

**ATTITUDES AND PERCEPTIONS OF GIRLS IN ST JOHN 'S COLLEGE ABOUT
THE PRACTICE OF VIRGINITY TESTING**

BY

ZOLISA CYNTHIA SWAARTBOOI-XABADIYA

**SUBMITTED TO UNIVERSITY OF LIMPOPO
FACULTY OF HEALTH SCIENCE, MEDUNSA CAMPUS
SCHOOL OF PUBLIC HEALTH**

**IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF
MASTER OF PUBLIC HEALTH**

SUPERVISOR: MS SPHIWE MADIBA

2010

Declaration

I declare that the research project on attitudes and perceptions of girls in St John's College about the practice of virginity testing is my original work that I completed in partial fulfillment of Masters in Public Health degree with the University of Limpopo (Medunsa Campus). All the work that has been taken from previous research and other sources has been correctly and completely referenced.

Z C SWAARTBOOI (Ms)**Date**

Acknowledgements

Firstly, I want to thank the Lord, Almighty for who I am, the courage and strength He has afforded me to get to where I am.

My late parents Nokwanda Vuyelwa and Richmond Sandla Swartbooi, who had throughout my life, encouraged me to live to the best of my abilities. My husband, Pakamisa Xabadiya for the unconditional love and support from the day we met.... Thank you so much Zibula. My kids, Siyasanga, Awonke and Lomso , for understanding when I had to take time off the motherly duties and focus on my studies.

My sincere gratitude goes to my supervisor, Ms Sphiwe Madiba for her support throughout this research project – “Ntinga Ntakandini”. My friend, Mzikazi Nduna for unconditionally giving up all her time to offer assistance whenever I called for it – “Nangamso sihlobo”

I am also grateful for the support that I have received from my siblings, Lwandlekazi, Zola, Malwandle, Sakhile, Olga, Machule, and Ncikazi.

My colleagues in the Masters in Public Health, Sizeka Monakali and Thobeka Lebenya who have always given me peer support and served as a reminder that work needed to be done.

I give sincere thanks to the Eastern Cape Socio Economic Consultative Council (ECSECC) management for giving me time and financial support and work to pursue my academic career.

I would like to acknowledge with thanks teachers at St Johns College who participated in this study volunteering their time and knowledge, without whom this data could not have been collected.

Dedication

I dedicate this work to all the selfless women and men who are working tirelessly to curb the spread of HIV in the Eastern Cape.

Abstract

Background

Virginity testing is a practice that has stimulated lots of discussions amongst people from various perspectives. Controversies around this practice have necessitated further research in order to bring the voice of girls into the virginity testing debate.

Aim and objective

The aim of the study was to explore perceptions and experiences of girls on the practice of virginity testing.

Methodology

Triangulation of qualitative data collective method was used. The researcher informally engaged in key informants' interviews with stakeholders who participate in the practice attended virginity testing celebration to observe the proceedings and processes conducted during the practice. Focus group discussions were conducted. Data was analyzed using NVIVO.

Results

Elders, in particular mothers, encouraged participation of girls in virginity testing. Girls observed and sighted benefits, ranging from viz: HIV/STI prevention, societal recognition and acceptance, purity before marriage and delay of sexual debut. Non participation was attributed to the in availability of virginity testing practices the areas. Concerns of doggy behaviors by testers, uneducated testers of testers, compromised health standards were discussed.

Conclusions

These findings reveal that there are areas of misunderstanding on how the practice is viewed and represented in the media. Arguments against virginity testing seem to be based on the perspective of on Westernized, feminist and individualistic notions of humanity disregarding the social construction of traditional cultural practices. Socialization and moral standards of people from a particularly Western orientation dominate the debate against virginity testing with no basis that is supported by research.

Table of Contents

Acknowledgements.....	3
Table of Contents	6
Chapter One: Introduction, aims, and justification.....	9
1.1 Introduction	9
1.2. Origin of virginity testing.....	11
1.3. Problem of the study	14
1.4. Aim of study.....	15
1.5. Research Question.....	15
1.6. Study objectives	15
1.7. Study Justification	15
Chapter Two: Literature Review	17
Chapter Three: Materials and Methods	24
3.1 Study Design	24
3.2 Study site	24
3.3 Recruitment and Sampling.....	25
3.4 Study Participants.....	25
3.5 Data collection.....	26
3.6 Validity and Reliability	27
3.7 Bias.....	28
3.8 Data Analysis	28

3.9	Ethics	28
Chapter Four: Findings		30
4.1.	Introduction	30
4.2.	Description of participants	30
4.3.	Participation in virginity testing	32
4.4.	Themes	34
4.4.1	The context of virginity testing	34
4.4.2	Free choice	36
4.4.3	Learning about virginity testing	38
4.4.6	Perceptions on virginity testing	40
4.4.7	Benefits of virginity testing	41
4.4.8.	Involving boys in virginity testing	43
4.4.10	Ideal virginity testing	47
4.4.14	Summary	48
Chapter Five: Discussions, conclusions and recommendations		49
5.1.	Description of participants.....	49
5.2.	The context of virginity testing	49
5.3	Learning about virginity testing	50
5.5	Reasons for participation and non participation	52
5.6	Earning respect	52
5.7	Prevention.....	53

5.8	Non participation	54
5.9	Virginity Results.....	55
5.10	Conclusion.....	58
Appendice 2	Permission letter	62
Appendice 3	64
Interview Guide	64
Appendices 4	66

Chapter One: Introduction, aims, and justification

1.1 Introduction

The OR Tambo district municipality was among the first municipalities to launch revitalization of virginity testing as a practice among the Xhosa nation. OR Tambo municipal area has a total of 93% of the population residing in rural areas while an estimated 90% of the population is unemployed. According to the Department of Health Antenatal survey, OR Tambo has 27.9 % in HIV prevalence with makes it the second highest district in the province. High HIV prevalence rate in OR Tambo compared to the ‘urban’ district municipalities could be attributed to the fact that it is rural and many people are unemployed. The evidence in the relationship between rural setting and HIV is found in the study conducted in the Eastern Cape that shows that levels of sexual frequency in rural and informal areas are higher than in formal housing areas and also among adolescents living in poorer socio-economic circumstances (Kelly, 2005).

OR Tambo is a home for various ethnic groups i.e. Amampondo, amaMpondomise and ama Bomvana. However, Amampondo is the largest group and a traditional community that takes pride in their culture. This is evident in that there are various cultural practices and activities in area, like virginity testing. Cultural beliefs and values are still upheld in OR Tambo and the Eastern Cape in general. The study conducted to evaluate HIV/AIDS baseline in the Eastern Cape schools shows that constraints and stigma appear to have impacted on HIV/AIDS education in most schools in the province. For an example: Parents feel that talking to their children about sex and sexuality means encouraging them to have sex. However the role of family is very important during adolescence. The concept of self related to family as a social system with reciprocal relationship and alliances are constantly evolving. Families socialize adolescents to acquire the beliefs, values and behaviors deemed significantly appropriate by the society.

Virginity testing therefore comes in as a community practice, supported by families, and institutionalized and a public health response to HIV. It is mainly targeting girls on the adolescent and youth stage to prevent sexual debut and or pre marital sex.

Generally, adolescence is defined as the period between childhood and adulthood, with no consensus of the age in years that marks the period (Shaffer, 2002). Some societies have neither the age set to define adolescence. The South African Department of Health Policy guidelines for Child Adolescent Mental Health and Youth and Adolescents Health, considers adolescents to fall within the age group 10-19 years and youth 20 -24 (National Department of Health, 2008). In some cases adolescents are identified by school grade level, values, modes of dress, social behavior, cultural experience and roles within the households (Santrock, 1992). Despite the differences in defining adolescents in the aspect of virginity testing, the South African government has legislated virginity testing as a practice to be only conducted to girls over the age of 16 years (Children's Act, 2005).

The Children's Acts on this issue does not seem to be informed by the research finding because the study conducted by Kelly et.al (2005) shows that the mean age for sexual debut among young people is reported to be between ages of 13-16 years (Makiwane M et al; 2008). In the survey that included six provinces 90 % of females and 97 % of males had had sex in the Eastern Cape. This was the highest number compared to Gauteng and Northern Cape provinces with 23 % and 88 % respectively for females and 38 % and 88 % for females. A big difference between girls and their first sexual partners is common in poorer communities. For example in the six province's study 20 % of girls in the Eastern Cape reported to have had sex at the age of 14 or lower with a partner who was three or more years older, this was higher than Northern and KwaZulu Natal provinces whose prevalence for early sexual debut with older partner was older partner was 3% and 16% respectively (Kelly, 2002).

From the above, the Eastern Cape is one of the provinces where sexual debut is rife at an early age. According to proponents of virginity testing in the area, it has come as a community response to HIV pandemic (personal communication, 2006).

Current statistics show that South Africa has the sixth highest prevalence rate of HIV in the world, with the disproportionate share of those infected being young women and girls (UNAIDS; 2007). The infection rate is higher among younger females compared to males of the same age group (UNAIDS/WHO, 2009). Risky behaviors that drive the HIV epidemic among young people in the general population are unsafe sex, transactional sex, and polygamous partnerships (Jewkes et. al, 2006). One of the key focuses of the South African government, NGOs and other stakeholders in the fight against HIV, is on young people.

Young people often have power and access to diverse information and services provided by different statutory provisions but they frequently lack the ability to access these services. The Reproductive Health Acts make youth eligible for services such as family planning, termination of pregnancy and access to condoms with no restriction or need for parental or partner approval. Young people from all over the world, especially women ‘feel embarrassed’ to access health services. The social and cultural milieu often hinders children’s access as at times parent’s disapproving attitudes or service providers make it difficult (Dasen, 2000). Secondly, the socio-economic role of young people in their households influence how they negotiate being young in their families (Elam, 1975). For example a young person who is fully dependent on parents would do anything to ‘please’ his/her parents including participating in the practices that are approved by parents, hiding the fact that they are sexually active etc.

1.2. Origin of virginity testing

From informal discussions with stakeholders, the researcher learned that the term virginity testing misleads the public and people who are not involved in the practice and this contributes to the negative perceptions on virginity testing. Virginity testing is translated to ‘ukuvavanywa kobuntombi’ which implies that there is some ‘fiddling’ with the girls’ genitals whereas the reality of the matter is that girls inspected and therefore the practice should be called virginity inspection, which is directly translated to ‘ukuhlolwa kwentombi’. Secondly, the researcher was able to understand cultural attachment that the communities and the stakeholders have to this practice. For example virginity testing is referred to as “inkciyo”, which is a traditional garment that was used by Xhosa girls many years ago. This garment was used to cover girls genitals.

Reverting back to virginity testing as a practice is seen as a way of protecting girls' genitals. (Informal communication with key stakeholders)

Traditionally, virginity testing is a practice that could be traced back to the socialization of African people (Personal communication, Prince Ncamashe, 2006). It was intended to assure the purity of young brides who were to prove their pureness before their parents and future in-laws (Singer, 2003). This was used for reaching consensus on an amount of bride price to be transferred by the groom's family to the bride's family (Lerlec-Madlala, 2002). Virginity is seen by the presence of hymen in the girls' vagina whereas its absence means non virginity (Singer, 2003). Traditionally, the testing practice was done by the girl's mother or community matriarch (Personal communication, 2006). According to Suzanne Leclerc-Madlala (2002) "assessment (concerning virginity) is derived from indigenous rather than biological knowledge". And therefore one has to be acquainted in the metaphorical language used in the folk description of the human body and bodily processes because the standards used by the testers are not grounded in the biomedical science.

As time went by this practice was tainted by other development like Christianity and education. Virginity testing as a cultural practice, has been under severe attack from the influence of the Western cultural perspectives of has brought gender, human and children's rights (Singer, 2002). These have introduced new dimensions to the practice hence the mixed reaction from different groups who put a lot of lobby and advocacy against the practice.

