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Perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape.

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Faculty of Community & Health Sciences, University of the Western Cape

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Date: 15 December 2021

DECLARATION

I declare that The perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape is my own work, that it has not been submitted for any degree or examination in any other university, and that all the sources I have used or quoted have been indicated and acknowledged by complete references.

Signed: **Date: 15 December 2021**

ABSTRACT

There is a high prevalence of sexual risk behaviour among adolescent females in South Africa. As such several intervention programmes are being offered by government, non-profit organisations and the private sector. The aim of this qualitative study was to understand adolescent females' experiences and perceptions regarding adolescent sexual risk behaviour after their involvement in a youth development programme, offered by the Department of Social Development, in a selected community in the Eastern Cape, South Arica. As such a combination of an exploratory and descriptive design was employed, using a feminist approach to contextualise the phenomenon under investigation. Fifteen females between 18 and 25 years who participated in the YOLO programme participated in the study. Individual semi-structured interviews were conducted, and thematic data analysis yielded five themes and several subthemes. The findings indicate that adolescents engage in risky sexual behaviours from a very early age. The beneficial impact of the YOLO programme, its contribution towards improved decision making, reduced sexual risk behaviours and awareness of the influence of peer pressure are key findings. Recommendations for policy, social work practice and further research are offered. These include the need for research that addresses sexual risk behaviours in pre-adolescence. Improved insight into how to target sexual risk behaviours during pre-adolescence are regarded as a significant preventative measure. Moreover, government and policy makers should conduct more rigorous evaluations of youth development programmes focused on reducing risky sexual behaviour. Ethical clearance was granted by the Humanities and Social Sciences Research Ethics Committee, at the University of the Western Cape, and the Department of Social Development in the Eastern Cape.

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ACRONYMS

AGYW	- Adolescent Girls and Young Women
AYHP	- Adolescent and youth health.
BSW	- Bachelor of Social Work
CASA	- Centre on addiction and Substance
DSD	- Department of Social Development
DWYPD	- Department of Women, Youth and Persons with Disability
DREAME	- Determined Resilient Empowerment Aids free
ECDSD	- Eastern Cape Department of Social Development
EPWP	- Extended Public Works Programme
GBV	- Gender Based Violence
GCBS	- Government Capacity Building Support
HIV	- Human Immune Virus
HSRC	- Human Science Resource Council
IYDS	-Integrated Youth Development Strategy
KPAs	- Key Performance Areas
NSFAS	- National Student Financial Aid
NYDA	- National Youth Development Agency
PACT	- Private Agencies Collaborating Together -
RSA	- Republic of South Africa
RSB	- Risky Sexual Behaviour
SA	- South Africa
SANAYHP	- South African National Adolescent and Youth Health Policy
SRBs	- Sexual Risk Behaviours
STIs	- Sexual Transmitted Diseases
UNCEDAW	- United Nations Committee on the Elimination of Discrimination Against Women
USAIDS	- United States Agency for International Development
UWC	- University of the Western Cape
WHO	- World Health Organisations
YOLO	- You Only Live Once
YRBS	- Youth Risk Behaviour Survey

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CHAPTER ONE

OVERVIEW OF THE RESEARCH STUDY

1.1 Introduction

Youth empowerment is a global concern and enjoys high priority on the global agenda. For example, it is embedded in the Sustainable Development Goals (SDG) 2030. The SDG or Global Goals as it is also referred to are a compilation of 17 interlinked global goals which is a "blueprint to achieve a better and more sustainable future for all". (Millennium Institute, 2021). Priority is given to vulnerable populations in society, such as women, children and youth, and in particular issues of poverty, health and inequality affecting these vulnerable populations. Although some progress has been made in diminishing social, economic and health disparities, in relation to children, youth and women, the issue of gender equality remains an elusive goal (Cesario & Maron, 2017). In particular, many young females in African countries still experience high levels of marginalisation and exploitation, sexual exploitation being foremost. According to Chege (2011) the marginalisation and exploitation of female youth has resulted in a high prevalence of teenage pregnancies, as well as alarmingly high number of abortions, as young women simply cannot afford to raise children, because of their own adverse personal, psychosocial, and economic circumstances.

