames instead, and that the information we have given will be confidential. She promised us that the information gathered will be tape-recorded and transcribed word by word and arranged into themes and sub-themes.

Signed at	 on	
Signature	 	
Cell no	 	

BIOGRAPHICAL DATA

Please complete the following questionnaire by marking a cross (x) in the appropriate box.

AGE CATEGORY IN YEARS	
1. 15 YEARS	
2. 16 YEARS	
3. 17 YEARS	
GENDER	
1. MALE	
2. FEMALE	
ETHNIC GROUP	
1. TSWANA	
2. XHOSA	
3. TSONGA	

GRADES	
1. GRADE 7	
2. GRADE 8	
3. GRADE 9	
SCHOOL CATEGORY	
1. MIDDLE	
2. HIGH	
3. PRIMARY	

PERSONAL DATA

1. Last Name First Name Middle Name	
Moraope	
Nompikelelo Doris	
2. Year of Birth:	
1964	
3. Country of Citizenship:	
South Africa	
4. Present Mail Address:	
P.O. Box 864, Saulspoort	
City state Province Postal Code Country	
Rustenburg North West	
0318 South Africa	
Email Address:	
dmoraope31@gmail.com	
MASTER' DEGREE DATA	
5. Full name of university conferring degree:	
University of South Africa	
6. Abbreviation for degree Awarded	
Med	

7. Year degree awarded

2015

TITLE/ SUBJECT AREA

8. Language of text

English

Title: Risky sexual behaviours among adolescents in a rural setting in

Rustenburg.

9. Subject category of thesis: $\underline{0525}$

MIXED GROUP INTERVIEWS (MALES and FEMALES)

The interviews lasted for 45 minutes

Interviewer: Go ya ka lona 'risky sexual behaviours' ke eng?

Kgosi: Eh--- nna mam, ke nagana gore ke go ratana le batho ba tona jaaka di 'sugar daddy' o le ngwana, seo se ka go tsenya mo kotsing ya go nna le ngwana yo o sa mo rulaganyetsang.

Martha: Mam um—go nna le balekane ba bantsi le yona ke risk e tona gone o ka nna wa nna le ngwana ngwana o santse o le monnye.mme o be o sa itse gore rragwe wa nnete ke mang kgotsa eh--- wa nna tshwaetsega mme o sa itse gore pila-pila o tshwaeditswe ke mang gonne o tla be a nna le banna ba dimaene, mankoteraka le borra di tekisi.

Keso: Basha ba bangwe ba rotloetswa ke dichomi, chomi mam, e tla bo etla ka chelete e ntsi, a 'breka' a ntse a re maabane ke ne ke na le bra so and so o mphile bokana; seo se feleletsa se rotloetsa basha ba bangwe go dira jalo.

Mazi: Go gweba ka mmele kwa ditaveneng le yona ke mathata a matona, gonne basha ba bangwe ba ya kwa ditaveneg ka maikaeleo a gore ba tlile go kopana le banna ba ba tlileng go ba nosa bojalwa and sona seo mam mm--- ke risk e tona gonne fa motha a go direle selo o solofela gore le wena omodirele sengwe.

Interviewer: Ke eng se se dirang gore basha ba nne lebalekane ba le bantsi?

Bona: Nna ke nagana gore e--- e---- basha ba bangwe badira jalo ka ntlha ya kgatelelo go tswa mo dichoming, jaanong ba be ba dira jalo go ba kgotsofatsa. Ba bangwe ba tshaba gore dichomi di tla be di go rejeketa di re o a bora gonne o a sa phele jaaka bona, so le ena o feleletsa a joina.

Boi: Ba bangwe ba basha ba nna le balekane ba bantsi gonne ba re banna ga ba beche ka go tshwana,ba bangwe ba a tshologa mocheleteng fa ba bangwe ba le 'stich and nako e ngwe nna ga ke jole and ke tsamaya le dichomi tse dijolang, so--- eh --di feleletsa di nkgatelela gore ke setomo, so le nna ke feleletsa ke wela.

Kgosi: Mam, eh--- banyana ba tsaya chanse gonne fa ba nna le balekane ba le bantsi ba ka lwala kgotsa motho a nna le ngwana mme a sa itse gore papaagwe ngwana ke mang gonne o ne a nna le yo le yo.

Nto: Nako e ngwe mam, basha ba bangwe ba dirwa ke maema a kwa lapeng, o fitlhela kwa lapeng mme le ntate bas a dire jaanong mosha o pateletsega go phanta mo banning gore le ena a phela jaaka basha ba bangwe.

Martha: Basha ba bangwe mam, ba dirwa ke 'adolescent stage, se ba isa kwa le kwa e bile bontsi ba bona ba palelwa ke go se laola.

Rori: Basha ba bangwe bona mam, um--- eh--- ba nna le balekane ba le bantsi gonne ba ba re yo mongwe le yo mongwe o tshwanetse a nne le 'role' ya gagwe e a e tshameka jaaka mam, yo mongwe a reka 'airtime, yo mongwe ke yo o bechang ka madi fa yo mongwe e le yo o rekang bojalwa.

Interviewer: Ke diltamorago tse di feng tse mosha a ka iphitlhelang mo go tsona ka go nna le balekane ba le bantsi?

Boi: Fa mosha a tsaya 'decision ' ya go nna le balekane ba le bantsi a ka nna a ima 'and' seo se ka ama dithuto tsa gagwe gonne kwa sekolong o tla be a sa tlhole a utlwelela a naganne ka mpa ya gagwe.