However, confidence that virginity testing provides solution to HIV pandemic is shared across various levels of society, and it is for this reason that the cultural activists, political figures and other stakeholders in the society throw their weight behind the practice (Commission on Gender Equality, Report 5).

Virginity testing as a practice evolved, and it incorporates the elements of Western culture and education. Nowadays, some testers have imported the use of letter grades into their practice. An "A" is given to a girl who rates highly in all assessments associated with virginity testing. A "B" grade virgin may have had intercourse once or twice or may have been abuses. A "C" means a dismal fail to the test (Scourgie 2003). Some put plastic gloves during testing to guard against Sexually Transmitted Infections and other infections (Personal communication, 2006). However

looking at the girls' vagina is not the only way of conducting virginity testing. Testers according to Leclerc-Madlala determine a virgin by a visible 'white dot' deep in the vaginal canal, eyes must 'look innocent' and there should be a 'firm and taut' breast and the muscle behind the knees should be tight and straight.

Reiterating the issue of HIV prevention Leclerc-Madlala, (2002) shares the sentiment that the resuscitation of virginity practice in KwaZulu Natal is as a result of an alarming rate of HIV in the country. On the basis of this argument virginity testing is a prevention strategy to HIV it has helped as a form of social control to instill the value of premarital chastity and that its emphasis on total abstinence from sexual intercourse by girls, the practice is being revived to prevent HIV infection, to detect incest and abuse, and to re-instill and promote lost cultural values (George, 2007).

Proponents of virginity testing now maintain that with its emphasis on total abstinence from sexual intercourse by girls, the practice is being revived to prevent HIV infection, to detect incest and abuse, and to re-instill and promote lost cultural values (George, 2007). Traditionalists in the Province view the revival of virginity testing as a signal of going back to basics and it enjoy a lot of support from those communities that practice it. Reiterating the issue of HIV prevention Leclerc-Madlala, (2001) shares the sentiment that the resuscitation of virginity practice in KwaZulu Natal is as a result of an alarming rate of HIV in the country. Singer (2002) also views virginity testing as a South African battle against HIV/AIDS.

This is the argument put forward by OR Tambo executive mayor adopted virginity testing, Ms Zoleka Capa that it is their key prevention strategies to HIV. In the communities each virgin is seen as a small victory in the fight against HIV. In the communities each virgin is seen as a small victory in the fight against HIV (Singer, 2002). In OR Tambo all the local municipalities under have their Inkciyo co-ordinators and there are "testers" in all the wards that have the program (Daily Dispatch newspaper, August 5, 2005). Further engagements with the District AIDS Council coordinator, shows that inkciyo has been one of the OR Tambo District AIDS Council (DAC) flagship projects (Personal communication). *Inkciyo* enjoys financial support from the O

R Tambo district municipality even though opposition parties in the municipality believe the program is a vehicle for a few to defraud the municipality.

However weaknesses on virginity testing have been identified by some academics, activists and interest groups. Amongst the arguments put forward is that it places the responsibility of preventing HIV on women and girls whereas the responsibility of preventing HIV lies on both men and women. Again, that virginity testing increases young women's risk of infection because it restricts the ability of young women to ask for information on sexuality out of fear that they will be thought to be sexually active.

The national assembly of South Africa amended the Children's Rights Bill and resolved that virginity testing would not be banned, but should only be conducted to children over the age of sixteen years (Children's Act, 2005). It further states those who participate should give consent with understanding of the practice and the hygienic principles and practices followed. Even though the Children's Rights Act was amended to accommodate virginity testing there is no overarching governmental cultural organization controlling or coordinating virginity testing (George, 2007).

In the interview with the local newspaper, Daily Dispatch OR Tambo mayor Zoleka Capa defended the programme, challenging Parliament to come up with alternatives if virginity testing is stopped (Daily Dispatch, August 5, 2005).

The girls from the O R Tambo District Municipality also condemned the Bill on the grounds that it prohibited the practice of an important cultural tradition and imposed a Eurocentric value system on an indigenous custom. The girls stated that they were willing participants and proud of their cultural heritage. They reiterated that virginity testing protected them from sexually-transmitted diseases and unwanted pregnancies, and affirmed their self-respect.

1.3. Problem of the study

Virginity testing has come under fire from different groups throughout the world. Debates around this practice argue that the rights of the girl child are violated as there is a belief that they are vulnerable or even coerced into virginity testing. Some cite social, cultural and economic factors that are pulling the young women to virginity testing. Proponents of the custom view

virginity as a way in which people are connecting back to their original practices and argue that girls and young women who practice do so voluntarily. However not enough attention is being paid to the burden put on the children undergoing virginity testing, and the emotional consequences for those who failed the examination. Having outlined different arguments above it should be noted that all the arguments and data is from civil and nongovernmental organizations and the adult community, there is limited data on the views and perceptions of youth (both girls and boys) about the practice. It is hoped that this study will fill the gap in literature. The study is conducted at the critical time when the South African National AIDS Council (SANAC) is in consideration of supporting the traditional responses and initiatives to HIV.

1.4. Aim of study

The study explored and described attitudes and perceptions and experiences of girls attending St John's College about the practice of virginity testing.

1.5. Research Question

The research question that the study sought to address was:

- What are the attitudes and perceptions of girls in St Johns' College about virginity testing practice?
- What are girls' experiences with virginity testing?

1.6. Study objectives

The objective of the study was:

- To explore the attitudes and perceptions of girls about the practice of virginity testing
- Explore the experience of girls who have undergone virginity testing

1.7. Study Justification

Virginity testing has come under fire from different groups throughout the world. Debates around this practice argue that the rights of the girl child are violated as there is a belief that they are vulnerable or even coerced into virginity testing. Some believe that there are social, cultural and economic factors that are pulling the young women to virginity testing. There is limited

literature on the views and perceptions of girls about the practice. The study explored perceptions and attitudes of girls on virginity testing so as to bridge the existing gap in the literature where there are little covers about the perception and attitudes of girls on the practice. The research will also add to the body of knowledge in the existing literature about virginity testing. The findings of this study could be useful to the department of education in enhancing their policy on sexual abstinence on the school going youth. They could also inform the South African government in its expedition to get traditional solution to HIV.

Virginity testing enjoys the distinction of being the most popular and politically charged public health initiative in South Africa's battle against the pandemic (Singer, 2003). OR Tambo district municipality is one of the areas where virginity testing enjoys this kind of support.

Its findings will also be shared with the Eastern Cape AIDS Council (ECAC), and the Eastern Cape Department of Education (ECDoE) to perhaps use it as the basis for further research, as the sample would not be representative of the Eastern Cape.

Chapter Two: Literature Review

This chapter introduces the reemergence of *Virginity testing* as a cultural practice that has been revived as a health intervention for prevention of teenage pregnancy and HIV infection. In this chapter a critical analysis of literature has been provided to provide the reader with in depth understanding of arguments put forth by the proponents and opponents of *Virginity testing* as a practice. This is drawn from different disciplines ranging from human rights, gender, anthropological and sociological and public health perspectives.

A recent study conducted by Human Sciences Research Council reported the increase of HIV infection amongst young people in KwaZulu Natal and the Eastern Cape which are the two provinces where virginity testing is now performed. The issue of whether virginity testing is an effective method of HIV prevention comes under scrutiny from opponents, like Dr. Scorgie (2005) of the centre of HIV and AIDS Networking at the University of KwaZulu-Natal, is arguing that virginity testing has failed in many levels to reduce HIV and the high levels of gender violence in the country.

Current statistics show that South Africa has the sixth highest prevalence rate of HIV in the world, with the disproportionate share of those infected being young women and girls. Females aged 15 – 24 are four times more likely to be infected with HIV than men (UNAIDS; Epi Report 2006). Studies conducted in South Africa have found that present day teenagers are having sex at an earlier age. Kelly (2005) noted that higher levels of sexual frequency are found in rural and informal areas than formal housing areas and also amongst adolescents living in the poorer socio economic circumstances. The recent study by the Human Sciences Research on household survey show an increase in HIV prevalence amongst young people in the Eastern Cape (Shisano et.al, 2009)

As a result of the devastation brought by AIDS pandemic, virginity testing enjoys the distinction of being the most popular and politically charged public health initiative in South Africa's battle against the pandemic (Singer, 2003). The national assembly of South Africa amended the Children's Rights Bill and resolved that virginity testing would not be banned, hence the Act

stresses that children have to be sixteen years of an age when they consent with understanding of the practice and the hygienic principles and practices followed. Even though the Children's Rights Act was amended to accommodate virginity testing there is no overarching governmental cultural organization controlling or coordinating virginity testing (George, 2007)

Although virginity testing enjoys popular support as a grassroots chastity movement it is vigorously opposed by some African feminists, AIDS activists and medical experts, arguing that the practice is unconstitutional, unhygienic, counterproductive and potentially dangerous in addition to violating the human rights of children (Children's Act, 2005)

At community level, villagers pat themselves as the each virgin is seen as a small victory in the country's battle with a virus that has by some estimates infected approximately 5.5 million of the country's 47 million people (UNAIDS/WHO, 2006). There are variations to the practice in terms of the place where testing takes place, for example George (2007) says that in some communities testing is performed at home with the child inspected in the presence of the mother whilst in other circumstances it is performed in the venue selected by communities.

Communities practice virginity testing under the ambit that the constitution of the Republic of South Africa 1996, Chapter 2, Section 31 states that:

- i. Persons belong to a cultural, religion, or linguistic community may not be denied the right to other members of that community
- ii. To enjoy their cultural practice their religion and use their language
- iii. To form, join an maintain cultural, religious and linguistic associations and other organs of the civil society

The age at which virginity testing is performed is one of the arguments against the practice, testing is alleged to be performed on girls between the ages of seven and eighteen years, and as Skhosana (2002) puts it, the test is supposedly voluntary but this is doubtful, if girls from seven years are tested then the child may not have a choice but may be under parental and societal pressure to undergo the test, a child at that age cannot possibly understand what virginity testing is all about, therefore possibility of actual consent is greatly reduced under these circumstances. Chris McGreal (2005) further argues for the legal age of consent for medical intervention is

fourteen years, suggesting that maybe this would be the right time to start the discussion on or to perform virginity testing.

A South African medical anthropologist, Suzanne Lelerc- Madlala argues differently to the medical perspective to virginity testing, stating that the basis for understanding virginity testing amongst Zulus is that one must be conversant in the metaphorical language used in the folk description of the human body and bodily processes because the qualities that testers look for as evidence of virginity are derived from folk constructs of the body and ethno-medical beliefs of health and illness (George, 2007).

“Virginity testing had been practiced for hundreds of years and those opposing the tradition, (which she likened to a religion) were adopting a colonialist mentality”, these were the views of Nomagugu Ngobese, an elderly woman who founded the Nomkhubulwane Culture and Girls Development Organization in Kwazulu-Natal, and is among those who strongly support the tradition. Dr Mkhabela-Castiano a former lecturer in indigenous knowledge systems highlighted that after falling into disuse, virginity testing made a comeback around 10 years ago when the HIV pandemic began to take hold. She argues that with all this attention, virginity testing had become commercialized and the essence of it has been lost.

