Sexuality education in Uganda

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CHAPTER 5
Young People's Perceptions of Relationships and Sexual Practices in the Abstinence-only Context of Uganda

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Chapter 5

5.1 Introduction

As discussed in Chapter 1, sexuality education is generally believed to be important because it supports young people to make informed choices regarding their sexual and reproductive health, and teaches them how to avoid contracting HIV (Mueller, Gavin, & Kulkarni, 2008; UNAIDS, 2010; UNESCO, 2009). Worldwide, governments have allocated funds for sexuality education and HIV prevention programmes, and researchers have become involved in debates over what type of sexuality education young people need.

A central topic in this debate is whether sexuality education should focus exclusively on promoting abstinence or whether programmes should be more comprehensive (e.g., S. Cohen, 2004; Kirby, 2006; Stanger-Hall & Hall, 2011). Abstinence-only sexuality education programmes usually promote sexuality education based on moral teachings. Such programmes consider young people to be ‘innocent’ regarding sex, and marriage as the only legitimate context for sexual activity. Supporters of abstinence-only sexuality education programmes may fear that discussing sex encourages young people to become sexually active. In contrast, supporters of comprehensive sexuality education programmes claim that young people are active sexual agents who construct and negotiate their sexuality and, therefore, need evidence-based information to make well-informed decisions regarding their sexual and reproductive health and rights (Bhana, 2007a; Greslé-Favier, 2013; Miedema et al., 2011; Robinson, 2012). The European Expert Group on Sexuality Education (2016) recently argued that narrow interpretations of comprehensive sexuality education have downgraded the meaning of comprehensive sexuality education programmes to the category of abstinence-plus programmes (Nixon et al., 2011). In consequence, the group has introduced the term ‘holistic sexuality education’ and used a definition from the WHO Standards for Sexuality Education in Europe to define holistic sexuality education as education that focuses on “the cognitive, emotional, social, interactive and physical aspects of sexuality” and which aims to support children and young people in their sexual development “with information, skills and positive values” (WHO & BZgA, 2010, 20). The inclusion of sexual pleasure as part of comprehensive or holistic sexuality education offers a positive approach to young people’s sexuality that is associated with increased contraceptive use and sexual agency, i.e. young people’s ability to act in line with their “sexual needs, desires and wishes” (McGeeney & Kehily, 2016; J. M. Wood et al., 2007, 189).

The tone of these debates suggests that there are sharp contrasts between the content delivery of abstinence-only and comprehensive or holistic sexuality education programmes, but in practice these programmes are diverse and are not always easily distinguished. Nonetheless, research shows that sexuality education and HIV prevention programmes for young people are more effective in reducing teenage pregnancies and sexually transmitted infections when they promote not just abstinence, but also condom use and other forms of contraception (B. T. Johnson et al., 2011; Kirby, 2007; Lindberg & Maddow-Zimet, 2012).

When comparing types of sexuality education programmes, the reported sexual practices of young people often serve as an indicator of programme effectiveness (e.g., B. T. Johnson et al., 2011; Kirby, 2007; Lindberg & Maddow-Zimet, 2012). However, such studies often tend to overlook the fact that young people’s sexual practices are not merely the result
of individual, rational considerations, that young people's perceptions of relationships and sexual practices can be competing and conflicting, and that sexual practices are the result of interpersonal and contextual interaction (Harding, 2007; Quinn, 1992). Depending on these interactions, young people may exercise different forms of sexual agency (Reeuwijk, 2009).

The importance of contextual interactions is stressed in several studies which argue that sexuality education programmes should address the structural factors that underlie young people's HIV-related vulnerability and risk (e.g. Auerbach, Parkhurst, & Cáceres, 2011; Gupta et al., 2008; Vanwesenbeeck et al., 2016). For instance, addressing gender and power relations through sexuality education can support young people to “understand how gender inequality is socially constructed” and reflect and challenge how such structural factors lead to different behaviours and health outcomes (Haberland & Rogow, 2015, S17; S. Y. Wood, Rogow, & Stines, 2015).

The Ugandan government has been criticised for its abstinence-only policies directed at young people on a number of grounds, including that they fail to recognise the multiple realities faced by young people, some of whom may already be sexually active (e.g. J. Cohen & Tate, 2006; S. Cohen, 2004; Lagone et al., 2014; Okware et al., 2005). This paper explores and analyses students’ perceptions of relationships and sexual practices to obtain an understanding of how students construct and negotiate their sexual agency in the context of the abstinence-only messages largely provided in Ugandan secondary schools and at the wider community level.

5.1.1 Sexuality Education Programmes in Uganda

Since 2003, the Ugandan government has been implementing an HIV prevention education programme in primary and secondary public schools (J. Cohen, 2006). This programme is known as the Presidential Initiative on AIDS Strategy for Communication to the Youth (PIASCY) (Santelli et al., 2013). PIASCY encourages abstinence until marriage, and avoids the topic of condom use. The government’s promotion of abstinence-only for young people has been strongly criticised (J. Cohen & Tate, 2006; S. Cohen, 2004; Okware et al., 2005), and despite abstinence-only policies and the abstinence-only HIV education programmes being implemented by the Ugandan government, there are also more comprehensive sexuality education programmes being implemented in Ugandan schools (Vanwesenbeeck et al., 2016).