South Africa (SA) is no exception when considering young people at risk; as evidenced by levels of poverty, familial disruptions, high levels of crime and violence, and specifically gender-based violence (GBV), alcohol and drug abuse and the high death rate because of HIV/Aids (Republic of South Africa [RSA], 2015; Statistics South Africa (StatsSA), 2017;

2019). These factors also contribute to the marginalisation of young people and especially females (RSA, 2015). The Eastern Cape, a province in SA, which is characterised by the lack of, and poor socio-economic infrastructure, is particularly affected by poverty, illiteracy, unemployment, and a lack of education and employment skills among youth. These factors have devastated efforts to overcome the high levels of poverty in the province (StatsSA, 2017; 2019).

The Department of Social Development (DSD), as a people-centred public sector stakeholder, targets the most vulnerable groups in society; namely women and the youth (RSA, 2018, DSD, 2007: 20). The mandate of the Department of Women, Youth and Persons with Disability (DWYPD) is to advance women's socio-economic empowerment and promote gender equality. Additionally, this department has undertaken several interventions and programmes for youth, including the National Youth Development Agency (NYDA), the National Student Financial Aid Scheme (NSFAS), as well as the Sanitary Dignity Programme. DSD has also hosted several youth dialogues, such as the "You Only Live Once" (YOLO) programme (DSD, 2018). However, despite government intervention, there is very little evidence of the impact that such programmes have had on the recipients' lives. Therefore, the need to research the perceptions and experiences of recipients after being involved in such programmes in South Africa is vital.

1.2 Preliminary Literature Review

1.2.1 Women and Vulnerabilities

Women encounter many challenges in SA, some of which relate more generally to their voice and representation in society, while others point to their economic, social, and political disempowerment. Furthermore, gendered norms in society also impede their successful uptake of employment opportunities and participation in social organisations (Moleke & Mpothane, 2018). Although SA has campaigns, such as Access to Justice Week, and 16 Days of Activism against Violence towards Women and Children, much more needs to be done to establish universal justice for all. Moreover, government and the private sector have persistently failed to attain the target of 50% representation of women in executive and senior management levels (Gumede, 2008).

1.2.2 Transformative Policy and Legislation aimed at addressing vulnerabilities

At the heart of government policies on women is a dual strategy, aimed at dealing with the legacy of apartheid and the transformation of society. The transformation of powerful relations between women and men is associated with this strategy. As indicated in the Convention on the Elimination of all forms of Discrimination against Women Report (UNCEDAW, 2010), SA's strategy to empower women proposes to address gender oppression, patriarchy, sexism, racism, ageism, and structural oppression, and by creating a conducive environment that would enable women to take control of their lives. Furthermore, as poverty levels are comparatively high among individuals living in female-headed households, when compared with those headed by men (StatsSA, 2019), poverty can be regarded as a more concerning factor for SA women.

The Eastern Cape province has been identified as a province that suffers from the lack of skills and youth development programmes, especially for women (StatsSA, 2019). Apartheid's legacy appears to continue to confer a status of powerless onto most black and female South

Africans. A study by Ephraim (2012) sought to investigate the impact of an empowerment programme, namely the Zonkee Community Development Centre in Cape Town. The study which took a feminist perspective involved 45 woman participants and sought to understand the perceptions and experiences of these young women regarding their adolescent sexual risk behaviour as a result of their participant in the youth empowerment programme. The results of the study demonstrated that empowerment efforts by civil society groups had the potential to diminish the sense of powerlessness participants' experiences while enhancing their capacity to control their lives (Ephraim, 2012).

Empowerment is the process through which people, an organisation, or a community could gain mastery over their lives (Rappaport, 1984). The World Bank prioritizes gender inequality by empowering women through development programmes to ensure that their needs are addressed (World Bank, 2018). Dreke (2008) defines empowerment as a type of socialisation process that helps youngsters to develop into responsible, self-confident and resilient individuals. For the purposes of this study, the World Bank (2018) definition best describes empowerment as the process of increasing the capacity of individuals, or groups, to make choices, and to transform those choices into desired actions and outcomes. However, empowerment cannot be fully understood without considering development because empowerment brings about development. Burkey in (Schenck, 1995) defines development as social transformation that involves changes in the awareness, motivation and behaviour of individuals, as well as the relations of individuals and groups within the community. Despite the varied views, the consensus is that development embraces characteristics, such as change, progress, growth and transformation, which generate empowerment. Chambers, Masango and Swanepoel, and De Beer in (Chege, 2011) all emphasise that empowerment is achieved when people are able to participate fully in the decision-making process of development initiatives.