Magala: Gape mam, 'performance' ya gagwe kwa sekolong e tlile go ya kwa tlase e be e re motha wa teng a feitse a be a re barutabana ke bona b aba mofeidisitseng.

Martha: 'And gape mam----, fa mosha a nna lebalekna ba le bantsi a ka nna a tshwaetsega ka mogare wa HIV,seo se ka dira gore botshelo jwa gagwe bo tlhakatlhakane a be a feleletsa a tlogela sekolo go rekisa mmele le go ineela mo diritibatsing.

Bona: Se sengwe gape mam, a--- a--- ke gore fa mosha a nna lebalekane ba le bantsi, 'sex' e feleleltsa e nna 'habit', a be a simolola go rekisa mmele a sa tlhole a kgona go phela kwa ntle ga thobalano.

Kgosi: Mam,e--- se se seng monate ke gore fa o phela bophelo ba go nna le balekane ba le bantsi, batho ba feleletsa ba go bitsa ka maina-ina jaaka o scaftini', sethibatlala kgotsa tsenang botlhe.

Rori: Rona banyana mam, fa re roballana le basimane ba bantsi ra re re ba dira di 'trohpy and le bona ba re ba re dira di 'trophy'.

Interviewer: Ke go reng ba le bitsa kgotsa le bitsana di 'trophy'?

Martha: Gantsi mma, o fitlhele mosimane kgotsa mosetsana a le montle, a le fa attention, a kgatlhisa fa a apere, a na le ditebego, so le fa a ke go 'chita' ga o tshwenyege 'as long as' a na le nako ya gago le wena. Nna ka maitemogelo a ka, rona basha ga re lebelele bontle, 'as long' a apara di 'label' jaaka dikavela, ra re ke ena 'and we go for him/her'.

Interviewer: Go ka dirwa eng go thibela basha go nna le balekane ba le bantsi?

Martha: Waitse ke eng mam, nna ke nagana seno se ka thibelwa ka go dira diprogerama tse di buwang kgotsa tse di rutang basha ka 'sex but' le tsona di progerama tseo di na le di 'advantage' le di 'disadvantage' gonne bona bagolo bao ke bona ba yang kwa go bona basha bao ba ba 'proposa'.

Kgosi: Nna morutabana, ke nagana gore batsadi ba tshwanetse go nna 'open' mo baneng ba bona gonne 'most of the parent' ga ba nke ba buwa le bana ba bona ka dilo tsa thoballano.

Interviewer: Le kaile gore basha ba ratana le bagolo, jaanong ke eng se se dirang gore basha ba ratane le bagolo?

Bona: Mam, basha ba rata chelete, ba nna le banna ba tona gonne ba a becha, gape ba lebeletse le dikoloi tse bagolo ba, ba tsamayang ka tsona gonne mogolo o kgona go mo isa gongwe le gongwe kwa a batlang go ya teng, so e--- ngwana wa sekolo a ka se go direle jaaka mogolo gonne ga a na chelete.

Mazi: Nako e ngwe o fitlhele e le gore mosha yoo kwa gaabo ba a itshokolela jaanong a nagana gore fa a ka nna le motho yo motona o tla mo thusa ka chelete gore le ena a thuse kwa lapeng.

Boi: Basha ba bangwe ba ratana le batho b aba golo gonne ba rotloediwa ke dichomi e ntse e le: Hee--- mmata waka o ntirela jaana le jaana, 'sometimes ba batla diaparo tsa di 'label', rona basha re bolawa ke go rata 'competition'.

Magala: Bontate ba bangwe le bona o fitlhela motho wa teng a le 'HIV-positive', so a ithaya a re fa a ka robalana le mosha o tla itlhatswa madi ka ena.

Martha: Nna se ke se itseng mam, ke gore bontsi ba bontate ba 'responsible', ka jalo monna yo o nyetseng 'never' a tlogele 'family' ya gagwe ka ntlha ya mosha, so a be a go 'user'.

Nto: Se sengwe gape mam, e--- se se dirang gore bagolo ba nnele basha ke gore bana ba basetsana ba golela ka pele, o fitlhele motho wa teng a lebega a le motona mme e le ngwana.

Kgosi: Basha ba bangwe o fitlhele ka 'the age of fifteen' a lebega a le motona 'because girls grow faster than boys that is why' bagolo ba re 'poposa', mara 'disadvantage' ya seo ke gore o ka feleletsa o lwa le mosadi wa ntate oo a re o mo thubela lapa.

Boi: Basetsana ba ratana that le di 'sugar daddy' tsa di 'taxi driver', ka gore motho wa teng o tla be a kgatlhwa ke go nna fa pele mo koloi a sa duele, e mo isa sekolong e be e ya go mo tsaya maitsiboa, 'but yes it is good' maar e tlile go mo kgorelets go ithuta.

Interviewer: Ke kgakololo e feng e wena jaaka mosha o ka e fang mosha yo o dirang dili tseo?

Rori: Ijoo---mam, fa ba setse ba nna le di 'sugar daddy' ga ba gakolesege, ka re motho o tla go raya a re o 'jelous' kgotsa ntlogele ke botshelo jwaka, e bile ba bangwe ba setse ba le 'addicted' mo bophelong boo.

Nto: Nna nka mmolellela gore fa a nna le ntate wa lelapa ga a itse gore fa ntate yoo a fetsa go mo 'dropa' ka koloi o ile go palamisa mang 'and disadvantage' ke gore o ka nna wa ima a ba a go itatola.

Boi: Ka re motho wa teng mma, fa a setse a nna le 'sugar daddy', o feletsa a lebega o ka re o motona mme a le monnye 'because' o tla batla go mecha 'sugar daddy'eo.