The delivery of sexuality education in Ugandan secondary schools varies by school. Sexuality education can be delivered in a weekly class meeting, through extra-curricular clubs or on a weekend day each semester. Elements of sexuality education are also integrated into curriculum subjects such as Biology and Religious Education. Extra-curricular clubs include those associated with the government’s PIASCY programme, the faith-based Youth Alive Uganda programme and the more rights- and evidence-based World Starts With Me and Straight Talk programmes (see Chapter 1 and Chapter 4).

In addition to the concerns that have been raised about the content of Uganda’s HIV prevention strategies directed at young people, critics have recently pointed out that Uganda’s funding and policy strategies disproportionately focus on AIDS treatment rather than on behavioural strategies for reducing HIV transmission (Green et al., 2013; UAC, 2015a).
5.2 Methodology

5.2.1 Selection of Participants

Data collection took place in a co-educational secondary day school in the centre of the capital city, Kampala, in April and May 2008. The study population comprised 55 students (28 girls and 27 boys) aged 15–19 years who were not enrolled in a school-based comprehensive sexuality education programme. In general, participants’ exposure to sexuality education appeared limited. Sources of sexual and reproductive health information mentioned included external counsellors at school seminars, the website of a local church, and a teenage health centre. One male interviewee was a peer educator in an extra-curricular club at the time of the interview.

Of a group of 55 students, eight students were interviewed; 45 students participated in the focus group discussions; and two students were both interviewed and participated in a focus group discussion (see Table 1). The literature suggests that boys in urban areas have an earlier onset of first sexual intercourse than girls, and their relationships with older women has been less studied (Nyanzi, Pool, & Kinsman, 2001; Uganda Bureau of Statistics & Macro International, 2007). Therefore, interviews with boys were expected to elicit more personal experiences with sexual practices, and it was decided to interview five boys and three girls. For the purposes of additional data collection, a male and a female student were asked to participate in an in-depth interview after being in one of the focus group discussions.

The participants in this study were among the minority of young people in Uganda who are able to attend secondary school (Uganda Bureau of Statistics & Macro International, 2007). As highly educated people aged 15–24 living in an urban area, it may be assumed that participants had more comprehensive knowledge than many of their peers about issues such as HIV, AIDS and condom use. Furthermore, they were less likely to have had sexual intercourse before the age of 18, and were more likely to have used a condom when having sexual intercourse (Ministry of Health Uganda & ORC Macro, 2006).

Table 10. Participants’ background characteristics

<table>
<thead>
<tr>
<th>Participants per method (IDI = in-depth interview; FGD = focus group discussion)</th>
<th>Sex</th>
<th>Form (S = senior)</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDI B1</td>
<td>Boys</td>
<td>S5</td>
<td>18</td>
</tr>
<tr>
<td>IDI B2</td>
<td>Boys</td>
<td>S5</td>
<td>19</td>
</tr>
<tr>
<td>IDI B3</td>
<td>Boys</td>
<td>S5</td>
<td>18</td>
</tr>
<tr>
<td>IDI B4</td>
<td>Boys</td>
<td>S6</td>
<td>19</td>
</tr>
<tr>
<td>IDI B5</td>
<td>Boys</td>
<td>S4</td>
<td>17</td>
</tr>
<tr>
<td>IDI B6 / FGD B2</td>
<td>Boys</td>
<td>S5</td>
<td>17</td>
</tr>
<tr>
<td>IDI G1</td>
<td>Girls</td>
<td>S6</td>
<td>19</td>
</tr>
<tr>
<td>IDI G2</td>
<td>Girls</td>
<td>S5</td>
<td>16</td>
</tr>
<tr>
<td>IDI G3</td>
<td>Girls</td>
<td>S4</td>
<td>15</td>
</tr>
</tbody>
</table>
YOUNG PEOPLE’S PERCEPTIONS

<table>
<thead>
<tr>
<th>Participants per method (IDI = in-depth interview; FGD = focus group discussion)</th>
<th>Sex</th>
<th>Form (S = senior)</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDI G4 / FGD G1</td>
<td>Girls</td>
<td>S6</td>
<td>18</td>
</tr>
<tr>
<td>FGD only girls 1</td>
<td>9 Girls</td>
<td>S5-S6</td>
<td>17-19</td>
</tr>
<tr>
<td>FGD only girls 2</td>
<td>8 Girls</td>
<td>S5-S6</td>
<td>17-18</td>
</tr>
<tr>
<td>FGD only boys 1</td>
<td>7 Boys</td>
<td>S5</td>
<td>16-18</td>
</tr>
<tr>
<td>FGD only boys 2</td>
<td>8 Boys</td>
<td>S5</td>
<td>16-18</td>
</tr>
<tr>
<td>FGD mixed 1</td>
<td>3 Boys / 4 Girls</td>
<td>S4</td>
<td>16-17</td>
</tr>
<tr>
<td>FGD mixed 2</td>
<td>4 Boys / 4 Girls</td>
<td>S5</td>
<td>16-19</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>27 Boys / 28 Girls</strong></td>
<td><strong>S4-S6</strong></td>
<td><strong>15-19</strong></td>
</tr>
</tbody>
</table>

5.2.2 Data Collection

In their evaluation of a sexuality education programme targeting young people in secondary schools in Uganda, Rijsdijk et al. (2011) based their quantitative questionnaire on the socio-cognitive reasoned action approach (Fishbein & Ajzen, 2010). The present study is related to this evaluation but aimed to provide a more in-depth understanding of the evaluation results. As such, the semi-structured interview and discussion guides were informed by concepts derived from the reasoned action approach focusing in on participants’ attitudes, perceived norms and perceived behavioural control in relation to the following topics: relationships, sexual practices, intergenerational sex, transactional sex, having multiple partners and practising safe sex. The semi-structured interview and discussion guides were piloted at a co-educational secondary day school close to the centre of Kampala.