Prince Langa Mavuso of the Eastern Cape House of Traditional Leaders is reported to have said that “the revival of virginity testing signals going back to basics” and therefore, doing away with this tradition would mean that the right to participate in the cultural practices of their choice and the right to enjoy one’s culture would be limited to those enjoying this cultural practice. (Children’s Institute, University of Cape Town, 2005)

Also, under the cultural ambit King Goodwill Zwelithini reiterated the need to preserve the cultural practices like virginity testing as it could be the solution for HIV and AIDS. (Sunday Tribune, September 9, 2007)

Contrary to Dr Scorgie’s argument that virginity testing puts the sex responsibility on women and not men, Chief Mangosuthu Buthelezi argues that traditionally it is elderly women who are in the forefront of ensuring young women control their sexual relationships and therefore urging them to perform virginity testing as well. (Sunday Tribune, August 13, 2006)

Failure to reduce HIV is not the only factor sighted by that not in favor of virginity testing as a practice, different arguments range from human rights, public health, religious, cultural and gender perspectives. Children's Institute's position on virginity testing is that it invades the child's physical space and therefore it is important that when the child is old enough, the child is given a choice as to whether or not s/he wants to participate in the practice

Gupta et.al (2003) argues that virginity testing should be viewed as a "*gendered response to a local disease experience that is fundamentally gendered in nature*", on the same breath cautioning that the interventions that seek to respond to the AIDS epidemic should do no harm but be gender sensitive. She argues that much as virginity testing is viewed as a preventive strategy that is harmful and not gender sensitive, as it violate the rights of a girl child. Virginity testing presents the following challenges for human rights, firstly, it highlights the persistent division between the competing normative orders of rights universalism and rights relativism, secondly, the relative silence about the unrealized rights to health in the debates about the testing ban speaks to the difficulty human rights discourse continues to have in dealing with issues concerning economic, social and cultural rights (George, 2007). In his article George argues that the debate on whether virginity testing should be abolished or accommodated was misguided and polarizing and increases the likelihood that the problem driving the testing renaissance – high rate of HIV infection amongst women and girls will remain unresolved. He further calls for an engagement on public discourse on the right to health and the ethical obligation of government at a minimum, provide accurate health information and adequate health services in a manner sensitive to and respectful of cultural differences.

In support of the argument put forward by George (2005), Ndlovu (2005) believes that virginity testing is not an effective way to encourage both boys and girls from indulging in sexual intercourse, which poses more risk of infection than vaginal sexual intercourse. She further argues, the girls their virginity status put them at risk of being married off to older men whose virginity status were not tested. Though the girl with a broken hymen is regarded as the one who suffer from the after effects of virginity testing, researchers also focus on the virgin girl, they argue that the testing ceremony also endanger the lives of young women certified to be virgins in that they sometimes become victims of rape and sought out by child rapists, this is mostly due to

the open announcements of the girl's virginity during the testing ceremony (Lenrec-Madlala 2001). Some South African researchers attribute the increase in sexual violence against young girls, presumed virgins, to a belief gaining credence in some communities that sexual intercourse with a virgin can "cleanse" HIV positive men or men with AIDS disease (Govender, 1999). However a recent study conducted by Jewkes, Sikweyiya, Dunkle and Morell (2009) did not find any association between the virginity myth belief and HIV positive status in men who have perpetrated rape.

On the argument that virginity testing is an HIV prevention strategy, Kinoki (2005) also highlights weakness in the practice itself as it places the responsibility of preventing HIV on women and girls whereas the responsibility of preventing HIV lies on both men and women.

Contrary to the view that virginity testing is a traditional method of preventing HIV, Gupta (2000) argues that virginity testing increasing young women's risk of infection because it restricts their ability of young women to ask for information on sexuality out of fear that they will be thought to be sexually active. To address claims of gender discrimination, some virginity testers have started to test boys as well even though this has come under fire from the medical fraternity that there are no scientific standard by which to ascertain whether a boy is a virgin or not (Mc Greal, 2009).

Those who view virginity testing from a human rights perspective are concerned about the potential invasion and violation of the constitutional rights of young women who are tested. This has been raised by Chapter 9 institutions that specifically deal with human and gender issues i.e. South African Human Rights Commission and the Commission for Gender Equity. The basis for their argument is that, virginity testing violates the right to equality and places the duty of being sexually responsible solely on a woman and that the practice is undignified. This view is also held by Whelem et al, (2000) who see virginity testing as pure violation of the girl's right to privacy and dignity because on discovering that the girl's hymen is broken during the testing ceremony leads to stigmatization and mocking, of importance is the fact that the stigmatization extend beyond the testing ceremony. Girls with broken hymens suffer humiliation even in light of medical evidence that a women's hymen can break accidentally and occasionally a girl is born without one (Commission for Gender Equity 2004). Also sharing the same sentiment Ndlovu

(2005) argues that, even though virginity testing is said to be voluntary, but parents under societal pressure may coerce or persuade their daughters to undergo the practice and girls who fail the test are often stigmatized by their families and the community for months or years, and their marital value falls.

Other opponents of virginity testing like Masimanyane Women Support Centre an East London based Anti women abuse organization and a Zimbabwean based, girl child organization criticized the practice and view it as 'terrible' and that it violates the girl integrity (Karombo, 2004).

The Commission for Gender Equity,(2004) views virginity testing as a practice that places a high premium on young women for marriage purpose, where in some cultures lack of virginity status affects the bride price (*bohali or lobola*). This implies that a women's reproductive capacity has a monetary value which has the effect of objectifying women Human rights activists see this as purely commercialization and exploitation of young women (Kinoti 2005). The children's institute, University of Cape Town, (2005) highlighted the fact that the majority of leaders who are opposing the ban on virginity testing are male traditional leaders. It may therefore be argued that, virginity testing is a cultural practice that promote and substantiate male domination and the subordination women

Dimension of commercialization and coercion were highlighted amongst the better know traditional testers in KwaZulu Natal, there seems to be fair degree of rivalry and jealousy with some testers attempting to undermine their rivals' reputation and limit their practices. Also there have been allegations of corruption amongst testers, where girls who have been pronounced virgins have given birth a few months later, indicate that they were pregnant at the time of the test (George, 2007). Opponents of the practice also argue that virginity testing is involuntary because young women who refuse testing are assumed to be non virgins and that brings shame and disgrace to their families. Most girls interviewed by researchers at a test in Mafakathini said they were sent by their mothers for testing (Daley, 2007). Girls who are not deemed virgins risk being ostracized by the community. Non participation to virginity testing could be translated to non virginity by community members, and therefore girls feel obliged to participate in the practice to avoid non discrimination and labeling within their communities.

Given the strong arguments on both proponent and opponents of virginity testing, South African government had to take a stand following the pressure from various groups, individuals and organizations. In 2003 public hearings on virginity testing were held. The Commission for Gender Equity also held a series of workshops on virginity testing with young women in KwaZulu – Natal. It was apparent from the workshops' findings that virginity testing was common and that it has been happening at a high rate. Workshop participants indicated that they have submitted to the test without cohesion. However some expressed opposing views on the authority of the testers saying that, not all young women who tested did understand what human rights are, and that the testers need training on human rights particularly on women and gender equity issues. (Interchurch coalition in Africa, Issue 43)

Much as the government has amended the Children's Act to accommodate virginity testing (Act No 38 of 2005) outlawing the participation of girls below the age of sixteen years, thousands of girls below this age participate in virginity testing. The Sunday Tribune (September 9, 2007) quoted one of the testers from Richards Bay saying that they are testing girls as young as 12 years old. According to Social Development Director of external communications, Mr Kgati Sathekge, there are no regulations in place, and as soon as that is in place, those who do not comply will be dealt with in terms of Section 305 (1) (a), which deals with offences and penalties (The Mercury, September 12, 2008)

There is a short fall in government's ability to monitor traditional practices. For example with the legal initiation schools, legislation has not curbed illegal circumcision amongst boys who want to go to these schools. For the simple reason that government is not visible in the communities where the practices take place.

In a way to counteract the hygiene aspect in the practice, the provincial health department of KwaZulu Natal, though it is not officially advocating for virginity testing, it is reported to be actively involved in assuring that proper health precautions are taken during genital inspection by providing rubber gloves for testers and facilitating workshops to educate testers about female reproductive anatomy (George, 2007).

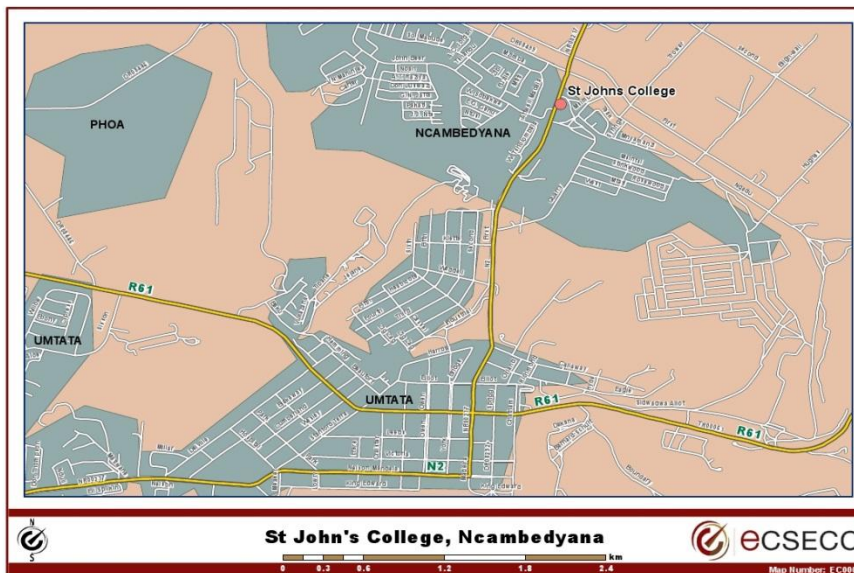
Chapter Three: Materials and Methods

This chapter focuses on the data collection approach that has been used in this study. It presents a summary of the characteristics of the participants, description of the study site. In this chapter a summary of the material and the approach used to ensure validity and reliability of the data is explained. Ethical considerations are also included in this chapter.

3.1 Study Design

This was a qualitative study that used three methods of investigation, all based on the interpretive paradigm. To lay the ground and understand the phenomenon better, the researcher first attended one of the virginity testing celebrations to get a sense of what *inkciyo* involves. Secondly, informal discussions with key informants and stakeholders who come from this area was conducted, these were testers, *inkciyo* girls, traditional leaders and colleagues in the field. Information gathered here was used to inform the selection of the site and the design of the interview guide. This was three months ahead of data collection. Thirdly, face to face focus group discussions were held at St John's College.

3.2 Study site



Above is the map of the site on which the study was conducted.

The study on attitudes and perceptions of girls on virginity testing was conducted in St John's College, a high school situated in Mthathain the King Sabata Dalindyebo municipality.

SJC was established by in 1879 by the missionaries who resided in the Mthatha area at the time. It is a residential high school, but accommodates day scholars as well. It attracts learners from various areas of in the OR Tambo district municipality because of its high education standards. According to its headmaster, Mr Z Magaqa is amongst the best performing schools in the area, with an average of 90 % Matric pass rate.

Different government administration has put Mthatha under different areas and names. During apartheid Mthatha fell under the jurisdiction of Transkei homeland area of the Eastern Cape Province. The post apartheid South Africa has demarcated Mthatha to fall under King Sabata Dalindyebo municipality which forms part of OR Tambo district municipality. OR Tambo is the poorest node located on the north- eastern side of the Eastern Cape. The population of the O R Tambo District Municipality stands at 1, 740 664 persons, with 306 463 households and an average family size of 5.2. A total of 93% of the District Municipality's population reside in rural areas while an estimated 90% of the population is unemployed.

3.3 Recruitment and Sampling

Girls were recruited from grades 10 to 12, as most learners aged 16 years and above are in these grades. The targeted learners (grade 10 – 12 girls) were invited to the school hall. The researcher and her assistant introduced the study to the learners. The learners showed a lot of interest in participating in the study, but the researcher explained that she only has to interview forty (48) participants and could not accommodate all those interested.

3.4 Study Participants

The participants in the study were learners aged sixteen years and above who have enrolled for 2009 academic year at St Johns' College. Learners below 16 years of age were deliberately excluded from the study, as the law prohibits participation of girls under the age of 16 in *Virginity testing*. Participants were the reflection of diversity of tribes living in the OR Tambo district. These tribes included: AmaMpondo, AmaMpondomise and AmaBomvane.