Kgosi: Basha ba bangwe ba fefetsa ba dira 'abortion and abortion' ga e a siama gonne mosha o a bo a bolaya motho, so mosha oo, o tshwanetse gonne o bolaya madi a a se nang molato.

Rori: Waitse ke eng mam,ke ya leka go ba bolelela gore go nna le balekane ba bantsi ga go 'sharp', especially ditsala tsaka mara fa motho a sa bone phoso mo go se a se dirang o ka se mo fetole.

Martha: 'Diasdvantage ' ya go nna le di 'sugar daddy' ke gore nka lwala, ka nna pregnant e be ena 'sugar dad yeo e itatola, e be ke tshwanetse go feisana le botshelo ba go godisa ngwana ke le nosi.

Interviewer: Ke dikgato tse di feng tse di ka tseiwang kgatlhjanong le di 'sugar daddy' tse?

Magala: Ke nagana gore rona 'outside the situation', re ka thusa 'our colleques' ka go bolelela mapodisa kgotsa barutabana gonne ntate yoo o sotla ngwana, ga a na lerato mo go ena o batla sex fela and gape o mo senyetsa bokamoso.

Martha: Mara jaanong fa mosha a le 'over 16', o na le 'right' ya go inaganela, 'unless' a le 'below 16' ke gona re ka isang 'case' kwa mapodiseng 'because' eo ke 'abuse'.

Interviewer: Jaaka mosha o ka 'challenger' molao o o reng mosha a tle sekolong a imile jang?

Martha: Nna tota ke kgatlhanong thata le ona molao gonne go na le di progerama tse dintsi tsa di 'NGO' tse di tlang mo dikolong go ruta bana ka boimana le thoballano, so nna ka re a mosha a nne kwa gae a seka a letlwa go tla sekolong gore a kgone go tsenya mo tlhogong gore se a se dirileng ke phoso.

Nto: Le gona mma, motho o o 'pregnanr' o fitIhele a le mo di mutsing, a kgesa mongwe le mongwe yo o buwang le ena, tota le barutabana. Nako e ngwe e ka

nna ya re a le mo tlelaseng a tshwarwe ke di peini 'and' sepetlele se kgakala, go tla be go batlega gore barutabana ba siane ka dikoloi tsa bona go mo isa sepetlele.

Mazi: Nna ke nagana gore 'the government should take some responsibilities to make sure' gore baimana ba seka ba letlelelwa go tla sekolong gonne seo se rotloetsa basha ba bangwe go ima.

Rori: Go ima o le ngwana sekolo le gona o imisiwa ke mogolo ga go a siama gonne fa a go itatotse, mosha o feletsa a nagana go ntsha mpa kgotsa go ipolaya a nagana gore lefatshe le fedile.

Interviewer: Ditlamorago tsa go ntsha mpa ke eng?

Kgosi: Go ntsha mpa mam, ga go a siama tota eh--- gonne mosha a ka nna a wa kgotsa ya mo tlogela ka ditlamorago tse di ka se neng monate 'later' mo botshelong jwa gagwe, a ikotlhaya gore o ne a dirang ka gongwe e bile a sa kgone go bona bana.

Martha: Nna mam, e--- ga ke bone phoso e kalo mo go ntsheng mpa gonne e ya bo e e se e nne motho gone--- eh---mam, 'because' mosha o a bo a bolaya lee, 'risk' ke fa obolaya kgotsa o dira 'abortion' o setse o le '5 months pregnant'.

Interviewer: A batsadi ba a bua le ban aba bona ka thobalano? Naya mabaka.

Bona: Mam, e---, e---'it depends', batsadi ba bangwe ba a leka go bua le bana ba bona ka thoballano, mme go tshwana fela, basha ga ba utlwe, ba dumela ba bone.

Mazi: Nako e ngwe o fitlhela motsadi a re o gakolola ngwana maar le ena a di dira, so go be go tshwana fela 'because' ngwana a ka se tlhole a tsaya se motsadi a se mmolelang tsia. Motsadi yio o ntseng jalo, o feleletsa a itaya ngwana a re o tla masigo, o lala nageng a lebala gore o bone ka ena.

Martha: Nako engwe morutabana, o fitlhela e le gore motsadi le ngwana ba shera 'boyfriend' e le ngwe ba sa itse 'because' ena motho yoo o a bo a setse a bone gore mo lapeng leo ga go na thulaganyo. Plus mam, ka jeno go tsene 'style

se se reng 'like mother like daughter which means' bana ba dira se batsadi ba bona ba se dirang. Batsadi ba bangwe ba palelwa ke go kgalemela bana ba bona, mme ba kgona go bua ka ban aba kwa di 'next door' gore ga bana mekgwa. O fitlhela motsadi a re o gakolola ngwana, mme a dira jalo ka bogale, so ngwana o a tlwaela, le fa a na le boyfriend ya gagwe ga a tshoge gonne o ipolelella gore go a tshwana gore ke tsena nako mang ke ntse ke tlile go omanyiwa.

Rori: 'Problem' ka batsadi ke gore ga ba battle go amogela gore go na le selo se gotweng 'stage, so ga ichaile ya 'appointment', o tla be a go omanya ka fa a ntse a go epa gore o ya kae.

Boi: Bontsi ya batsadi ga ba nke ba bua le bana na bona ka 'sex and' ba a lebala gore TV e teng, re kgona go bona batho ba sunanan kgotsa ba 'heva sex' le kwa sekolong re a e rutiwa.