The topics of intergenerational sex and transactional sex were discussed more in the focus group discussions than in the interviews. Based on participants’ answers, more attention in data collection was given to gender relations in a co-educational school, abstinence, the meaning and content of sexuality education, the role of the school and the role and meaning of ‘sexual urges’, and less attention was given to sexual harassment.

Six focus group discussions were conducted: two with only boys, two with only girls, and two with mixed groups (see Table 1). Each focus group discussion involved seven to nine participants, a male note-taker and the researcher (BdH), who asked the questions and guided the discussions. Some participants already knew each other. Both mixed-sex and single-sex groups were formed to encourage a broader range of opinions in case the gender composition of the groups affected participants’ replies. In general, both boy and girl participants appeared comfortable in the mixed group discussions. However, a difference was noted in discussions of gender, such as gender roles and interactions with the opposite sex. Participants in the mixed groups, for example, tended to defend the opposite sex by playing down their perceived bad habits. Meanwhile, in one of the girls-only discussions, girl participants characterised the male note-taker as a ‘typical Ugandan man’, and used him to express their frustrations with boys.
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Both the interviews and the discussions were conducted in English, as English is the official language of Uganda and is spoken in all secondary schools. The in-depth interviews and focus group discussions lasted on average 93 and 96 minutes, respectively.

In addition to the transcripts of the interviews and discussions, the qualitative data included notes on the participants’ attitudes and visual gestures during and after each interview and discussion; field notes that provided impressions of the school; and relevant newspaper articles and pictures of, for example, billboard advertisements targeting the sexual health of young people. Finally, code notes and theoretical notes were made during the data analysis.

5.2.3 Ethical Considerations

This study was part of an evaluation of a comprehensive sexuality education programme that was approved by the Psychology Ethics Committee (ECP) of Maastricht University. The principal of the school and all of the participants were asked for their consent to participate after being informed of the content of the study and the aim and the role of the researcher. Participants were informed about issues of confidentiality, that they could leave the study at any time, and that they were not obliged to answer any questions. Abiding by the judgement of the school under study and SchoolNet Uganda, the Ugandan organisation coordinating the evaluation, parental consent was not sought. Participants were handed a health referral list of youth-friendly health centres in Kampala that they could visit, write to or call if they felt affected by the interview or had questions or problems related to the topics discussed.

5.2.4 Limitations of the Study

The data were collected in the school compound. Because school regulations do not allow students to have relationships or to be sexually active, the responses of the participants may have been guided by a desire for social conformity, and may not fully reflect their actual practices. Moreover, in response to the setting, participants may have been more likely than they would have been otherwise to assert that they are able to resist the pressure to have sex.

5.2.5 Analysis

The interviews and focus group discussions were recorded with a digital voice recorder, transcribed verbatim and analysed using Atlas.ti 5.5 software which facilitates the coding and analysis of qualitative data. For the analysis, grounded theory was used, which allows researchers to use the data collected to identify new concepts and their relationships to the phenomenon under study through the construction of an inductively derived theory. The grounded theory was built up from the data using three types of coding: open, axial and selective (A. Strauss & Corbin, 1990).

The analysis began with ‘open coding’ using mainly ‘in vivo’ codes: i.e., concepts named after terms used by the participants in the data (A. Strauss & Corbin, 1990). For the purposes of methodological triangulation, the interviews and focus group discussions were coded separately and compared later. After grouping the concepts, twenty code families
were identified that addressed either the students’ sexual agency and their perceptions of relationships and sexual practices or the contextual aspects in which these perceptions were embedded. The contextual aspects were assumed to interact at three different levels: (1) the individual level — e.g. the participant’s cultural and religious beliefs, gender, age and financial capital; (2) the school level — e.g. the school rules and norms; and (3) the wider community level — e.g. gender roles, media messages, religion and governmental laws and policies. The codes that addressed the students’ sexual agency and perceptions were abstracted to five themes: (1) engaging in romantic and transactional relationships; (2) engaging in sexual practices; (3) consequences of relationships and sexual practices; (4) contraception; and (5) sexual urges.

The following results section presents participants’ perceptions structured according to three main themes: first, participants’ access to sexuality education information as embedded in the sociocultural context; second, participants’ perceptions of engaging in relationships and sexual practices; and, third, students’ sexual agency as constructed by their perceived gender roles, age and financial capital.

5.3 Findings

5.3.1 Students’ Access to Sexuality Education Information

Students’ perceptions of relationships and sexual practices were found to be embedded in the sexuality education information they obtained at school and the wider community level. This information, which they received from their teachers, parents and health workers, consisted mainly of abstinence-only and contraceptive-discouraging messages. To complement these messages, students appeared to seek information from the media, including pornographic movies.