Participants had commonalities in terms of subscribing to Christian religion, hailing from rural areas with similar economic and social background.

3.5 Data collection

The researcher sought permission for the Headmaster to use St John's College as the study site. Sunday afternoons were identified as the convenient and suitable time to conduct the Focus Group Discussions because most of the learners are boarders. Two FGDs were conducted per day with 8 respondents per FGD, the discussions lasted about two to two-and-a-half hours. Housekeeping mothers (wardens) assisted the researcher with the recruitment of respondents from grade 10 - 12. Respondents who give verbal consent for participation were assembled in one venue and a group informed consent was obtained before the FGD was conducted. In all FGDs a digital recorder was used to capture the proceedings, researcher facilitating the sessions, and the research assistant be taking notes.

An open ended, semi structured interview guide was used as a guide for all focus group discussions. Additional data on the demographics of participants was collected from the participants at the end of the FGD to ensure that during the FGD to ensure during the FGD participants were free to view their views on the topic without disclosing their virginity status.

Demographics included gender, age, grade, whether they have undergone virginity testing or not willingness to undergo virginity testing and family background.

During the interviews there were answers to some questions that were answered in previous questions, and in that case such questions were ignored. This approach to interviewing allows participants "to say as little or as much" as they would like to" (Breakwell, 1995).

The researcher had planned to conduct six (6) FGDs but due to the fact that there were no new information coming up from the participants, only five (5) were conducted.

3.6 Validity and Reliability

Trustworthiness addresses validity and reliability in qualitative research. Strategies to ensure trustworthiness of qualitative studies include credibility, dependability and transferability (Creswell, 2009; Patton, 2002; Denzin and Lincoln 1994, Lincoln and Guba, 1985). In ensuring trustworthiness in this study, the researcher attended *inkciyo* celebrations in Bumbane Great Place (situated in King Sabatha Dalindyebo Local Municipality) and Qamata Great Place (situated in Intsika Yethu local municipality) to conduct observations and interviews with key stakeholders and role players in *inkciyo*. This assisted the researcher in understanding the practice and probing and engaging the participants. However, during the group discussion the researcher received maximum participation from participants as most of them were very outspoken on the subject although there were few quieter ones. However the discussions did not seem to censor those few because from time to time the researcher invited them to participate. This was not a problem as the participants could relate to the researcher because she came from the same background in terms of language, community, race, gender, dress. The researcher and the research assistant are both first language sharing background characteristics have been found to be important influencing respondents, and insuring maximum participation (Breakwell 1995).

All the focus group discussions were conducted and recorded using the tape recorder during the discussions by the same interviewer and research assistant to ensure consistency and control for interviewer effects. The questionnaires were translated from English to IsiXhosa to ensure that the participants who are not fluent and eloquent in English participate maximally during the discussions. During the FGDs English and IsiXhosa were the main languages used.

The interpretation of data was enhanced by the fact that the researcher circulated the transcripts to supervisor and the peers for comparison in interpretation, coding and the development of themes.

3.7 Bias

To eliminate selection bias, learners were randomly selected from three grades to ensure maximal participation during the discussions. During data collection, participants were recruited from the boarding scholars only. To eliminate researcher biasness during coding and data analysis the researcher engaged peers and the supervisor during coding, data analysis and reporting.

3.8 Data Analysis

The researcher transcribed data by playing the recorded discussions over and over again. The discussions were mainly in IsiXhosa even though there were English used. She then, translated the discussions directly from IsiXhosa to English. The researcher read the transcripts over and over again, using the research guide to follow the questions. There was no attempt to quantify the narratives, but the comparability of themes across all focus groups was sought. The researcher drew key themes that emerged from the discussions and in the presentation of findings these were illustrated through the use of quotations from the participants. This was done to ensure that the findings are the result of experiences and participants and not the preferences of the researcher (Patton, 2002; Denzin and Lincoln; 1994).

3.9 Ethics

Ethical clearance was sought from the Research Ethics Committee of the School of Public Health (REPC) and the MEDUNSA Research and Ethics Committee (MREC).

Informed verbal consent was obtained from the individual learners and a group informed consent was obtained from the focus group participants.

Participation in the focus group discussions was entirely voluntary; there were no incentives to lure them to participate, and no coercion. The researcher explained to the participants that if for any reason the participants feel uncomfortable during the discussions, she could leave. However none of them left, they all stayed for the entire interview. All participants gave verbal consent before participating in the study.

Participants were encouraged to keep the discussions within the group. The researcher offered all participants pseudo names ensure the identity of participants is protected, despite them having

cited no objection to using their names. Participants will be treated with respect and their views and opinions respected and maintained during the FGD

The focus group discussions were conducted in the school grounds, and therefore there were no uncertainty for the participants' safety or other risks that could be posed by the study.

Chapter Four: Findings

4.1. Introduction

This chapter presents the findings of the study based on the focus group discussions. It focuses on the description of participants and overarching themes that the researcher came up with during data analysis. The purpose of the study was to explore perceptions, attitudes and experiences of young girls about virginity testing practice.

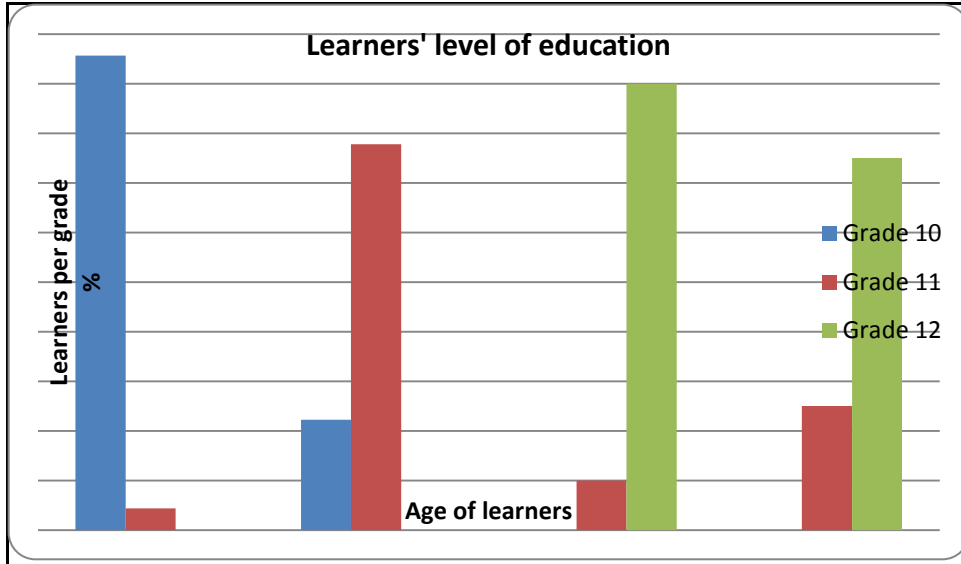
4.2. Description of participants

The study sought to understand the perceptions and attitudes of girls on virginity testing. The participants in the study were girls attending SJC in grade 10 -12, aged 16 years and above. Participants comprised of girls irrespective of whether they participate in virginity testing or not. Key variables used to understand the demographic details of the participants were, age, grade and whether they participate in virginity testing or not. The findings are tabulated in the form of graph under the following headings: Education level, and participants' grades, living with parents, participation in virginity testing;

Most of the participants were 16 year olds from grade 8. This was despite the fact that participants were recruited on the basis of being over 16 years and above. This was the case because during recruitment most participants indicated their birthday by the next coming birthday not taking into consideration the actual date. The researcher then learnt that some participants were only turning the year that they indicated in the next coming months.

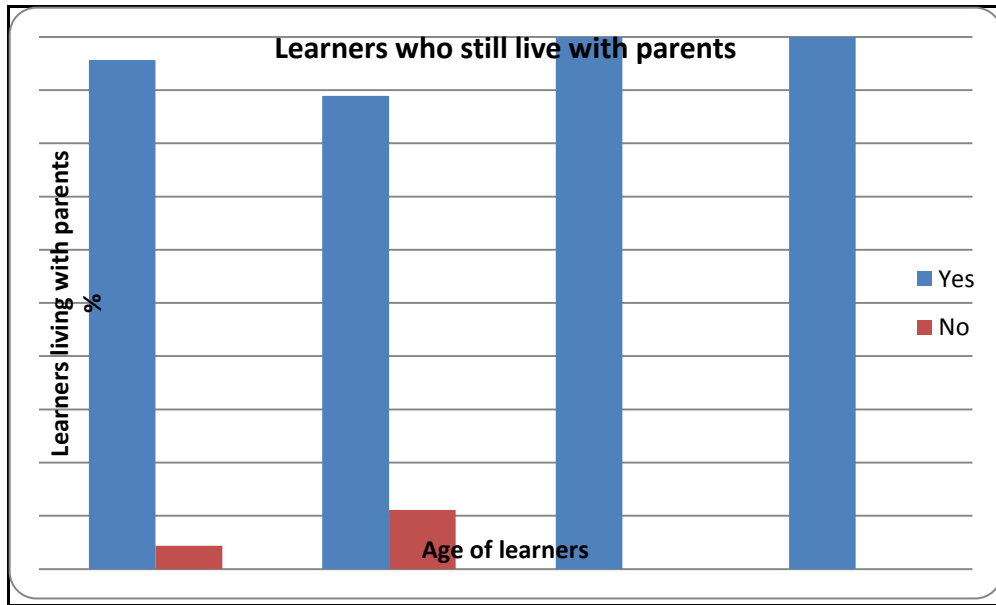
The figure below shows the breakdown in numbers of the demographics of participants per age and grade.

Figure 1: Participants' level of education



Data showed that most participants in all age groups live with their parents and only less than 20 % do not live with their parents. The illustration below provides details on the exact numbers of learners living with parents per grade at school.

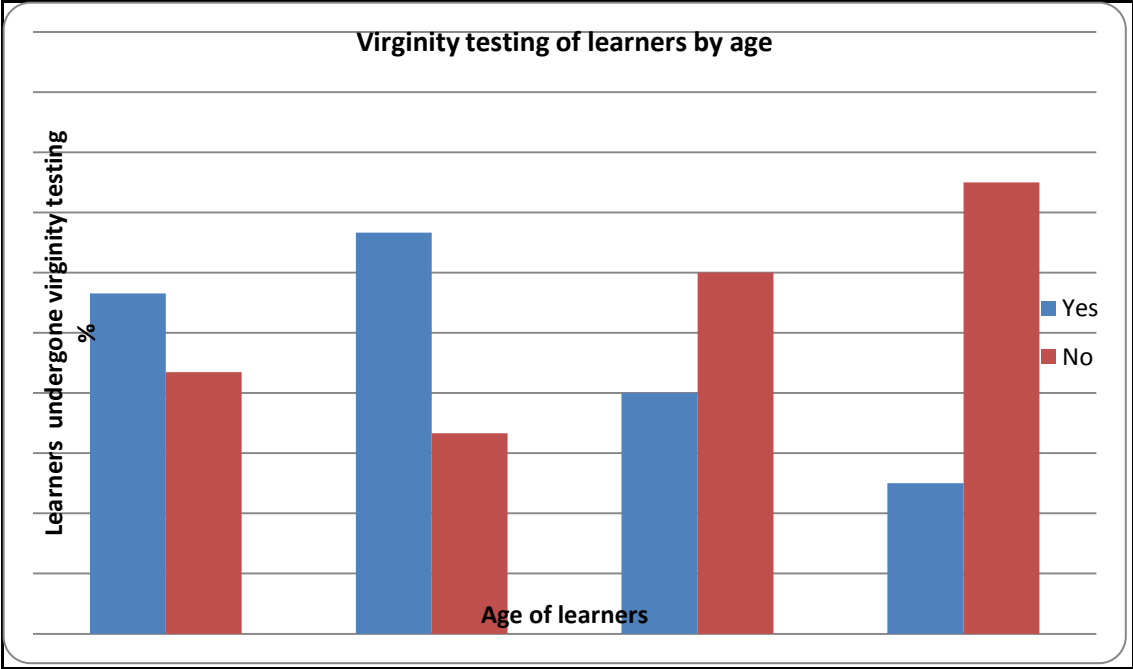
Figure 2: proportion of participants who live with parents



4.3. Participation in virginity testing

The participants were a combination of participants and non participants in virginity testing. The researcher only asked the question on practicing at the end of the focus group interview; because of the opinion that if it was asked before conducting the focus group interviews that could have biased the responses. However this was not the case as participants indicated that their experiences of virginity testing during the Focus Group interviews. From the demographic questionnaire that the participants completed, data showed that in the FGDs there was a fair balance between the participants and non participants in *Virginity testing*. In the ages 18 and 19 years there non participation was higher compared to the ages 16 and 17 years. The table below supports this statement.