Magala: Batsadi ba bangwe ba tshwara bana 'steif', ga ba a tshwanela go ya gope--- and le seo segakatsa basha go feta. Bana ba ba tswang kwa malapeng a jalo ba sephiri, ga ba bue and so if ba kopana le balekane ba bona ba ba bua ka 'romantic relationships', ba re mm--- kante go dirwa jaana, e be ba ya go 'experiensa' go feta.

MALES ONLY INTERVIEWS

The interview lasted for 50 minutes

Interviewer: Ke dilo tse di feng tse o di dira o le mosha mme di ka tsenya botshelo jwa gago mo kotsing?

Bona: Ke nagana gore ke 'fashion', basha 'especially basetsana ba rata 'fashion', so mosha o ratana le motho yo motona mo go ena gore a mo fe chelete e ntsinyana gore a kgone go reka diaparo tsa 'fashion.

Keso: Go ya kwa 'taverneng' go ka tsenya mosha mo kotsing e tona thata, kwa taverneng mosetsana kgotsa mosimane a ka nwa thata a be a feleletsa a dirile dilo tse di 'snaks' like go robalana le mosimane kgotsa mosetsana kwa ntle ga go dirisa'condom'.

Bogadi: Rona re le basha re tshwanetse go ikakanyetsa, o ka bona mosha a re ke motona mme a dira dilo a tlola molao, thata-thata basetsana ba bolawa ke bo nna nka se phalwe ke mokete, so ba nna le borra di 'taxi' 'because of money, mme fa nkabe mosha yoo a itshamekela netball kgotsa a bina setso, a ka bo a bolokile botshelo jwaagwe mo maitsholong a e leng gore kwa bofelong a tla tsenya botshelojwa gagwe mo mathateng.

Magala: Go nna mo 'risking' ga se 'game', gonne rona maauthi re tota re rata 'competition too', fa re ntse ka setlhopha re le nosi, re tla be re ntse re re 'so and so' a ka se mphale re lebeletse lebaka la di 'girlfriends', so re simolola go peipa motekwanego ipaakanyetsa go proposa kana go 'haver sex.

Interviewer: Dilo tsotlhe tse le ntse le di umuka di amana jang le 'risky sexual behaviours'?

Diile: Seo se 'related to risky sexual behaviours because the time' o le 'drugged' ga o nagane 'straight', e bile ga o tlhaloganye le gore o dira eng 'and you can eng up' o reipile motho, o dirwa ke gore o tlhapetswe kgotsa o jele diritibatsi.

Matlho: Motekwane ke risk e tona-tona thata, gonne e—e—bo nneteng fa o setse o peipile o ka feletsa o lalela bagolo ga ba tswa motenteng, o ba reipa kana o ba tseela chelete, o be o tsena mo mathateng.

Bona: Se sengwe gape mam, fa o setse o jele diritibatsi ga o nagane straight, o ka feletsa o reipile ngwana yo monnye, ka gongwe o thswaetsegile ka mogare wa HIV, mme o be o tshwaetsa ngwana yoo ka mogare kgotsa o be o mo imisa.

Keso: Fa ke reipa jalo e tla bo e sa tlhole e le nna mma, e le tlhaloganyo ya diritibatsi, fa ditlamorago di tla, wa ganela gore ke wena yo o dirileng seo gonne o se dirile o sa ipone.

Bona: 'Through drugs mam', o ka feletsa o eletsa go robalana le ngwana yo monnye, 'and' ngwana yoo a ka nna 'pregnant' kgotsa a nna HIV-positive especially' fa e le gore modira bosula o tla be a tshwaetsegile.

Interviewer: Le buile ka gore basha dira maitshola go bona chelete. Ke maitshola a feng a mangwe a basha ba a dirang go bona chelete?

Bogadi: Ngwe ya dilo tse di rotloetsang basetsana mo cheleteng ke go sa battle go phalwa, so motho o tla be a roballana le banna go bona chelete, e bile a se na sepe le ditlamorago, ena a ipatlela chelete fela.

Bona: 'Sometimes mam', ga se gore ga a batla, 'it is like' kwa lapeng ga bana chelete 'and' ena a batla go fetsa dithuto tsa gagwe, kwa gae bas a bereke, so mosha o feletsa a batla di 'boyfriend' tse di ka mo thusang ka chelete.

Magala: Basetsana ma---m, di 'weekends' ke bona kwa di taverneng, ba tshwara baki, motho wa teng o fitlhele a itshwere ka ntataagwe motho, fa o re o a mo gakolola a be a go raya are o motlogele botshelo ke bagagwe, a itumelela go rekelwa dibiri, ka moso ga a tla gae o a batliwa, ena o robetse nageng.

Interviewer: Ke mathata a feng a mosha a ka iphitlhelang mo go ona?

Matlho: Mosha yo o robalanang ka ntlha ya chelete e bile a tlhabetswe, a ka nna a ima, se sengwe gape ke gore mosadi wa ntate oo a ka nna aa utlwa, e be lelapa le thubega ka ntlha ya gagwe 'and' ntate oo gape a ka bua ka mosha oo

kwa go bontate ba bangwe gore ah--- ole o easy fa o tshwere chelete fela o tla go fa se o se batlang.

Bona: Mostsana o gape mam, a ka se nn le seriti 'because' banna ba tla be ba bua ka ena gore o fa morago ga chelete, but le bona bontate ba, ba tla be ba baya basadi ba bona le bona gape ya go tshwaetsa kgotsa go tshwaetswa ka HIV fa e le gore mosha o tla be a tshwaetseqile.