Sociocultural Norms and Values at School and the Wider Community Level

Participants reported that local religious, cultural and societal norms and values are not accepting of kissing in public, place a high value on virginity and prescribe abstinence until marriage. According to the participants, people will assume that young people kissing in public are also sexually active, and sex before marriage can bring shame, embarrassment and curses on the family. Participants also said that their parents warn them that having sex will endanger their sexual health and their academic achievement, and that abstinence until marriage is taught in church. Participants also indicated that the societal norm of abstinence can be a barrier to obtaining condoms in health centres, as health counsellors typically refuse to make condoms available to young people. In addition, health counsellors may provide them with information that discourages the use of condoms. For instance, a 17-year-old boy in Senior 5 (S5) said that health counsellors told him that condoms are not entirely safe and that you could still become infected with HIV when using a condom:
When I went to this teenage centre, they told me you can’t be a hundred percent sure that this condom is what? Working. So it’s like fifty or seventy. [...] You can’t be sure that you use the condom and do not get HIV.

In addition to the information received from these various sources, participants obtained most of their sexuality education information from school. School regulations prohibit students from having relationships or being sexually active, and signs in the school compound read: ‘When you think of fun, don’t think of sex’. The participants reported that at their school abstinence was discussed by teachers during school assemblies and by visiting health counsellors. According to participants, these discussions about abstinence usually involve messages that emphasise the unreliability of condoms and other forms of contraception and the risks of sex, including becoming pregnant, contracting HIV or other sexually transmitted infections, adverse effects on academic performance, expulsion for pregnant girls, and imprisonment for boys who impregnate girls. Male participants often mentioned the fear of being sent to prison as a motivation for abstaining from sexual intercourse because the Ugandan ‘Defilement Law’, an amendment of the Penal Code of Uganda (section 123, cap 106), makes it illegal for them “to have sexual intercourse with a female under the age of eighteen years old” (Parikh, 2012, 1774).

Role of Pornography and Other Media in Learning about Relationships and Sexual Practices
Despite being surrounded by messages that discourage sex, participants mentioned Western high school movies and pornography as sources from which Ugandan youth can learn about relationships and sexual practices. Participants reported that many people watch pornography, including some of their friends. As explained by this 18-year-old male participant in S5: “I walk into the room when they’re [friends] watching it. [...] Many watch them.” Nevertheless, most of the students expressed negative opinions about pornography. Students felt that watching pornography caused sexual arousal and, therefore, could encourage an ‘addiction’ to masturbation, such as discussed by the following boys in S5:

Boy 1: Because pornography is even worse than... [...] sex itself. [...]  
Boy 2: You might get addicted to...  
Boy 3: Masturbation.  
Boy 2: Yeah, that’s usually the reason... of watching too much pornography.  
Boy 1: That’s why I’m saying pornography is worse... than having sex itself.
5.3.2 Students' Perceptions of Relationships and Sexual Practices

The compromised sexual and reproductive health information students receive puts them in a vulnerable position because, on one hand, they fear the consequences of sexual intercourse and, on the other hand, they want to engage in relationships and sexual practices. In addition, both male and female participants reported experiencing sexual urges which makes it difficult for them to abstain.

The Perceived Consequences of Engaging in Relationships and Sexual Practices

The regular admonitions of teachers, counsellors and parents to abstain made participants aware of the ‘dangers’ of sex and afraid to have sexual intercourse. Participants often expressed the fear that they might have an unwanted pregnancy or contract HIV if they had sex too early. Their age increased their vulnerability as they observed that they were still financially dependent and that pregnant girls may need to drop out of school. As such, the students felt that engaging in sexual practices could interfere with their goal of finishing secondary school. Several participants mentioned the importance of education, as they believed that getting a qualification will make it easier for them to find a job and safeguard their future. Participants reported feeling pressure to work hard, perform well and avoid being suspended from school.

Many participants did not perceive protected sex to be an alternative to abstinence because they appeared to think that the risk of getting infected with HIV or becoming pregnant when using a condom is still high. For instance, an 18-year-old girl in S6 felt that condoms can protect against pregnancies but not against HIV: “There is no way that you can prevent catching AIDS. Even if you used a condom. […] Condoms, I think, are only… are only helpful for not getting pregnant. Apart from that… there is nothing else.”

But other participants said that if they were to use contraception, they would prefer to use condoms rather than hormonal contraception, because condoms are easy, cheap and lack the perceived side effects of hormonal contraception. For instance, a 19-year-old girl in S6 feared that hormonal contraception could lead to infertility: “[Pills and injections] have bad side effects […] They told us that the womb becomes used […] it cannot hold the baby […] that’s why people produce immature babies… what, sometimes they completely fail to produce.” Based on their perceptions of contraception, most of the participants said they believe that abstinence was the best way for them to stay safe.

Sexual Urge as a Reason to Engage in Sexual Practices

The desire to conform to sociocultural expectations and the perceived consequences of sexual intercourse motivated participants to abstain. In addition, many students believed it is better to avoid relationships during secondary school because they believed that constantly thinking about a boyfriend or a girlfriend could lead to a loss of focus on study. Also, they feared that being in a relationship could lead to having sexual intercourse, especially when couples hug or kiss. For instance, one male participant in a discussion with boys and girls in S4 said that “...from pecking [i.e., a kiss on the cheek] you guys will end up kissing, and from kissing maybe you’ll go out [on] to having sex.”
Although many participants believed it is better to avoid relationships during secondary school, three boys in S5 aged 17, 18 and 19 years old and one 19-year-old girl in S6 indicated they were currently involved in a romantic relationship. In addition, several participants were positive about kissing and having sex, which they mentioned was a way to express themselves in a relationship or, as indicated by a 19-year-old boy in S5, “some kind of enjoyment”. With regard to engaging in sexual practices, many of the participants said they were abstaining, although two of the male interviewees in S5, aged 18 and 19 years old, indicated that they had had sexual intercourse.