Figure 3: Virginity testing participation by age



4.4. Themes

Analysis of the qualitative data collected from 5 focus group discussions on attitudes and perception of girls on virginity testing revealed the following main themes context of virginity testing, learning about virginity testing, perceptions of virginity testing, public announcement of results, involving boys and ideal virginity testing. These themes and its sub themes are discussed below:

4.4.1 The context of virginity testing

Virginity testing was practiced in Xhosa communities many decades ago. The participants showed a clear understanding of the origin of this practice and the context in which it was practiced these included culture and tradition, community values and standards. The following citations support this

“...Kaloku sisi there are a number of things that are taught in inkciyo. Things like how to handle menstrual period, adolescence and many others...” Khanyiso, 18 years

“... inkciyo is one way of setting standards on how I live my life...” Siyavuya, 16 years

“...It ensures that the beauty that the Lord has given you is not in any way messed up by other people especially men...” Nomasibulele, 16 years

“...It encourages girls not to sleep with boys and have children that they leave them behind or having to come with a child from previous relationship when they get married...” Andisiwe, 18 years

4.4.1.1. Culture and Tradition

As indicated earlier in Chapter 1 of this document, virginity testing is a practice is not new in the Xhosa culture. The sense of deriving pride as a Xhosa girl was repeatedly articulated in all FGDs and so was the association of *Virginity testing* to identity and African renaissance.

“...I really like inkciyo because it brings a sense of pride in being a Xhosa woman and taking part in the practice is like going back to your roots...”Masibulele, 16 years

“...I see virginity testing as one of the ways in which we can preserve our cultural values and customs...” Zintle, 16 years

*“...I like inkciyo it connects me to my roots and bring sense of pride in being a Xhosa woman...”
Asanda 17 years*

In a traditional Xhosa setting sex before marriage is discouraged, this was also communicated in the interviews that sex before marriage is frowned at in the communities where participants came from and Virginity testing was hailed as a strategy to ensure chastity. Participants also spoke both in terms of the traditional role of Virginity testing in the past and its relevance to contemporary problems facing youth, for example,

“...Inkciyo was meant to ensure that girls do not have sex before marriage...” Yanga, 17years

“...At the age of 11 my grandmother (who brought me up) told me it is good that girl goes to inkciyo. She told me if there is a man who wants to marry me when I grow up and he finds out that I am not a virgin; I could jeopardize my chances of getting marriage” Nomasibulele , 16 years.

*I think the rationale behind this practice was to ensure that girls remain virgins and the morality of culture is upheld. I think it also had to do with attaching the high price on lobola....
Ncebakazi, 18 years*

For me it is not even about keeping myself for marriage, but to keep me away from teenage pregnancy and STIs...Nangamso 16 years

4.4.2 Free choice

Participants indicated that they exercised their free choices and chose whether to participate or not to participate in the virginity testing practice. For participants who participated or in virginity testing indicated that these form part of their community values and they were introduced to virginity testing by their family members. Participants further emphasized that they had a choice to participate or not participate as illustrated by the following statements

“...the fact that inkciyo was introduced to me did not mean that it was forced through my throat. I participated at an early age and now I enjoy more that I did when I was young because I know what it means...Pretty, 16 years.

“...I can say that I decided to participate in Inkciyo, no one coerced me to inkciyo. It is from my own personal will... Sphokazi, 18 years.

*“...I was only trying to explain that at home we are socialized into virginity testing. I don't ever dream of challenging it because I feel it is the right direction to go. But I wanted to make it clear that it so much loved and respected at home that we all go through until we get married...”
Zizile 17 years*

However there were participants who held differing views regarding *Virginity testing* and did not participate in the practice. Various reasons were for non participation in *Virginity testing*. Various reasons were cited some participants indicated that they felt “uncomfortable” to participant in *Virginity testing* citing that it is against their moral values and principles. Sometimes participants' rejection of *Virginity testing* was based on a belief that it was a practice that policed them rather than allowed or enabled them to exercise their individual choices. The following extracts show the perceptions of non participants of virginity testing:

...I think it is a good practice to those who participate, but not for me. I feel that there is no need for me to be policed over one's body. I mean it is immoral to have someone (a stranger) to look into your private parts....Zingisa, 17years

“..Mna I would encourage parents to test their children themselves. I think it is so uncomfortable to open your legs for some woman who is not your mother...” Luvo, 19years

“...At university there is no nkciyo, so what is the point of doing it now, who is going to look after the girl there...” Nonose, 19years

One of the participants indicated that she wanted to participate in *Virginity testing* but she was refused participation by her mother.

“...I was not told at home but by my friends here at St Johns. When I went back home during school holidays I told my mom about it and indicated that I have been told that it is practiced in Ngangelizwe and asked if she could give me taxi fair to attend inkciyo meeting but she refused. She told me she cannot let me go and open my legs to strangers...” Asive 17 years.

Some participants indicated that the mere reason for their non-participation in *inkciyo* was its unavailability in their communities, and this was common to those who lived in urban areas.

“...I like inkciyo very much and I am sure if inkciyo was practiced in my community, I would not have slept with boys...” Luvo, 19

Another participant in one of the focus groups did not participate because she could not ask her father for permission to participate in *Virginity testing*. This is normal in a traditional Xhosa setting where fathers would speak to boys about issues of sexuality

“... I wanted to participate but I was scared to talk about it with my dad because I live with my dad alone, my mother passed away when I was 6 years old. It is very difficult for me to talk to my father about such things...” Sive, 18

“inkciyo girls could be enticed by older men who want to have sex because they are virgins...” Afika, 19years

“... it makes girls vulnerable and unable to take charge and control of their own bodies. They could easily get raped following the myths like ‘sleeping with virgin cures AIDS’. Zingisa, 17years

“...some girls insert things like toothpaste, sheep fat, snuff in their vaginas thinking that they will regain their virginity...”Ncumisa, 19years

4.4.3 Learning about virginity testing

Data revealed that participants learned about virginity testing from various institutions such as school, church and community clubs. Data also showed that participants referred to “being told” or “heard” about Virginity Testing. From the focus group discussions with participants it was evident that the knowledge and practices of Virginity Testing is transferred through oral history mostly by the maternal Figure. This is common in the Xhosa culture wherein girls were taught womanhood by maternal figures and specifically elderly females in their lives. This is further supported by the quotes below:

“... At the age of 12 my mother told me that she would like to give what is best for me. She said that in order for me to keep myself ‘pure’ I should join inkciyo. It will ensure that I keep my pride as a Xhosa girl growing up...” Masibulele, 16 years

“...My mother told me about Inkciyo when I was 10 years old. She told that inkciyo gatherings assist girls not to succumb to Peer Pressure. Assist girls and teach them to be assertive. It will help girls to keep their virginity and pride... Khanya 17 years

“...My grandmother told me it is good that girl get tested...” Nomasibulele, 16 years

“... I first heard about it inkciyo from my primary school teacher. There was a lady who came to recruit girls to participate in inkciyo, so before we went to the listen to her she explained to us what inkciyo is...” Esona, 16 years

“...I first heard about it at the conference for Girls Friendly Society (GFS) which is an association in our church... Khanyisa, 17 years

4.4.4 Timing for learning about virginity testing

Data shows that the Virginity Testing is introduced to girls at the early teenage hood or puberty stage. This observation was uniform in all participants despite them coming from various areas in the OR Tambo district. This one could clearly link with sex and sexuality education. The following citations support this:

“...When I started menstruating at the age at 12, both mom and dad sat me down and told me that if ever sleep with boys, I will fall pregnant...” Avumile, 17 years.

“... When I was about 13 years old my grandmother told me that since I don't have parents I must look after myself well. If I keep my virginity until at least 21 years, she will buy me a car...” Salizwa, 17 years

4.4.5 What they were told

According to the participants, Virginity Testing is not only about testing but there are many other things that they learn during the interactions. The following citations shows what they learn

...You are told not to loiter and hang around with friends, go parties because these are the things that expose girls to drugs, boys, and sometime old men... Nangamso

...It is a practice that protects girls from engaging in unprotected sex...Asithandile

...we were told that Inkciyo girl does not gossip, respect elders, work hard at school... Alizwa, 16 years...

4.4.6 Perceptions on virginity testing

Participants held different views on the virginity testing practice. These perceptions were both negative and positive. The following statements illustrate the positive perceptions of the virginity testing practice:

4.4.6.1 Positive perceptions

Most participants perceived *inkciyo* as a good and effective practice that brings values and set standards for girls in their communities. It transpired from the discussions that it is not only about looking at the virginity but encouraging girls to work hard towards building their future through education, social values and life skills.

I see it as an important practice because boys respect you because they know you as girl of inkciyo... Nomasibulele, 17 years

Mna I like inkciyo it is beautiful practice that keeps girls away from falling pregnant at an early age and in return get certificates for good behavior...Sive, 17years

...I see it as a very progressive practice that protects and educate girls on the facts and realities of life...Pretty, 16 years

4.4.6.2 Negative perceptions

Other participants did not accept the widespread view that *Virginity testing* carried all the benefits that most claimed they accrued. Some participants expressed that they imagined negative experiences that could happen *Virginity testing* and these are:

...I think that older men could bribe girls who participate in inkciyo and entice them with fancy things like, clothes, cars etc. This could expose them to a number of STIs including HIV...Avumile, 16 years

...In my nearest village girls engage in unsafe behaviors because of their desperation they insert toothpaste, snuff etc to return their virginity...Zintle,16 years

“...I see virginity testing as a practice that incapacitates girls in looking after their own bodies. I feel that communities should teach girls to look after themselves because they will not be with them at the university....” Zingisa, 17 years

Some of the perceptions are construed by myths around the practice.