Bogadi: Risky engwe mam, e ba bash aba ipayang mo yona key a gore a ka nna a ima fa aratana le mogolo yoo a be a tshwaetsega ka nako e le ngwe, e be mogolo a tsena ka lenga la seloko, e be a tshwanelwa ke go arabela dikgobo kwa lapeng a le nosi.

Interviewer: Fa rraagwe ngwana yo o imlweng a tshabile, seo s eka ama jang moimana?

Matlho: A ka se nne le bothata mam, why' because basetsanaba ba a itse gore fa ba imile, batsadi ba tlile go ba ema nokeng. Mo ma lapeng batsadi ba bangwe ba a leka go tsibosa ban aba bona ka thoballano mara ba senyaka go ba fa sapoto fa ba imile gonne seo, se dira gore le fa batsadi ba kgalema, monyana a be a sa mo tsee tsia gonne a itse gore fa a ka ima motsadi o tlile go mo fa sapoto le ka go reka diaparo fangwana a se na go belegwa.

Rama: Go le gontsi batsadi ga ba nke ba baya ban aba bona fa fatshe, 'that is why' re itirela fela jaana 'because' kgalemo ga e teng mo malapeng. Bana ba bantsi gona jaanong ba ephedisa ka makonteraka ga ba di bale gore kana konteraka ga e fela monna oo, o tla be a mo tlogela ka mpa a boela gae.

Interviewer: A batsadi ba na le kitso e e feletseng ka ga thobalano? Naya mabaka

Bogadi: Ga se kwa lapeng fela kwa ba kgonang go re eletsa, le kwa sekolong go kaabo go na peroto eo kwa go yona re bolelelwang gore fa o tsena mo seemong se,e.... go tlile go diragala eng gore re kgone re ye go ipatlisisa. Fa sekolong tota ke bona ba ba tshwanetseng go bua le rona thata. Ba tshwanetse ba tsee basimane le basetsana 'separately' ba bue le bona ka thobalano.

Interviewer: Fa sekolong go na le LO e e rutang bana ka se, if le 'fila' gore go na 'gap', e ka tswalwa jang?

Magala: Mam, LO--- neh, ga e--- re 'guide from the beginning to the finish line', e fa 'summary' fela 'that is why' bana bantsi ba sa tlhaloganye gore LO ke eng, LO ga e tlhaga, e tshwanetse e tlhage ka dilo tsotlhe difeletse gore 'the time'o tlileng go robalana le motho go tlile go diragala jaana le jaana, le mo bukeng ba a khutswafatsa, ga ba kwale dilo tsotlhe.

Bona: Mam, ga se se gore batsadi ga ba fe bana ba bona dikgakololo ka 'sex' mara basetsana ba gatelelwa ke di 'boyfriend' tsa bona, o fitlhela motho a ya taveneng a ba a nwa bojalwa 'too much obviously' o tlile go robalana. Ba bangwe ba gatelelwa ke basimane gore ba robalane ba sa dirise 'condom', ka gore mosetsana ga a na 'choice', o tlamegile a dire selo se se buiwang ke maauthi.

Interviewer: Ga a na 'choice'? A le raya gore basetsana ba robala le basimne ka ntlha ya gore ga ban a choice?

Keso: Ee Mam, a ke re mosimane o, o tlile go mo rekela bojalwa jo a itseng gore bo bogale gore bo mo tlhapedise, e be e re fa a tlhapetswe, a be a robala le ena.

Bogadi: Nako engwe basetsana bay a ka 'purpose' twa di taveneng gore ba ile go dira chelete ka mebele ya bona 'and' ba buisana le di 'client' tsa bona gore fa e le 'flesh to flesh' ke bokana 'and if ke ka 'condom' le gona ke bokana.

Interviewer: Ke goreng fa basha ba dira jalo ntswa ba itse gor HIV e teng?

Magala: Mam, e---- rona 'new geration' ra re 'HIV, is like flue", e bile ga re e 'stress' ka bona, re tswelela pele ka botshelo.

Keso: Basha ba a itse 'obvious' gore ga ke le HIV-positive, ke tlile go tsaya 'treatment and' ke tlile go phela sebaka se se telele, e bile ba batla gone gore e ba tshwara gore batle ba kereye di 'grant'.

Bona: Obviously, fa ke le 'HIV-positive, does not mean that' ke tlile go swa ka moso, so le bona basha ba a itse gore ba na le nako e ntsi ya go e phatlhalatsa.

Rama: Nna e--- mam, se ke se itseng ke gore 'sex' ke tlholego, re tshwanetse go e dira, mara re e dire ka tlhaloganyo, so rona bana re e dira 'rough'.

Bogadi: 'Even' le di 'pornography' ga di a siama, o tlabe o lebeletse pornographic pictures from CDs or internet', e be madi a gago ona a bela a batla 'sex', o tsogetswe 'and o ka iphitlhela o robetse le motho e ne e se maikaelelo.

Interviewer: Go dirwe eng gore basha ba seka ba fitlhelela 'internet'?

Magala: Nna ke nagana gore 'it is only through self-respect', gonne 'internet e tshwana fela le 'computer', e go botsa dipotsa tsa 'age restriction', so fa o ka araba dipotso ka botshepegi ka dingwaga tasago tsa nnete e ka se go bulele.

Interviewer: Mara re a iste gore 'pornography is iilegal. Jaanong go dirwe eng go leka go ntsha basha mo go yona?

Rama: Mam, bothata ke gore batho ba ba rekisetsang basha 'porhraphy ga se Batswana, ke maNigeria le maGhana 'and' ba di rekisa 'very cheap'ka R10. 'So issue' ya 'pornography' e ka fela fela fa re ka koba batho ba.