Participants indicated that they believed that secondary school students do not have sex out of love, but out of lust. In addition to motivations such as curiosity and the financial rewards that can come through sex, most of the motivations for engaging in sexual practices mentioned by the participants were related to physical needs or sexual urges, such as ‘emotions’, ‘instincts’, ‘excitement’, ‘human nature’, ‘high libido’, ‘hormones’, ‘lust’ and ‘desire’.

Participants seemed to perceive these physical needs to have sex as difficult to control, or even beyond their control. For instance, one 18-year-old male participant in S5 explained that he did not recall whether he had used a condom when having sex because sex is “like a force. [...] that can make you forget something. [...] you can wake up the next day without knowing [what happened]”. His explanation reveals how perceptions of sexual urge can be problematic. A similar problematic perception of sexual urges was also present in the expressions of other participants who indicated that excitement can cause a person to forget the risks of sex, that human nature cannot be controlled, and that boys become easily aroused by girls wearing short skirts.

Yet a further problematic perception of sexual urges was found in expressions from students who indicated that they intended to abstain but that they were not sure whether they would be able to ‘control’ their physical needs until marriage. For instance, one 19-year-old girl in S6 said she wanted to abstain until marriage, but “if the need comes” perhaps she might have sex while at university. “But if still, I can hold on, than I can still... [wait],” she said.

At the same time, there were also students who expressed confidence in their ability to abstain from or refuse sex. These participants mentioned that it is important to have self-control and to ensure that they do not go beyond hugging and kissing in relationships. As one girl in a discussion with boys and girls in S5 put it, “That’s why we need self-control. [...] Cause if you don’t have self-control, you can... you can be able to be anything.” Agreeing on certain principles in relationships was cited as a method for preventing intercourse from happening, such as ‘hugging only’, and avoiding meeting in places where the couple might be alone or where it is dark, because “...you can’t control nature” in a dark place. When asked about the desire for privacy, a male participant in a discussion with boys and girls in S4 noted “...you can also have privacy on the phone”. Although the participants claimed that they were confident in refusing and avoiding sex, the question of whether they would act so confidently if such a situation actually arose remains open.
5.3.3 Students’ Sexual Agency: Gender, Age and Financial Capital

In the setting described above, students reasoned how to act and showed different forms of sexual agency. For instance, due to their age and financial capital, participants’ sexual agency was compromised as they indicated there are a limited number of places where people their age could go have sex, such as dormitories when they were in boarding school, around campus, near night clubs at night and in hostels during the day. Using a hostel could, however, be difficult, as getting a room requires money and some pre-arrangement. One of the female participants in a discussion with only girls in S5 and S6 explained how not having a private place to have sex could lead to hurried, unprotected sex:

So, that’s why sometimes, like when [...] they are using a condom but you find that a girl got pregnant. The reason is they were scared when they were doing it. So, the boy was maybe trying to do it in the hurry, so that they don’t get them!

According to participants, the type of school attended could also have consequences for students’ sexual agency. The Ugandan education system distinguishes between single sex and co-educational schools, and day and boarding schools. In the co-educational day school under study, students’ perceived gender roles influenced how they approached the opposite sex and exchanged money and gifts in relationships.

Approaching the Opposite Sex

Participants, and especially the girls, said that maintaining a good reputation was very important to them. According to one 16-year-old female participant in S5, a girl can be popular in two ways: the good way is by showing that she is, for example, Christian, ‘humble’, ‘smart’ and ‘well preserved’ — i.e., a virgin; while the other way is by having a sugar daddy and wearing expensive clothes. Some of the female participants claimed that boys often make fun of a girl who has had sex by saying that ‘she is cheap’.

Most of the participants said they believed boys should approach girls first, observing that in Ugandan culture girls who approach boys are considered either cheap or desperate. However, some of the participants challenged these cultural notions, arguing that they were outdated, and that girls can approach boys. Furthermore, a female participant in a discussion with only girls in S5 and S6 explained how, within these gendered scripts, girls can actively encourage boys to approach them:

But sometimes, [...] girls do it indirectly. [...] being good to the boy all the time, huh? [...] So she’s trying to communicate [...] ‘I, I like you and maybe I love you’, [...] but when she can’t say it openly. [...] You leave this guy to approach you first. It’s not the girl to... to first approach.
In addition, one 17-year-old male interviewee in S5 described how he appreciated that his girlfriend took the initiative to kiss:

Okay, she was just like... we're tight. And she was like 'Can we kiss?' She first asked. So I said it's okay. [...] I was not nervous. [...] She wasn't nervous because obviously she first asked for it [chuckles a bit].