“...There are those cases where some girls got raped at an early age because people believe that sleeping with a virgin cures AIDS...” Ezintle, 16 years

“...Yes, they did tell me that one girl was raped by a snake belonging to the testers...” Pamella, 18 years

4.4.7 Benefits of virginity testing

4.4.7.1 Earning respect

In keeping with positive regard held for Virginity testing. It came out in the discussions that some participants who participate in Virginity testing believed that it earned them respect in the community. Secured in the adoration of parents the following quotations suggest that Virginity testing is not only a moral imperative but a means to securing parental favor and community in general. The following citations support this

“... Inkciyo earns me respect and I am known to be a good child by the elders...” Pretty, 16 years,

“...I actually wanted to be on the good side because I saw that girls who participate in inkciyo are respected by community members so I also wanted to be on the good...” Akhona, 16 years

“...Inkciyo has earned me respect they earn from community. My parents are proud of me and I am like a role model to young girl...”Luthando, 18 years

“...You know what? Boys do not even bother to propose love to you if they know you are an inkciyo girl. Boys respect you because they know you as girl of inkciyo and you will not agree to be their girlfriend...” Nasiphi, 16 years

“... it is a practice that gives girls dignity in the community and that all those who participate will not get infected by HIV...”Nqabakazi, 17years

“...You earn respect from people in the village and your parents as well...” Anda, 17 years

4.4.7.2 Prevention

When participants were asked their view of what they thought the purpose of Virginity testing was, data shows that participants understand it as a strategy to minimize the spread of HIV, STIs. Sometimes this question was answered even before the discussion was introduced by the questions. Data shows that participants do not just view Virginity testing as a cultural practice, but understand it as a strategy to minimize the spread of HIV, STIs

“..I know it a good practice that will keep me away from falling pregnant, and not have children before getting married. It also helps in the HIV and STI prevention...”Andisiwe, 18 years

“...If all girls could participate in inkciyo, the rate in teenage pregnancy and HIV would be reduced...” Esona, 16 years

Apart from displaying knowledge on the roots of the tradition, and appreciating its value for their own communities, *Virginity testing* was seen as important for both family integrity and community values and these institutions were clearly held in high regard because of

“...the fact that one should not have sex before marriage, and that inkciyo protects people from contracting STIs and that one has to finish her education before looking at other things like sleeping with boys....”Nande,18 years

“...I was told it used to be a family pride that when you get married you do a white wedding. When you are not a virgin you are not covered by a veil...”Khanyisa,17 years

“...Once your behaviour opposes the values instilled in you, you see yourself as an outcast...”Nangamso, 16 years

Some felt that non participation to the practice meant that one has lost virginity and this was interpreted as being shameful

“...inkciyo is a popular practice in my community. Those who do not participate we know they have lost their virginity....” Siyavuya, 16years

“...those who do not participate have lost their virginity otherwise they would participate if they were still virgins...” Luthando, 18 years

4.4.8. Involving boys in virginity testing

Currently *Virginity testing* as practiced in many communities is focused on girls. Boys are often excluded although literature reviewed show that it is slowly introduced in Qumbu, O R Tambo . Most participants were in support of the inclusion for boys sighting fairness, equal treatment, prevention to STIs, HIV, teenage fatherhood and ensuring instilling of community values to both young men and women. The following citations support this

“...Boys must also participate in inkciyo, because we are all equal in the eyes of the law so what is done to girls must be done to boys as well...”Vuyokazi, 19years

“...boys too can become parents at an early age. So virginity will also prevent them from making girls pregnant...” Nande, 18 years

“...These boys sleep with older ladies and they could get HIV and infect their age group when they come back, so they must be tested...”Ongeziwe 17years

However there were participants who did not share the same sentiments. Amongst the things that they alluded to is unfeasible to test boys.

“...Boys could cheat and use condom when having sex and there is no way that he could be seen that he is not a virgin...” Nasiphi, 16years

Some participants seemed to be in agreement with the pressure that the communities put on girls with regards to sex and sexuality and felt that it was “odd” to have boys tested for virginity. The following citations express their reservations against this

“...It’s not cool for boys (laughing). Mh No..... not for boys, Likho, 17years

“... Hay, ke he will be labeled as “isishumane (a man without any girlfriend) by his peers...Sibabaliwe, 17years

4.4.9 Announcement of virginity results

As reflected earlier that participants had firsthand knowledge of the *Virginity testing* practice was commendable. There are clearly ways of engaging with the practice that were described by them. Secondly, there were alternative views to the way the results of the testing were being handled. In some but not all communities, it is normative and encouraged in the sessions that results are announced publicly. However this was not the case in some communities because some participants disputed this norm or practice of public disclosure, and this notion is supported by the quotes below:

“...We never get our virginity status publicity announced in my community, but to those who do it is not correct because it will discriminate against those who have not passed the test...” Sphokazi, 19 years

“...I don’t think there is anything wrong with that, but in our inkciyo no one gets her status publicized except that when you go to inckiyo people know that you are a virgin...”Tholeka, 18years

Nevertheless some participants in this study felt that this was not a good practice. They indicated that they would prefer it if only the parent of the concerned girl was told the results, suggesting confidentiality of results handling. Several participants shared their views on the reasons for not publicly announcing the results of their

“...It is an embarrassment to those who have not passed the test. It will affect the self esteem of a girl, and could be detriment and no longer have confidence in herself. It will be a talk amongst other girls...” Alice, 17 years

“...It will be a bad thing to do and could affect friendship with other girls because some will be talked about. Some would not even want to be associated with her just because she has lost her virginity. She might not have even slept with a boy voluntarily – she could be raped. So I really feel that it should not be publicly announced...”Andisiwe, 18 years

“...I feel that the status should not be publicly announced. Friends will not give you the attention you enjoyed if you are not a virgin. Some girls would end up committing suicide...” Nasiphi, 16 years

“...Mna I think it exposes virgins to risks in myths like “sleeping with a virgin cures AIDS”. Ignorant people tIt pushes girls to alternative sexual behaviors like oral and anal sex...”Luvo, 19years

The reasons cited by participants against publicity of virginity testing results are the following:

“... the testers are also human, and therefore can make mistakes...”Akhona, 16years

“...It should not be publicized because if one of the girls is not a virgin it will detriment her ego....” Asanda, 17 years

“...Again the testers are not trained to perform the test. They could easily make a mistake of saying one is no longer a virgin, when in fact she is. So I really think it should be between the tester and the girl...” Yanga, 17 years

Another reason against the non publicizing the results is that participants

The testers should be rotated because I feel that they could sometimes prefer some girls to some. They could deliberately give girls false results...Asive, 17 years

No, they should only tell your parents. It would be very much embarrassing. Let's say there are testers who do not like you for whatever reason. They could give you false results, just to embarrass you...Khanyisa, 17 years

“...if the tester does not like your family or something she could deliberately give girls false results...” Alice, 17 years.

“... She might not have even slept with a boy voluntarily – she could have been raped...” Andisiwe, 18years

There were contradictions of views on the matter as the participants themselves they do not feel that there is anything wrong to publicly announcing the virginity testing results and the participants felt strongly recommended that non virgins should freely opt out of *Virginity testing* without facing any repercussions so as to avoid the embarrassment and shame.

“...I don't know why a girl would go there if she knows she is not a virgin because it will embarrass her entire family...” Zizile, 17 years

“...I think it is correct to publicize. I don't know why a girl would go there if she knows if she is not a virgin because it will not only embarrass the girl but her entire family. So my thinking is that if one knows she is not a virgin she must not participate in inkciyo because it is a virginity testing practice...”Avuyonke, 17 years

“...I am comfortable with my status being publicized because I know that I am a virgin. I have nothing to hide...”Sibabaliwe, 17 years

“...I think it should be publicized so that the girl could earn respect. Why do you go there if you have slept with boys? She must be embarrassed...” Phozisa 16 years

“...I really support the announcement of the status because I am very proud of my virginity...”Pretty, 17 years

Participants indicated that the girls should have a choice of whether they wanted their status announced or not

“...If the participants are comfortable, why not. I would have a problem if it was done without their consent, but if they agree to it – it's fine...”Ongeziwe, 17 years

“...Exactly Nonose, they should respect the girls' privacy, by at least listening to her if she would like her status to be announced or no...” Awonke, 16 years

4.4.10 Ideal virginity testing

Participants were familiar with the procedure of *Virginity testing* and therefore it was easy to articulate and deliberate on the subject. The FGDs comprised of participants and non participants in *Virginity testing* but all of them had had their own ideas on how the practice should be conducted. Skill, accuracy, announcement of virginity testing results and the involvement of boys in the practice were the key thing that emerged during the discussions.

4.4.11 Training of testers

Data showed that participants (both groups of those who had been tested for virginity and those who were not tested) indicated that the testing should be conducted by individuals who have been trained. A number of participants expressed their views on why they should be trained and who should do the training as illustrated below:

“...I think the trainers should be trained. Some of the trainers could deliberately lie about your virginity because their children do not participate...” Vuyokazi, 19 years

“...Mna I think the testers must go for formal education on testing and must show a proof before testing the girls...”Sive, 17 years

“...The testers are not trained and should undergo some kind of a formal training...”Yanga, 17 years

Over and above the tester’s lack of formal training, participants were of the view that the actual virginity testing procedure/examination could pose a health problem for the girls. The following statements further demonstrate this view:

“...The testers should wear gloves each time she touches a different girl during inspection to eliminate diseases that could be transferred from one girl to another...”Nonose, 19years

“The testers should be trained by qualified doctors because the doctors are well educated and they know exactly what to do when it comes to virginity testing...” Vuyokazi, 18 years

4.4.14 Summary

This chapter shows that there was a balance of views amongst participants during the discussions. What came out clearly is that non participation is perpetuated by factors like, non existence of virginity testing in their areas.

Chapter Five: Discussions, conclusions and recommendations

This chapter discusses the research findings based on data collected and conclusion and provides clear recommendations.

The discussion topics in this chapter come from the arguments from the literature, data collected during the study, general arguments about virginity testing from the media and interactions with testers, traditional leaders and community members where inkciyo is practiced. The key topics discussed in this chapter emanate from the findings.

5.1. Description of participants

The participants in the study were girls attending St John's College in grades 10 -12, aged between 16 – 19 years. The focus group discussions were a mixture of girls from the said grades and age groups. The Focus Group Discussions comprised of the learners who participate and those that do not participate in *Inkciyo*.

5.2. The context of virginity testing

The study was conducted at St John's College, which is a high school situated in Mthatha town of King Sabatha Dalindyebo municipality. King Sabatha Dalindyebo Local Municipality is located with the jurisdiction of OR Tambo. The participants in the study were full time learners who come from various local municipalities located in OR Tambo. About 93.3 percent of the population in OR Tambo district municipality live in rural areas, this means therefore that most participants come from the rural communities.

Participants had firsthand knowledge of the *virginity testing*, it was therefore clear from the discussions that it is practiced in the context of culture and tradition and in particular in the rural areas. However there was one instance where it was practiced in the townships surrounding Mthatha. Data shows that *virginity testing* enjoys support from the traditional leadership in the areas where it is practiced. Both participants and the researcher have seen *Virginity testing* gatherings and celebrations are held at the “great places” and the traditional leaders' places. This therefore explains why the traditional leaders like Prince Langa Mavuso, King Godwill Zwelithini and Chief Mangosuthu Buthelezi were opposed to the ban of virginity testing. The

arguments that it is traditional men who are against the ban of virginity testing must therefore be put in context. The fact that it is traditional male who are advocating against the ban of virginity testing are based on the fact that South Africa is a patriarchal society and the traditional leaders are predominantly male. This automatically means that the traditional leaders are the custodians of culture and therefore have an obligation to protect the cultural and traditional values and practices in their communities.

Secondly, it was clear from the discussions that most participants believed in a traditional family set up and *virginity testing* is a way of ensuring “pureness” before marriage. However, *virginity testing* is not associated with the price of *lobola*, but the pureness of young women who get into marriage still virgins. In fact in the current South African society the issue of whether the bride is a virgin or not does not really determine the bridal price (*lobola*), but in most cases the education status of the girls is what generally matters and *lobola* costs are communally agreed upon by communities and according to class. The participants therefore sighted pride as one of the reasons for their participation in virginity testing.

Therefore the argument by Singer (2003) that virginity testing intended to prove the young woman’s pureness to their families and in laws was not much constructed around the bride price but the bride’s pride.

5.3 Learning about virginity testing

Data shows that participants learnt about *virginity testing* from the elderly women in their lives, like mothers, grandmothers and aunt. However it was interesting to learn that some participants learnt about virginity testing from school and church. What was glaring is the fact that all the participants were introduced by elderly female irrespective of the setting.

Learning about *virginity testing* formed part of indigenous knowledge transfer where knowledge is transferred through oral history. This was evident because even those participants who heard about *virginity testing* at school indicated that it was not a subject or a learning area but told about it by their teachers this was through oral history. However one would argue that the South African education system is not reflective of the African societal values and practices but is more focused on “civil” cultures.

5.4 Age of participation in virginity testing

Data showed that participants learnt about *virginity testing*, at puberty stage, and during their early teenage hood stages. The introduction to *virginity testing* in some cases coincided with the start of menstruation where a mother or a maternal figure in the family presented it.