Bogadi: Di 'pornography ga se dilo tsa rona mo South Africa, ke dilo tse di tswang kwa mafatsheng a a kwa ntle e be batla go di rekisa kwano.

Keso: Mara nna----, 'I don't think' re tshwanetse go baya phoso batswa kwa ntle, gonne e teng mo 'computeng', rona ma South Africa re e tsaya mo komputareng jaaka le bona ba e tsaya mo go yona.

Bogadi: Batho ba bangwe ba kgona go reka 'empty CDs' e be ba 'down loader' ditshwantsho tsa batho ba ba mapona kgotsa ba 'haver sex' e be ba di rekisa, mo seterateng. So nna ke nagagna gore batho ba mofuta oo, ba tshwanetse go tshwarisiwa.

Interviewer: Ke 'risk' e feng e mosha a ka iphitlhelang a le mo go yona fa a lebeletse 'pornography?

Bona: 'Risk' ke gore ka gongwe ke tla be ke lebeletse tsona di 'picture' tsa 'pornography' ke na le nnake kgotsa 'cousin' yame, nka fleets ke robetse le ena.

Interviewer: Re ka efoga sex jang re le basha?

Kgosi: Nna ke nagana gore go tshwanetswe go laletswe batho ba ba maleba mo dikolong, ba ba nang le kitso ka tsa thoballano go ruta bana ka thoballano le go ba naya dibuka tse di nang le 'information about sex'.

Interviewer: Ke eng se se dirang gore mosetsana a dumele mosimane ntswa a na le motho wa gagwe kana a itse gore mosimane oo le ena o na le motho?

Bogadi: Basetsana ba dirwa ke 'jelous', 'especially ga ba ka bona gore o tshwere monyana wa gago pila, o montle; ba tla be ba simolola ba tla mo wena ba ipuelela. Mam, ka re ba a tla ba tla go ipuelela, ga ba bona gore o bonolo o tla be a tla mo go wena a go tshwara-tshwara. Fa a fetsa o ya kwa go yo mongwe. Nako e ngwe ba kgona go tla mo go rona gore re ba thuse ba tsogetswe.

Bona: 'Sometimes' monyana ga a itire go ratana le basimane ba babedi, mo gongwe o a bo a dirwa ke gore o 'disapointilwe' ke 'sombody' a ne a mo tshepile, so a be a dira jalo are o ntsha 'stress' ka go dumela yo mongwe.

Interviewer: Go ya ka lona di 'risky sexual behaviour tse, re ka di fedisa jang? eso: Ke nagana gore go busetswe lebollo. Bogologolo go ne go na le molao, basha ba na ba sa idirele fela e bile le malwetse a mantis a, a thoballano a ne a se teng. Ba ne ba rutiwa molao kwa lebollong, e bile go ne go se na ditokelo tsa gore a o a rata go ya kgotsa nnyaa.

Rama: La ntlha mam, TV e ne e seo. Batho ba kgale ba ne ba utlwelela radio ka jalo, ba ne ba se 'close' thata le basetsana, jaanong rona re 'close' thata le bona, re lebelela di 'soapie' tse di nang le 'sex' mo TV, so go fedisa dilo tse, batsadi ba tshwanetse go monitara thata diporagerama tse basha ba tshwanetseng go di lebelela.

Bona: Di 'riks' tse di ka fedisiwa gape ka gore e--- mam---, 'like' go oketswa ditori tsa thoballano mo TV gore kwa bofelong bana ba bone gore fa o dira jaana, pheletso e tla nna se.

INTERVIEWS WITH FEMALES ONLY

Interviews lasted for 45 minutes.

Interviewer: Go ya ka lona 'risky sexual behaviours ke eng?

Mane: 'It is like' mo lapeng batsadi ba tlhokofetse and wena o batla chelete, o ka feletsa o ya kwa thobalanong gore o bone chelete ya 'carry' le go thusa bonnakaago.

Kele: Le nna ke dumellana le yona, e ntse fela jalo mara go na le ba bangwe ba ba dirang fela 'irrespective' ya gore batsadi ba teng kgotsa ga ba teng, ba e dira 'for fun' go sena sepe se se ba pushing go dira jalo.

Dina: Bangwe ba dirwa ke dichomi, chomi e tlabe e mo raya e re nna ke ya go thuba bo 'virgin' le ena a be a wela 'maybe' ena a be a nna 'pregnant', a be a re o dira 'abortion' le yona ebe e gana, mo gongwe gape a ka nna a kereya malwetsi a thobalano jaaka di STI le HIV.

Kele: Basha ba bangwe mma, ba dirwa ke tshutshumetso ya bojalwa, 'for example', re tla be re ile go nwa kwa sepotong e be e re fa re boa, chomi e ngwe ya rona e be e reipiwa.

Mane: Ba bangwe bona mam, ba dirwa ke 'stress', if o na le 'stress' o tla re a ke ye go reka bojalwa go se fedisa, o be o ya taveneng, o be o tlhapelwa, o sa ipone, monna a ka nna a go tsaya a be a ya go go reipa.

Tshoki: Nako e ngwe m.... ke thobile kwa gae, ga ke a laela, ke tswile ka fensetere ke ya taveneng ke nosiwa ke ntate wa lapa bojalwa, ga a fetsa o a nthobala.

Kele: Rona basha ga re sa tlhole re cheka gore re jola le bo mang, le 'age' efe, re ipatlela chelete fela.