**Transactional Relationships**

In contrast to girls', it was noted that having sex could be good for a boy's reputation, and that some students commented that 'virginity is not dignity but lack of opportunity'; that a boy is a *fala*, or 'half a man', if he does not have sex; and that a boy is 'not styled up' if he does not have multiple girlfriends. Several of the participants discussed the strategies boys used to persuade girls to have sex with them. For example, they described the practice of 'hit and run', whereby a boy will break up with a girl after having sex because he has lost interest in her:

It's very easy to [...] hit [leave] a girl when you've had sex with her. [...] the moment you get into that... act, you lose some interest in her [...] Now what do I want, eh... anymore from her. You get it? (19-year-old male interviewee in S5)

But stories like this also suggest that 'hit and run' strategies could actually be the result of shyness and of not knowing how to communicate with their partner after they have had sexual intercourse. According to an 18-year-old male interviewee in S5: *“After tasting the sex fruits it ends [...] You feel uncomfortable. There is a feeling that grows in between and you become a bit shy.”*

Furthermore, to live up to gender norms, some boys described pressure to find money to buy their girlfriend gifts or take them on dates to show they cared for them. Failure to do so would cause them to lose the respect of their girlfriend and their friends. One male participant in a discussion with only boys in S5 explained: *“Even if she really loves you, [...] she'll lose interest because her friends will be on her back all the time because ‘He’s dull!’ [...] but if you’re rich, and you’re intelligent... that, she’ll respect.”*

In the same discussion, the boys discussed how the pressure to come over as ‘well-off’ in order to find and sustain a girlfriend affected them. For instance, they might need to cut down on the free food provided by the school because eating this free food might suggest that they came from a poor family. As a boy in S5 described it, *“Some guys [...] they want the [free] food but they’re like ‘How will the chicks see me lining up [for free food]?’”* In addition, the boys mentioned that they can experience shame and inferiority when girls reject them due to a lack of money:
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Boy 1: Girls, for them already have that ideal that whenever you have a boyfriend, he will... it is a must he has to give you money. [...] And yet you find that it’s affecting our social life. So everything... everything... whatever it takes to impress her [...] whether you go and steal...

Boy 2: Supplementing on this thing, that is, some girls who are now in S6 can’t go for these A-level scholars. [They want] high class, campuses, what? Just for the money.

Researcher: How does that make you feel?

Boy 1: No, you feel inferior.

Boy 3: It’s like they don’t respect us.

Lack of financial capital could hinder boys from engaging in same-age relationships. To acquire money and gifts, whether for themselves or to sustain another relationship, both male and female participants described the possibility of transactional sex with older men and women. The following discussion with only girls in S5 and S6 shows the interaction between power relations of gender, age and economic position, and how they exercised agency. The female students first discussed how girls could be ‘tricked’ into having sex after having accepted gifts and money. Later, they discussed how, after this has happened, girls may then adopt an active role in transactional relationships by setting down the terms of the relationship.

Girl 1: You just have to expect it. When they tell you ‘Yeah, I want to have sex’, you just have to go there if you’ve accepted the terms of the gifts and everything. [...] 

Girl 2: But they didn’t tell you that... at the beginning [...] after... I don’t know, you’ve taken a lot of cash [...] then he will tell you what he expects.

Girl 3: They just take you to some secret place. [...] So that if someone tells you ‘You can’t escape’, then you have to give it.

Girl 1: Most girls [who engage in transactional sex]... the first time [they have sex], it’s actually for sex. And then after the first sex, [...] they will know ‘If I am to have sex with this guy, I have to keep on [...] getting money from him’, so you also have to set terms.
5.4 Discussion

This paper enquired into students’ perceptions of relationships and sexual practices in Uganda to develop an understanding of how students construct and negotiate their sexual agency. Students’ perceptions of relationships and sexual practices appeared to be strongly embedded in local sociocultural and religious norms and values, school regulations, and national policies and laws that instruct young people to abstain. This abstinence-only context limits students’ sexual agency as it prevents them from accessing contraception and comprehensive, accurate sexuality education messages. As a result, students experience an increased risk of and vulnerability to sexual and reproductive health problems because they engage in sexual practices despite their beliefs that condom use cannot prevent them from becoming pregnant or infected with HIV, and fears of the consequences of engaging in sexual practices, such as expulsion from school.

Students’ age, gender and financial capital further increase their risk and vulnerability. For instance, due to their age, students may conduct their sexual lives in secret, leading to hurried and unprotected sex. Depending on their gender, students may either feel pressured or discouraged to engage in relationships and sexual practices. Also, economic motives may encourage some students to engage in transactional, intergenerational relationships.

Another factor found to be limiting students’ sexual agency was the dominant sociocultural construction of sexual practices as an inescapable sexual urge over which students have little control (Kippax & Stephenson, 2005). Findings from other studies on sexuality education in Uganda confirm that teachers tell students that the way to abstain is to control their biological urges (Iyer & Aggleton, 2013; Kibombo, Neema, Moore, & Ahmed, 2008). Because these messages stress the supposed difficulties young people face in controlling sexual desire and advise them to avoid practices perceived as likely to lead to sexual intercourse, emphasising that students need to control their sexual urges seems to diminish rather than bolster students’ confidence in their ability to abstain.

The students in this study were not well informed about the use and reliability of contraception, felt pressured to conform to adverse gender norms, and did not know how to handle themselves after engaging in sexual activity. These findings show that young people in Uganda may value comprehensive sexuality education that takes into account the needs of those who are sexually active and which provides reliable information about sex or teaches young people the skills needed to construct and negotiate their sexuality, handle relationships and have safe sex (Greslé-Favier, 2010; Greslé-Favier, 2013). Sexuality education programmes in Uganda may be more effective if they support students to challenge and negotiate the structural factors underlying their current perceptions, such as gender roles and sociocultural norms, which influence students’ sexual practices and increase both vulnerability and risk.