1.2.3 South Africa efforts to address Youth Empowerment

The international framework that informs the Republic of South Africa (RSA) National Youth Policy (2020) for youth development is as follow:

- The African Youth Charter (2006) serves as a strategic framework that provides direction for youth empowerment and development at continental, regional, and national levels. It further identifies the following priorities: education, skills, competence development, employment and sustainable livelihoods, youth leadership and participation, health and welfare, peace and security, environmental protection and cultural and moral values (RSA, 2015).
- Commonwealth Youth Charter (2005) aims to empower young people to develop their creativity, skills and potential as productive and dynamic members of the society and highlights the importance of full participation of young women, in all decision making and development (RSA, 2015).
- The Youth Employment Accord (2013) and Skills Accord (2011) was signed by business, government, labour, civil society and non-governmental organisations, with the objective to enhance the equipping and the placement of young people in jobs (RSA, 2015).

The South African Youth Council (RSA, 2015) is another strategy for youth development, with a common agenda that aims to mobilise youth organisation and ensure their participation in broader societal affairs of the country, while also serving as a *v*oice of youth National Youth Policy (2020). The National Youth Development Agency (RSA, 2015) monitors all programmes that work to integrate young people into the economy. It also promotes a uniform approach to all to youth development; thus, it establishes annual national priority programmes

for youth development, promotes interest in disabled young people, and facilitates economic participation and empowerment (RSA, 2015).

DSD offers programmes to equip vulnerable people, such as women and youth, with skills that enable them to reach their potential (RSA, 2007). The Department of Women, Youth and Persons with Disability have furthermore introduced at a national level, measures for youth and women. The primary mandate of these programmes is the advancement of women's socio-economic empowerment and the promotion of gender equality. These programmes include: the National Youth Policy (1997), National Student Financial Aid Scheme (1999), Sanitary Dignity Programme (2018), Department of Women, Youth and Persons with Disability (2019), Extended Public Works Programmes (2004), Youth Dialogues (2018), and YOLO (RSA, 2018). The literature therefore indicates that SA has the necessary legislative and political will, accompanied by appropriate programmes that can foster youth empowerment. However, how these can be translated in practice remains an elusive question, as the voices of beneficiaries of such programmes have been silent regarding their experiences. Hence, this study aims to address this gap in literature by exploring the perceptions and experiences of recipients of one such youth development programme.

1.3 Theoretical Framework

A feminist approach was selected to contextualise the phenomenon under investigation. Feminist studies frequently use qualitative methods and are often associated with qualitative research. Furthermore, feminist studies typically employ aspects of ethnography and oral history which enable the capacity of women's voices to be heard and their point of view to be stressed. Such research also assumes that women are different to men in the ways they acquire

knowledge and how they view the world (Rubin & Babbie, 2014). Thus, the feminist paradigm focuses on using research to empower women. Since the current study explored and described the experiences of young females who have participated in a specific development programme, a feminist approach therefore seemed appropriate in meeting the research aim.

Feminist methodologies seek to highlight and contextualise the exclusion and discrimination typically experienced by women through empirical and theoretical methods (Carey, 2013). Nna and Nyenke (2005) adopted the theory of feminism, which assumes that political inequalities experienced by women, reflects the socio-economic and domestic inequalities. They further argue that unless the structures, which engender inequality are dismantled, women will remain politically disempowered (Nna & Nyenke, 2005). Therefore, the proposed study places gender at the centre of its social enquiry, while presenting the diversity of women's perspective.

1.4 Problem Statement

Young black women in South Africa experience challenges relating to underdevelopment, due to a lack of skills in the labour market. They live in poverty as head of households with no source of income and suffer the inequality of being highly exposed to socio-economic risks (StatsSA, 2019). Poor rural women are particularly exposed to poverty and dangers associated unequal gender relations, which further exacerbates their living conditions. Most of these women lack the ability to make meaningful choices, as they were rarely offered decision-making power in matters pertaining to their socio-economic well-being.

The SA government introduced several youth-empowerment programmes to address the challenges facing youth development. The Department of Social Development, in partnership with United States Agency for International Development (USAID), Pact South Africa, and Mott MacDonald, established the YOLO programme in 2016. The YOLO programme adopted principles that are based on the fact that young people have the right to make positive decisions concerning their lives (USAID, 2016). YOLO was implemented by DSD to target young people aged between 15 and 24 years, with the aim of responding to the social and behavioural drivers of HIV (RSA, 2016).