There were concerns by opponents of virginity testing about girls participated in *virginity testing* at an early age as they are not considered old enough to give informed consent. This resulted in the government prescribing the age of sixteen to be the right age (Children's Act, 2005). However data shows that participants started participating in *virginity testing* as early as when they were 12 years old. It is very difficult to understand to understand the basis for 16 years of age in order to participate in *virginity testing*, when in actual fact there is no age restriction on access to condoms. Secondly, the consent for termination of pregnancy is 12 years of age, and access to contraceptives is not restriction.

On the issue of parental and societal pressure to undergo virginity posed by Skhosana (2002), I would argue that, in many instances parents are trusted to give consent on behalf of their children. For example on medical procedures, social interventions needed by their children, and even in other cultural practices such as *Imbeleko*.

The impression given by literature is that sending the child for *virginity testing* is not a wise decision by parents, and it should be left up to left to the children when they are old enough to make such decision. This argument is misplaced and misinformed because the target for *Virginity testing* is girls under the age of eighteen years and research by Kelly (2005) shows that sexual debut starts at an early age. And the whole point for *virginity testing* is to delay sexual debut.

Girls in this study agreed that they heard about *virginity testing* from their mothers or other maternal figure in their lives but stated in uncertain terms that they wanted to participate and they were not coerced to go for testing. This is contrary to the argument posed by opponents of virginity testing that the girls are coerced by their parents to participate. Data showed that they chose to participate in *virginity testing* because they believe that it bears lots of benefits for them. These benefits include prevention to STIs, HIV, teenage pregnancy, and earning respect in the society. For them, the message transmitted from the mothers emphasized the goodness of the

end product of looking after oneself to ensure purity. In this sense *Virginity testing* was presented to them as a means to an end.

For me (researcher) *virginity testing* is a reflection of the older women transferring the “monitoring” mechanism using the same methods that were used to “monitor” them. In a traditional Xhosa culture, it is a role of older women to perform sex and sexuality to girls whilst men relate to boys on issues like *ulwaluko*.

5.5 Reasons for participation and non participation

Data showed that participants had different views on *virginity testing* and these influenced their participation and non participation in the practice. Reasons for participation were mainly for the prevention of STIs, teenage pregnancies, HIV and above all it earns them respect in the communities. However some participants cited reasons for non participation in the *virginity testing*, which are mainly construed from gender perspectives, negative publicity, fears and myths.

5.6 Earning respect

Most participants indicated that *virginity testing* forms part of their community values and their participation makes them part of the broader community as non participation would label them as “outcasts”. Data shows that the meaning associated with being tested and known to be a virgin within a community brings these girls integrity and links to their social identity as it affirms the sense of who they are.

The arguments against *virginity testing* are citing human rights, gender, and public health issues. However social and cultural identity as driving factors to join *virginity testing* appeared to be more important in the girls’ lives. A sense of belonging for them supersedes “harmfulness”. Actually, findings revealed that their understanding of harmfulness in this context is non participation, because it means shaming your family, making one vulnerable to non acceptable behaviors in the communities. For them the harmfulness into the tradition was brought into them by spoilers, like unscrupulous testers and people who commercialize the practice.

Korombo (2004) views virginity testing as “terrible practice” that “violates girl’s integrity” does not hold water in this study. In this thesis, I therefore argue that integrity is subjective and

contextual. An 'emic' or insider perspective of what this means to the participating individuals and communities is critical before conclusions are reached so far this has not been taken seriously in the discussion of *virginity testing*.

One of the harms mentioned by the opponents of *virginity testing* was "invasion" and "violation" of the young girls' rights and construction of this practice as "undignified". Researchers from western perspectives work from a particular epistemological stance which has labeled African practices as undignified, violating and invading on the basis of being different from the Western notions. This is seen as attacking and undermining cultural practices, by some because it touches on the core of peoples' cultural and social identity. The argument on "invasion" and "bodily integrity" is based on Westernized individualistic notions of access to the body which are understood differently by different cultural groups.

5.7 Prevention

Most participants believed that their participation in virginity testing bears benefits for them and thwarts them from contracting HIV, and it delays sexual debut which is the pathway to HIV reduction. As far as these findings show, there is no evidence that during *virginity testing* there is a detailed and comprehensive education on STI, fertility, sexuality, pregnancy and HIV. All they could articulate is that *virginity testing* shields them from the aforesaid issues.

From the discussions with the participants *Virginity testing* is a practice that is targeting children from an early age until they are in the adulthood stage. George's (2007) argument that proponents of virginity testing are revived as a strategy to HIV is agreed to by the data

Emanating from the discussions with the participants, there is an existing gap in terms of sex education, STI, after their *virginity testing* era. By the time they decide to have sex, they should be taught about sex and sexuality, STIs, HIV, pregnancy prevention and life skills.

The intersections between gender activism and HIV prevention work are complicated, for example there is evidence that young women are disproportionately infected with HIV at a younger age compared to their male counterparts (Shisana et al, 2009). On the other hand, Ndlovu (2005), George (2007), Kinoti (2005) put forth that virginity testing reinforces gender imbalances. This raises an important question of whether HIV interventions should not appropriately be matched to the targeted at the vulnerable groups, and in this case young girls are

vulnerable and therefore virginity testing becomes an appropriate gendered response to a gendered epidemic.

Ndlovu's (2005) argument that virginity testing "put girls at risk of being married off to older men" needs to be thought off carefully because the World over, the pattern is that women marry older men. It is true though that older men as partners are a risk for HIV (Jewkes, 2006). Perhaps this means that there should be strengthened advocacy for pre-marital HIV testing for both parties.

The argument that virginity testing exposes girls to risk of being raped by men is untested is not supported by research because Jewkes et.al (2009) found that men who had contracted HIV do not hold this belief, and this needs to be carefully handled as otherwise it will sway attention from issues of addressing sexual violence in the context of power and patriarchy. The ideal characteristics highlighted by participants are hard to achieve because, most people who are passionate and involved in *virginity testing* are traditionalists. This is your opinion and belongs to the discussion section, here you show what the participants . It is unlikely that they could get educated people interested in getting involved by the way of actually testing young women on *virginity testing* own opinion- discussion section. Secondly, the fact that they would prefer that HIV negative testers lead the actual testing would undermine the efforts of fighting stigma and discrimination of people living with HIV own opinion - discussion. For me, (researcher) *virginity testing* would make more sense if it involved HIV positive women as well, who would be actually guarding against young women from falling prey of unprotected sexual behaviors.

In terms of integrity, communities define what integrity and accepted norms and values and therefore would be difficult to have a universal agreed upon characteristics of testers. For an example, values would be centered on education, marital status, religion etc.

5.8 Non participation

Data showed that some participants would have loved to participate in *virginity testing* but were hindered by the fact that it does not exist in the areas where they live. However they appreciated its benefits as presented by the counterparts. Some of them even blamed their loss of virginity to

the fact that *virginity testing* was not practiced in their communities. However there were was a minority of the participants who held a complete different view on *virginity testing*. They felt that it incapacitates girls to take charge of their bodies and above all their sexual behaviors. The same sentiments as Karombo that *virginity testing* violate girls rights were shared by those against the practice.

The negative publicity that the media has given to the practice has managed to get through to some participants. This was evident when some participants cited the fact that *virginity testing* exposed those who participate are exposed to a risk of being raped by older men. Data shows that some of the reasons for non participation are construed from stories of witchcraft, fear and unscrupulous behaviors in the name of *virginity testing* by some individuals. However the argument that virginity testing exposes girls to risk of being raped by men is untested. To the contrary Jewkes et.al (2009) found that men who had HIV do not hold this belief, and this needs to be carefully handled as otherwise it will sway away issues of addressing sexual violence.

5.9 Virginity Results

As indicated in the methodology chapter that the researcher has firsthand experience on *virginity testing*, as she attended two sessions as part of data collection. *virginity testing* was conducted at the river in the morning. Only females were allowed in the river. The testers sat on the grass mats whilst the girls queue to be tested and go to the testers one by one. After the examination each girl would be looked and then the tester would proceed to the next one. At no point were the girls' virginity status publicly announced. However during data collection most participants indicated that they were comfortable with the announcement of their virginity status announced in public.

Expressed skepticism on the credibility of testers arguing that they were uneducated, not trained and may bring in personal vendettas from the community.

There were alternative views to the way the results were being handled. It is normative and encouraged in the sessions that results are announced publicly nevertheless participants here felt that this was not a good practice. They would prefer it if only the parent of the concerned girl was told the results, suggesting confidentiality of results handling. It was not only how the results were communicated that the girls in this study seemed worried about but also the actual

results suggesting that these could be manipulated, changed or some testers could “...*deliberately give girls false results...*”. As a solution to this they offered that perhaps the testers should be rotated in villages, or women who were testers should not test in their own village where they know the families of the girls, or even that all mothers should be trained and test their own daughters. However the view of not publicizing the results was not shared by all as one said “...*I think it is correct to publicize...I don't know why a girl would go there if she knows she is not a virgin because it will embarrass her entire family...*”

Literature spoke of publicly announcing the virginity testing results by putting red clay on the forehead of those who have been found non virgins.

One of the concerns that people have around virginity testing is that it stigmatizes those who have been found to be non virgins. *Virginity testing* is meant for virgins and therefore it is highly likely that girls who know they have been sexually active would shy away from *virginity testing*. However non virgins should freely opt out of *virginity testing* without facing any repercussions so as to avoid the embarrassment and shame.

5.9 Ideal virginity testing

Participants embraced intervention from the bio-medical Western practice. Data spoke about this in relation to the authenticity of results. As a solution to that they offered that tested should be trained by qualified doctors because they perceive them as the ones that are conversant with the medical facts related to women's reproductive system. Secondly, they offered that perhaps the testers should be rotated in villages or women who were testers should not test in their own villages where they know the families of the girls or even that all mothers should be trained to test their own daughters.

The literature seems to suggest that there is already endorsement of *virginity testing* by the department of health in KwaZulu Natal, where they provide rubber gloves for testers and facilitating workshops on female reproductive anatomy (George; 2007)

The ideal characteristics highlighted by participants are hard to achieve because, most people who are passionate and involved in *virginity testing* are traditionalists. It is unlikely that they could get educated people interested in getting involved by the way of actually testing young women on Virginity testing. Secondly, in terms of integrity, communities define what integrity

and accepted norms and values and therefore would be difficult to have a universal agreed upon characteristics of testers.

5.10 Conclusion

The study concludes that most participants had positive perceptions of virginity testing because they believe that it a practice that prevent them from teenage pregnancy, HIV prevention and enforces community values. Secondly, that their participation in *virginity testing* brings them a sense of belonging to the communities they live in. However negative perceptions about the practice are construed by myths, fear and negative perceptions that they hear from the media and generally as most participants who had negative views has no firsthand experience of virginity testing.

5.11 Study limitations

The study was conducted in St John's College in Mthatha. The sample size could not be representative of the girls in the Eastern Cape Province.

5.12 Recommendations

The following recommendations are made in the light of gaps that have been learnt from the study:

- A Comprehensive reproductive health programs should be incorporated to *virginity testing* in order to prepare the girls for post pubertal period.
- A quantitative study that would investigate the associations between delayed sexual debut and practices of *virginity testing* because there is already evidence of abstinence as protective measure against HIV over condoms, life skills, and other interventions
- There is a need for a research on the research done to understand *Virginity testing* attrition rate and factors associated with the drop out so as to respond to some of the counter arguments against *virginity testing*.
- There are concerns of unscrupulous testers, a way of dealing with these should be explored, for example they could be named and shamed, and banned from participating in the practice again.