Findings also suggest that teachers are important gatekeepers of students’ access to sexual and reproductive health and rights information. Therefore, to increase students’ access to comprehensive and accurate information, it is important to recognise the key role played by teachers in the implementation of school-based sexuality education (Robinson, 2012; UNESCO, 2015).
TEACHERS’ SECTION
Chapter 5 revealed that teachers are important gatekeepers to students’ knowledge of sexual and reproductive health and rights to construct and negotiate their sexual agency. To improve the implementation of school-based sexuality education, these findings suggested that the role of teachers needed further understanding. To examine whether the need to understand the role of teachers was shared by Ugandan stakeholders, and to sharpen the research questions addressing teachers’ role, a feasibility study was conducted in 2010, as discussed in Chapter 2. The feasibility study included the observation of teacher training for secondary school teachers: a refresher course for sexuality educators.

Nalule is a secondary school teacher who attended this refresher course. She decided to share her personal testimony with the other teachers present about how she grew up fearing that she was HIV-positive and how she had wished that she could have shared these fears with her teachers.

**PERSONAL TESTIMONY**

A personal testimony from Nalule Patricia (pseudonym) during a four-day WSWM refresher course for teachers organised by SchoolNet Uganda, 1 May 2010:

**Nalule:** “I just want to share with you what it feels like to be going through some of the challenges we are handling in the World Starts With Me curriculum. So… I’m going to take you through a life of a once sexually abused young girl. So that when you’re handling these students, you are in place to know about how it feels to have been sexually abused.

You know, all the teachers we are having here, I understand, are secondary school teachers. Yet, most of the sexually abused girls are in a primary [school], before… most these children are sexually abused or are made subject before they even make five years. So, some start schooling when they’ve already gone through that experience. Yet, when we come to secondary, in most cases, the things we give them are self-defence… skills. So you are here, giving someone self-defence skills when she has already been done what? Abused. And… to be… sincere, the experience of being sexually assaulted never leaves the person who has been done what? Assaulted. It lives with that person forever unless… she receives… help.

So this happened once, one time… you know, and the most hardening bit of it all, is this… is these children are assaulted by the people they trust. That is what hurts most, and it is what makes it unbearable, someone being assaulted by a person he trusted! The uncles… and these other, the brothers… you see… the world through an experience. Mmm… and given the nature of our culture, where women are not supposed to talk about such things, you know, even when you try to come in the open, to share how it feels, people will be wondering: ‘Eh, now this lady, isn’t she herself ashamed?’ No, I’m not ashamed. […]”
So, it all started when I [...] was taken somewhere... for holiday. I was very young! [speaks a bit indignantly] In Primary 1, or around there. So, there was this uncle of mine, whom I loved very much! [speaks a bit indignantly] We were kind of very close, huh? So, it sort of came that we lost someone and the grannies went for a what? For a burial, they attended a burial ceremony. We were left home with that beloved uncle of mine and my brother [claps hands to emphasise words]. So, it so happened that during the night... ah! [...] So I'm kind of suffer, separately, I was afraid to tell the grannies when they came back [claps hands to emphasise words]. [...] I used to cry, I felt useless. [...] So, I went back to school, but life was never the same again. [...] So at school, I was a very changed person. The teachers could not understand me. But again, they also did little to help me. You know, that cases where children need help, but they cannot seek for it. But it's the work of the teacher to try to reach out to... them! I could feel very alone, I always used to cry [claps hands to emphasise words] [...] When I joined secondary, that's when I started hearing of things like STIs, AIDS... what, what? And when we were being told about the ways through which HIV can enter the body, I heard: Sexual relations. Uh! I started... getting worried. So... you see, when it came to some of these body changes, the developments, when I went through one body change, I was like... I was so scared, I was now starting thinking that I had started rotting, huh? Now what is this coming out of me? I was so scared to ask my... mum, I was so scared to ask other people. At school, some things were not talked about of course. So, there I was... When it came to these other things of HIV, STIs, and all that, you know, I was like: What if I had contracted the what? The virus. My brain picked it, and the body did what? The body responded. [...] So, but since I heard that whenever you were having itching, you experience itching, [...] than that is the sign of what? STD. Then here I was wondering: Since the other time, I have never had any more sexual relations, now why is it that I'm also experiencing these things? I must have contracted the virus. You see? How separately suffering one can be once assaulted. So, I feared I had to seek what? Treatment! I was like: How can I go to a clinic? How will the nurse look at me as young as I am being there with an S11? How can I start telling my mum that I've contracted this? She will automatically ask me where I got it from. So, I did not go for... treatment.