Bony: Le fa o ka raya mosha wa re se robale le ntate yo motona, a ka se go utlwele, 'and sometimes' ba roballana le bontataabona fa bo mmaabona ba ba botsa gore o imisitswe ke mang, motho wa ten gag a bue.

Mane: Fa ke imisitwe ke papa ke tla be ke tshaba go bua gonne papa ka gongwe, o tla be a ntshoseditse gore fa nka bua o tlile go mpolaya kgotsa a ka se tlhole a mpha chelete gonne basha ba ka jeno re lebeletse chelete

Tshoki: Kwa gae le bona ga ke sets eke imile, ba tlile go fitlha gore ke imisitswe ke papa. Fa e le gore go nale mosimane o ke nnang le ena, ke tlile go pateletswe ena, ntswa e le papa.

Interviewer: Ntate kana 'stepfather' o a bo a rotloetswa ke eng go robala le ngwana wa gagwe?

Lorna: 'Like stepfather, neh mam, o tla be a lebeletse gore ga se ngwanake, fa nka mo fa chelete, ka mo raya ka re ke tla go direla sengwe le sengwe, o tla dumela.

Bony: Kele: Le rona banyana ga re apare, o fitlhele monyana a apere g-string ka short e tshweu kgotsa a e...apere stofi or 'jean; fela ya 'sbon-out', maybe a sa apara le 'panty', so fa antes a tsamaya, basimane bona ba bona marago, so mosimane ena o tla be a go lata a gogelwa ke 'the way' o apereng ka teng.

Tshoki: Rona basha ga re a tshwanela go nna le bo ntate b aba bagolo gonne fa o nna le motho yo motona, ga o itse gore kgwedi e fedile o tla be o ya taveneng gore a go fe chelete, so ena o tlile go lebelela leng lelapa la gagwe.Fa mosadi wa ntate oo, a se na go itse lelapa le a thubega.

Dina: 'Sometimes' o tsamamya le dichomi mam, tse di jolang wena o sa jole, so ba tlile go go rotloetsa gore o jole, fa o se na go nna mo dipharagobeng e be ba go tshega.

Nene: 'Sometimes' banyana ba rata go ya taveneng ba se na chelete, so ba kopana le bo ntate ba ba tona koo, e be ba ba rekela dibiri 'and' bontate bao e be ba batla gore ba ba direla 'something in return jaaka go robala le bona.

Interviewer: Naare basha ba batlang kwa taveneng?

Kele: Basha ba bantsi ba ya wa taveneng gonne ba ipolelella gore mapodisa ga a tsene mo taveneng, ba nna kwa ntle 'and' le bona basha ga ba tsweke kwa ntle

ka dibiri 'and' go na le this thing ya gore k abo 'September' le bo 'December' go batliwa chelete mo batsading go iwa kwa diphakeng ka di 'cab', go nowa majalwa, fa go buiwa koo ga go iwe gae, go lalwa nageng.

Tshoki: Le ntwa ya batsadi mam, fa batsadi ba lwa, ba tupana everyday, o ka bona gore o e tsamaela o ye go robal kwa nageng.

Kele: Nna fa batsadi ba lwa, ke a tsamaya ke ile go nna kwa 'next door', fale ke a ipoela ga ke botse le gore ba lwelang, so nna ga ke bone go le botlhokwa gore fa batsadi ba lwa, ke ye kwaabo 'boyfriend'.

Interviewer: Go bontsha le na 'information ka thobalano le bojalwa, jaanong ke eng se se le susumetsang go di dira?

Bony: Re susumetswa ke dichomi mam, fa chomi e nwa 'and' e fiwa chelete e tlile go go tsaya kwa yeno e ile go go nosa 'at the end' o go tlela ka chomi ya 'boyfriend' ya gagwe o a go phasetsa, mo bofelong.

Lorna: 'At the end' nka nna ka ima, chomi e be e tswa mo go nna ka fa a tsamaya a ntsheba le go ntsotla gore ke ne he rata basimane,

Nene: 'Sometimes' o le monyana o ka reipowa ke moyho yo batsadi a mo itseng le go mo tshepa, o be o tshaba go bolelela batsadi ba gago a sa itse gore o tla ba raya wa reng, le gore a ba tlile go go dumela.

Bony: Go na le basetsana ba e leng gore ban a le di 'boyfriend' tse dintsi, o fitlhela a le 'pregnant' mme a sa itse gore o imisitswe ke e fe. A be a ba tshwarisa di 'hand ball' ba botlhe, yo o dumelang e tla be e le yo o sa tlhaloganyeng.

Tshoki: Ba bangwe mma, ba kopana le banna kwa di taveneng, fa a se na go tlhapelwa a sa itse gore o ne a robetse le mang a be a re o reipilwe.

Kele:'Sometimes' chomi ya 'boyfriend' e ka go rata mme a sa iste gore o tla buang jang le wena, si fa a go kereya kwa taveneng o tlhapetswe, a ka simolola go go proposa, a ba a feletsa a ya le wena kwaabo a be o robala le ena. Interviewer: Ditlamorago tsa go ima ke dife 'and' fa mosha a imile seo se ka mo

tsaya jang?

Mane: Selo seo se ka se mot see pila, o tlile go tlhabiwa ke kgala, a ka se tlhole

a tshepa 'especially if' o ne a reipilwe, o tlile go tshaba go ya kwa bathong o ka

re ba a itse gore go diragetse eng ntswa ba sa itse.

Lorna: 'Sometimes' o tlile go didimala ka gongwe a le 'HIV-positive' kgotsa a le

'pregnant', mpa yona e ntse e gola kafa mme a tshaba goya tliliniking.