6 References

- Bersamin MM, Fisher DA, Walker S, Hill DL, Grube JW, Defining virginity and abstinence: adolescents' interpretations of sexual behaviors. *J Adolescent Health*. 2007 Aug; 41(2):182-8.
- Billy JO, Udry JR. The influence of male and female best friends on adolescent sexual behavior. *Adolescence*. 1985 Spring; 20(77):21-32.
- Mineapolis NM, Children's Institute, Harmful social and cultural practices, 24 November 2004, University of Cape Town.
- Commission for Gender Equity, 2004, Submission to Parliament on Children Rights Bill.
- Diclemente RJ, Wingood GM, Sionean C, Crosby R, Harrington K, Davies S, Hook EW 3rd, Oh MK. Association of adolescents' history of sexually transmitted disease (STD) and their current high-risk behavior and STD status: a case for intensifying clinic-based prevention efforts. *Sex Transm Dis*. 2002 Sep;29(9):503-9.
- Elam J, 1998, A cross-cultural comparison of puberty rites and ceremonies, <http://www.emory.edu/OXFORD/Publications/Review/puberty.htm>.
- George E R, 2007, Virginity testing as HIV/AIDS prevention: Human right universalism and cultural relativism revisited, University of Utah, http://works.bepress.com/erika_george/1.
- Geeta Rao Gupta, 2000, International Centre for Research on Women, X111 International AIDS Conference, 12 July, Durban, South Africa.
- Interchurch Coalition on Africa, Issue 43, Gender & Women's Rights Agenda Magazine.
- Jewkes R, Dunkle K, Nduna M, Levin J, Jama N, Khuzwayo N, Koss M, Puren A, Duvvury N. Factors associated with HIV sero-positivity in young, rural South African men. *Int J Epidemiol*. 2006 Dec; 35(6):1455-60. Epub 2006 Oct 9.
- Jobson M D & Wyckoff – wheeler D, 2001, Intersection and Construction of Gender & HIV AND AIDS.
- Karombo S, 2004, Virginity testing strips girls of their dignity, Rights Zimbabwe.

Kinoti K, 2005, Virginitv testing and the war against AIDS, Association of Women's Rights Development.

Leclerc-Madlala S. Virginitv testing: managing sexuality in a maturing HIV/AIDS epidemic. *Med Anthropol Q.* 2001 Dec; 15(4):533-52.

Loewenson PR, Ireland M, Resnick MD. Primary and secondary sexual abstinence in high school students. *J Adolesc Health.* 2004 Mar; 34(3):209-15.

Makiwane MB, 2008, Youth and Well-Being: A South African Case Study, Oxford.

Nahom D, Welles E, Gillmore MR, 2001, Differences by gender and sexual experience in adolescent sexual behavior: implications for education and HIV prevention, *J Sch Health.* Apr 2001;71(4):153-158. Link to PubMed 54.

Ndlovu C, 2005, Virginitv Testing Raises Many Questions, Vol. 23, No. 4 *Family Health International* vol. 23, no. 4.

www.safaids.net/files/SekeCulturalAttitudes_perceptions_practices.pdf.

Patton, M.Q (2002) *Qualitative Research and Evaluation methods.* Thousand Oaks, CA: Sage.

Rosenbaum JE. Reborn a virgin: adolescents' retracting of virginitv pledges and sexual histories. *Am J Public Health.* 2006 Jun;96(6):1098-103. Epub 2006 May 2.

Santrock JW, 1992, Life-span development: Adolescent moral judgment and perceptions of family interaction, 4 ed, New York: Academic Press.

Scorgie F. Virginitv Testing and the Politics of Sexual Responsibility. *African Studies*, Volume 61, Issue 1 July 2002, pages 55 – 75.

Schuster MA, Bell RM, Nakajima GA, Kanouse DE. The sexual practices of Asian and Pacific Islander high school students. *J Adolesc Health.* 1998 Oct;23(4):221-31.

Singer R, 2000, AIDS in Africa: Chastity Tests: Unusual Tool for Public Health, *Christian Science Monitor*, 5 June 2000.

Shaffer DR, 2002, *Developmental psychology: Childhood and Adolescence*, Wadsworth, www.pdfqueen.com/pdf/sh/shaffer,-developmental-psychology.

Shisano O, Rehle T, Simbayi LC, 2009, South African National HIV Prevalence, Behavior and Communication Survey of 2008: A turning tide amongst teenagers, Pretoria.

Sieving RE, Eisenberg ME, Pettingell S, Skay C. Friends' influence on adolescents' first sexual intercourse. *Perspect Sex Reprod Health*. 2006 Mar;38(1):13-9.

Susan Pietrzyk, 2005, AIDS and Feminisms, *Jenda: A journal of culture and African Women Studies*, Issue 7, UNIFEM, Singapore.

UNAIDS/WHO Epidemiological Facts Sheets on HIV AND AIDS and Sexually Transmitted Infections: South Africa, 2006.

Weiss, Whelan et.al, 2000, Integrating gender into HIV & AIDS programs, Department of Gender and Women health, World Health Organization.

8 Lagoon View Drive
Beacon Bay
5241

The Principal
St Johns College
Mthatha

Dear Sir

RE: CONSENT TO SCHOOL LEARNERS TO PARTICIPATE IN RESEARCH

My name is Zolisa Swartbooi studying towards Masters in Public Health with the University of Limpopo. I am doing research on perceptions and attitudes associated with virginity testing amongst girls in St Johns College.

The researcher will be sensitive to tuition times and therefore would arrange with the school for the interviews to take place during non tuition time. Participation of participants will be voluntary and their identity will be protected as the researcher will give them pseudo names when compiling the report.

Your positive response will be highly appreciated

Should you have any queries please feel free to contact me at 083 624 7785

Ms Sphiwe Madiba
National School of Public Health (MEDUNSA)
University of Limpopo
Tel: 012 5495708 or 0833630743

Appendix 2

CONSENT FORM FOR FOCUS GROUP DISCUSSION PARTICIPANTS

We undersigned give consent to participate in the study focusing on attitudes and perceptions of virginity testing. The purpose of the study has been clearly explained to us, that is purely for the completion of Ms Zolisa Swaartbooi's Masters Degree with the University of Limpopo.

Our participation is purely voluntary, and anyone can pull out the discussion should she feels like so.

Appendix 3

Interview Guide

Attitudes and Perceptions of Girls in St Johns College about the Practice of Virginity Testing

1. As a girl growing up, what were you told about virginity testing

Probes

Who told you about virginity testing?

What did they tell you about virginity testing?

How old were you at the time you were told about virginity testing?

2. Now that you are much older what is your understanding of virginity testing?
3. What are your views regarding the practice of virginity testing in your community?
4. What were you told are some of the reasons for practicing virginity testing in your community?

Probes

What is your personal understanding of the reasons for the practice of virginity testing?

What can you tell me about your decision to participate/not participate in the practice?

Probes

What do you think of virginity testing as a practice?

Would you say virginity testing is a good/bad practice? And why?

5. What would influence your decision to participate/not participate in virginity testing?

6. The practice of virginity testing involve publicly announcing virginity status of participants- what do you think about this?

Probes

Should the testers publicly announce the virginity status of participants? Why?

7. Let's assume you are for virginity testing, what would you suggest to improve the way virginity testing is done in your village?
8. Let's assume you are against virginity testing, give reasons why you think the practice should be stopped?
9. Would you encourage anyone to participate in the practice? Why?
10. Do you think virginity testing should be extended to boys? Why?
11. Would you associate virginity testing with the minimization of the spread of HIV & AIDS? How?
12. If you were in government what would you change about the current law on virginity testing

Probes

Should it only apply to girls over the age of 16 years and above?

Should girls give concern to participate?

Appendix 4

Iimbono nezimvo zabafundi base St Johns College ngohlolo lweentombi (Inkciyo)

Ndiyabulela ngokuvuma ukuthatha inxaxheba kolu phando. Igama lam ndingu Zolisa Swaartbooi, ongumfundi kwi Dyunivesiti yase Limpopo. Ndenza uphando ngezimvo neembono zabafundi base St Johns College malunga nenkciyo. Ukuthatha inxaxheba akuxhomekanga ekubeni ubani abe ukhe wazibandakanya nenkciyo ngoba injongo yoluphando kukuva izimvo neembono zakho ngesi sithethe.

Appendix 5

Njengentombazana/inkwenkwe ekhulayo waxelelwa ntoni ngenkciyo?

Ukungena nzulu

Wawuxelelwa ngubani?

Waxelelwa ntoni ngenkciyo?

Wawubudala bungakananin ngoko?

Njengokuba noko sele ukhulile wazi ntoni ngenkciyo?

Ucinga ntoni ngenkciyo kwindawo ohlala kuyo?

Ngoku wawuxelelwa ngenkciyo kwathiwa zintoni izizathu zesi sithethe

Ukungena nzulu

Ungandixelela ntoni ngokuthatha inxaxheba okanye ukungathathi nxaxheba kwesi sithethe

Ukuthatha inxaxheba kwinckiyo kuthetha ukuba iziphumo zakho ziyapapashwa nakwabanye abantu. Ucinga ntoni ngalo nto?

Ucinga ntoni ngesigqibo sokuthatha inxaxheba kwinkciyo?

Ukungena nzulu

Ucinga ntoni ngenkciyo njengesithethe

Ucinga ukuba inkciyo ilungile? Ngoba?

Yintoni eyenza ukuba uthathe inxaxheba kwinkciyo?

Masithi kukho into ongayiguqula kwesi sithethe, ingayintoni?

Ucinga ukuba abavavanyi balungile ukuba bapapashe ubuni bentombi ngenkciyo?

Ukuba ngaba awuhambisani nenkciyo, zeziphi izizathu zokungahambisani nayo?

Masithi awuvumelani nenkciyo, nika iziathu zokuba esi sithethe sipheliswe

Ungabakhuthaza abanye abantu uba bathathe inxaxheba kwinkciyo? Zathuza

Ucinga ukuba inkciyo kufuneka yenziwe nase makhwenkweni? Ngoba

Ungayinxulumanisa inkciyo nokunciphisa isifo sika gawulayo?

Ukuba ubungu rhulumente zintoni obungazitshintsha ngomthetho omalunga nenckiyo othi abantwana abangaphantsi kweminyaka elishumi elinesithandathu (16) mabangathathi nxaxheba kwinkciyo?

Ukungena nzulu

Ucinga ukuba amantombazana angaphezulu kwe 16 yeminyaka mawathathe inxaxheba
Amantombazana kufuneka avume ukuthatha inxaxheba

IMIYALELO:

Nceda uphawule ngo x kwibhokisi echanekileyo.

Mingaphi iminyaka yakho ()

Usisiphi isini (ntombazana) (nkwenkwe)

Ukweliphi banga

Ihlelo 10	
Ihlelo 11	
Ihlelo 12	

Uhlala nabazali?

Ewe	
Hayi	

Ukhe wahlolwa kwinkciyo?

Ukuba kunjalo, cacisa / Ukuba akunjalo, cacisa

Ukuba hayi, ungazibandakanya nenkciyo? Ngoba?

Imibuzo kubathathi nxaxheba abangamakhwenkwe

Amantombazana akwikhaya lakho, ayayithatha inxaxheba kwinkciyo?

Ewe	
Hayi	

Ukuba Hayi, Cacisa

Ungamkhuthaza udade wenu ukuba athathe inxaxheba kwinkciyo?

Ewe	
Hayi	

Nika izizathu zempendulo yakho

Appendix 6

IMVUME YOKUTHATHA INXAXHEBA KUVAVANYO NGE NKCIYO

Thina, siyavuma ukuthatha inxaxheba kuphando olungezimvo neembono zabantu abatsha ngenkciyo. Sicacelwe ukuba inxaxheba esizakuyithabatha koluphando lolokuphumelela izifundo zika Nksz. Zolisa Swaartbooi kwi dyunivesiti yase Limpopo. Asikhange siqweqwediswe ukuthatha inxaxheba kolu phando, sizithandele kwaye siza kuphendula ngokuzinikezela nangentembeko.