I joined the secondary. My mum was given a transfer. Senior 2: She took me to a boarding school. But because I had so many things going on in my life, I never enjoyed life at school. [...] I developed some things. [...] I developed spots, huh? They are blisters, huh? After they formed... after they broke, they formed some kind of... Yeah. Now, I was alarmed. I was very sure that I had contracted what? HIV. So, I stopped putting on short sleeved, what? Blouses. Though it was the mode of dressing. O-level, short-sleeved shirts. I could put on a sweater. Morning, evening. [hits table to emphasise words] [...] I could not go to the bathroom with my friends. So the students were like: 'Uh, why is this girl ever hiding?! Why doesn't she want to bathe with us?' [...] And it was very itching. [...] So, I was very sure now, I have AIDS. [...] I grew thinner and thinner by each passing day. [...] I lost all interest in studies; students were ever... and let me tell you people about... I would like to comment something about this 'talking compounds'. You see those things, these people need a break, because when they go to hospital, yeah, they are given the facts: AIDS kills. It's true. But at school, at least, [...] whenever they are walking, you see as if a grave, you are stepping in a graveyard. So, when you know AIDS kills [claps hands to emphasise word]. AIDS does this. You know, you kind of get... each time you feel the heart skipping a bit. [...] So when you are in that situation, the word AIDS comes... so much to your brains, I don't know why. You know, that statements there, that kind of information in those 'talking compounds' is rarely read by people who think themselves free. It is so much seen by those people who think they are sick and those who already know they are sick. [...] So, reaching Senior 4, I did not perform to the expectation, even teachers did not know me. I could sleep, I could lock myself in the dormitory, I could do...
I had no peace. I was very, very bitter at men. I hated male teachers. [...] I hated my father, my biological father. I hated him! So much! I hated my brothers, [...] So that was the kind of life I lived. [...] 

So, Senior 6 again, [claps hands to emphasise words] I had no time to study. I saw so low use in the study, why should I study when I did not have a future? [...] I always went to school because there was no way I could tell my parent that, what? I won't go. And... I could not get married because I never wanted to get married [...] So, it was like I had no option. I had to read, to pass through school. [...] you know, my self-esteem was totally injured. It was zero-level. If they were walking, I could not walk in the street, I could feel all eyes on me. I could imagine all people talking about me. So I lived in that kind of life. [...] You know, some teachers, I don't, I don't understand, we're... teachers sometimes, we're so unethical and unprofessional. You know, they could talk! Teachers can talk! In that staffroom of theirs! Yeah. Yeah, it was very... So... at last, I had given up on life by the way, the only thing I was waiting for was... my dying day.

It was like... one time I was listening to a certain pastor, she, he was like... New Year's message. Preaching. I first listened, it was a song... [...] So I was kind of listening to music, to a certain song by a certain artist that was like: [sings a part of the Ugandan song]. So I was like, hmmm, if I am to live a normal life, even if... Now... being a woman, the thought of having a baby... I wanted to have a baby, but how was I going to get one? [...] The only way through was to get what? Married. Now... I was like, now, 'I'm sick, how am I going to have a baby? The baby is also going to be... sick. [...] So I was getting more confused by each passing what? Each passing day. So when I heard that song, it came to my mind. That when a man comes, he is going to tell me to go for testing, we go to the pastors... we go to the...? Parents. There I was. And when I was listening, it was lunch hour fellowship kind of. He was, the pastor was like: 'This year we finally make any results come, you must know your what?' [claps hands to emphasise words] 'Go! Go and get tested! If you are found negative, thank God. If you are found positive, life still has to go on. We shall start with you, we shall cry with you, we shall give you the support needed. That does not mean that being sick is the end of the world.'

I somehow gained the courage from these words. You know what I did? I went... I bought, I went to a certain nursing home, found there people that were being counselled. I asked the lab attendant: 'Can I have a blood test?' [...] I told her I want an HIV blood test. She was like: 'Have you been counselled?' I told her I haven't been counselled and I don't want to be... counselled. I just want to know my status. [...] I gave her the money, she took the test. [...] So when the lady gave me the results, they... She told me I am negative, and I went back home, but I could not believe! If I were negative, how about this? How about with this? [pointing at physical signs of HIV on her body] How about this? And the unexplained weight loss? All those things. Hm-mm, I went back, told my mum, I've been for a test and the lady says I'm negative. And my mum, like, was like: 'Those private clinics sometimes give false results!' [...] I went to AIC, had my blood checked, they told me: 'You're... you're negative.' Hm! I was like... I took tests around town! [...] I took like... I cannot count... I took so many tests, and I was kind of... relieved.

Eh... in a... and in no time I had started being lively, people... you see, you know, I put on weight, I forgave the person... [...] So, but it is what? I... I wanted to bring to your notes that there are people who are suffering. Who think themselves to be sick because they either lost parents... they were raped... they once shared some... they are suffering silently, yet, they cannot come to you. Because... if someone had taken a stake to come to me, maybe I would have done what? And I would have lived a very different life.
CONCLUSION

Nalule’s testimony was important because it showed the impact that sexuality education messages can have on young people and their needs for comprehensive, accurate information and skills that are not based on fear: not only messages focused on prevention but also on cure. She felt that the sexuality education messages she received at school had actually increased her fears rather than helped her to overcome them.

Building on the literature discussed in Chapter 1, Nalule’s testimony highlighted various aspects that are important for understanding teachers’ roles in the provision of sexuality education. Although these aspects are intertwined, they are separately discussed in the following results chapters. First, she describes a culture in which young people are not supposed to be sexually active and, as such, have difficulty accessing sexual and reproductive health information and services. This role of cultural values and beliefs in the provision of sexuality education is discussed in Chapter 6. Second, Nalule describes how she did not confide in her teachers, even though she was of the opinion that counselling students was part of their role as teachers. The role of teachers’ professional identity is discussed in Chapter 7 and Chapter 9. Lastly, I interpreted that Nalule’s personal experiences had strengthened her intrinsic motivation to teach sexuality education because it helped her to empathise with young people and their needs for sexuality education. Accordingly, Chapter 8 examines the role of teachers’ personal experiences and how they motivate the content of teachers’ sexuality education messages.