Tshoki: Ba bangwe ba basetsana mma, ba robala le basimane ba dumellane, ka

moso a be a di fetola are o mo reipile.

Interviewer: Fa mosha a le moimana, seo se ka ama jang dithuto tsa gagwe?

Kele: Ga go 'sharp' gore mosha a tla sekolong a imile gonne o tlile go re robatsa

'and' re ka se kgone go utlwelela re otsela, 'and' le nna ke tlile go nagana gore

ken a le 'problem' mme e seo, e le ena a dirang gore ke robale.

Tshoki: Seo se ka ama dithuto tsa gagwe, a ka se kgone go utlwelela mo

tlelaseng, o tla be a nagana fela ka ngwana gore o tlile go dira jang ka ena fa a

fetsa go mo tshola, di leiri di tlile go rekwa ke mang.

Mane: Mo bofelong a ka feleletsa a nagana go ntsha mpa, a tlhakanya di 'ino' le

di 'stameta' gonne a setse a bone gore 'future' ya gagwe e letobo.

Nene: Nako e ngwe o imile, fa o bolelela 'boyfriend' gore o batla go ntsha mpa.

O tla be a re 'no jo' se dire jalo, ke tla 'riska ;ife' yaka , ka tlogela sekolo go

godisa ngwana yoo, fa ngwana a sena go tholwa o a go tlogela.

Kele: 'Sometimes' o tla be o le 'pregnnant', o be o bolelela 'boyfriend' ya gago,

fa a tsena kwa sekolong 'topic' ke wena, hee--- a re nna ke mo imisitse 'and'

ngwana oo ga se waka, le wena o feletsa o tlhabiwa ke kgala go tla sekolong,

'future' yona e a senyega.

Interviewer: 'Risk' ya go nths mpa ke efe?

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Lorna: O ka swa, 'like' o dira 'abortion' o le '5 months pregnant' and gape go ipolaya wena ka mo gare gonne ga o itse gore di tlamorago tsa di 'stameta' tseo ke eng mo mmeleng wag ago.

Dina: Nna ga ke gane gore fa disharakane, motho a ka tshepa 'abortion', bothata ke gore jaanong fa o gola, o tsene mo lenyalong o batla ngwana o sa kgone go mo kereya gonne o gobetse ka mo gare kgotsa e ne e le lona fela lee le modimo a le go fileng.

Bony: Fa o le 'pregnant', mo itshokele ngwana oo gonne ke wena o mob a tlileng, ka gongwe e tla re fa a se na go belegwa, o be o boela gape kwa sekolong.

Nene: Ngwana ke 'gift' e e tswang kwa go Modimo, fa o imile amogela ngwana oo gonne ga o na phoso, o seka wa utlwelela batho ba ba reng ntsha mpa, bolelela batsadi ba gago ka mpa eo gore o bone 'support'.

Mane: Batsadi ba bangwe ke bona b aba tlhotlheletsang bana gonne fa bgwana a se na go bolelella motsadi gore o imile, o tla be a mo raya a re ga ke a go roma gore o ye go dira dilo tseo, so nna ke le ngwana ke feleletsa ke tlogela sekolo, ke ile go itunna kwaabo 'boyfriend'.

Tshoki: 'Sometimes' batsadi ba bangwe ga ba bereki, fa o tswa sekolong o fitlhela a sa dira sepe, ntlo e le maswe, e tlhakatlhakane, o tshwanetse o bereke, ka fe ena o a go roga, seo se dira gore o fleets o ngadile fa gae, o nna 'engaged in risky sexual behaviours' jaaka go nwa bojajwa 'especially if' motsadi a go raya a re o sefebe, o ka re o ka ima,

Interviewer: Ke go reng o tsaya 'decion' ya go ima ntswa re na le 'LO educators' kwa dikolong le di 'social worker?

Nene: Re tshaba go bolelelal 'matichere' a rona 'that is why ' re dira dili tse ditlhatlhakaneng re re ntsha 'stress'. 'Sometimes' o nagana gore fa o ka bolelel 'tichere', o tla be a go lebeleletse dilo tse o di dirang fa o le mo tlelaseng.

Bony: 'Tichere'yo mongwe o a mo tshepa mara o tla be o tshaba go mmolelelal gonne o rata go omanya, so o tlile go tshwara 'secret' tsa gago mo go wenw 'and' seo se tlile go go tshwenya mo dithutong tsa gago.

Interviewer: Nnare o tshaba eng go bolelelal 'tichere' gonne o kgona go bona fa o na le mathata, a be a go lata?

Tshoki: 'Sometimes' o tshaba gore 'tichere' mo tlelaseng o tla be a latlhela sekempe gore kana bangwe ba dira jaana le jaana.

Interviewer: Ke go reng Iona basha le sa 'stick' mo go molekane a le mongwe?

Nene: Bothata ke gore rona banyana mam, ga re tshepe basimane, o fitlhela o na le boyfriend a na le founu tse pedi, a go raya a re e ngwe o founela bo mmaagwe ka yona, mme fa o re tla ke e bone a gana ka yona. Seo se tlile go dira gore le nna ke battle motho, ke mmontshe gore le nna ke kgona go 'cheater' ga ke setlaela.

Interviewer: Ditlamorago tsa go nna le balekane ba le bantsi ke di fe?

Lorna: Nna mam, ke nagana gore lebaka le le tona ke gore ga re tshepane, gape ra re motho ga a tshwanela go tsamaya ka leoto le le lengwe gonne o na le maoto a mabedi 'and' di tlamorago tsa teng ke gore o ka feletsa o tshwerwe ke malwetse a thobalano.