In 2016, the YOLO programme was introduced in the community that was selected for this research study. The objective of YOLO was to increase knowledge, change attitudes and norms, and reduce risky behaviour, and thus contribute to the reduction of HIV transmissions (RSA, 2018). In June 2018 the programme design and implementation was evaluated. The purpose of the evaluation addressed the programme strategy with respect to the immediate outcomes of YOLO. The statistics based on this evaluation are kept for key performance areas (KPAs) however, persisting gaps were determined, in terms of the subjective perceptions and experiences of the young females who participated in the programme. As such this study seeks to explore and describe participants' experiences in order to give prominence to women's voices.

1.5 Research Question, Aim and Objectives

The research question for this study was: What are the perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape?

The aim of the study is to understand the attitudes and norms of females regarding adolescent risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape.

Therefore, the research objectives were as follows:

- To explore and describe the perceptions of females regarding adolescent sexual risk behaviour after their involvement in a selected youth development programme,
- To explore and describe the perceptions and experiences of females after their involvement in a selected youth development programme, regarding their attitudes and norms relating to adolescent sexual risk behaviour, and
- To interpret from a feminist perspective, the perceptions and experiences of participants regarding their attitudes and norms of adolescent sexual risk behaviour after their participation in a youth development programme in a selected community in the Eastern Cape.

1.6 Research Methodology

A qualitative research approach (Carey, 2013) was employed, as it was deemed appropriate to answer the research question and satisfy the aim and objectives of the study. The primary focus was to understand the participants' own accounts of their perceptions, views and feelings, as well as the meaning they attach to the social phenomena under investigation.

A combination of an exploratory and descriptive design (Babbie & Mouton, 2007) was utilized to obtain an understanding of the phenomenon in question. The researcher endeavoured to understand why, how and the extent to which a youth development programme targeted at the empowerment of young females to influenced their lives. They were young women aged between 18 and 25 years old from a population of this investigation specific community in the Eastern Cape Province of SA. Purposive sampling (Bryman, 2008) was used to select 20 females, aged between 18 and 25 years, who participated in the selected youth development programme. The study was conducted in a rural community where 67% of the population are classified as youth between 15 and 24 years and of whom 59,5% are unemployment (StatsSA,2017; 2018). The community is characterised by high levels of poverty, unemployment, crime, have poor infrastructure, and limited resources directed at youth empowerment, specifically female-headed households. However, the DSD has demonstrated their commitment to address the scourge of socio-economic challenges, which this community encounters, notably its among females, who form up 51% of the community (DSD, 2018).

1.6.1 Data Collection

Individual semi-structured interviews were conducted using an interview guide. The interviews were conducted at the DSD offices in the community and audio recorded with the permission of the participants. Interviews were undertaken in both English and isiXhosa as they were the languages most prevalent in the research site and in which the researcher was proficient. The researcher transcribed the audio recorded interviews.

The six-stage data analysis processed proposed by Braun and Clarke (2006) was employed. Firstly, the researcher read the transcripts several times, before one script was used to start the analysis process. Secondly, initial codes were created before searching for themes. Step three

entailed the review and merger of initial themes in step four. Step five saw the researcher define and name the themes. Here, the themes were analysed and interpreted from a feminist perspective to show the link between empowerment and development. In the final sixth step, the researcher wrote the research report, drawing on links between empowerment and development.

1.6.2 Trustworthiness and Validity

Data verification and trustworthy methods proposed by Patel (in Dartey, 2017) were adopted. Credibility was established using member checking. Thus, participants were requested to review their own transcripts, and a neutral observer also checked the transcripts for correctness and authenticity. Peer debriefing as an added credibility check was also utilised though supervision consultations about the research methods used. The prolonged engagement in the research setting helped to achieve data saturation. Transferability was obtained by presenting a comprehensive description of the research setting and the processes followed in the research. Dependability was obtained by establishing data consistency and usability; here, the researcher scrutinised the sampling method, characteristics of participants, and data collection and analysis. By presenting the research results precisely, using an audit trail and a process whereby the researcher and their supervisor reached consensus about the themes that emerged from the analysis, the research attained conformability. Researcher reflexivity allowed the researcher to distance themselves from the study thereby ensuring that personal opinions and judgements did not impair the analysis. Reflexive notes and a research diary were maintained by the researcher as a means to examine bias and assumptions.

1.7 Ethics Consideration

Ethics approval was provided by the Humanities and Social Sciences Research Ethics Committee at UWC. Permission was also requested from the DSD in the Eastern Cape (see. Appendix 6) The participants were provided with consent letters in their preferred language and were asked to sign consent letters that confirmed their voluntary participants in the study. This consent also included permissions to audio-record all interviews. All interviews were conducted in the DSD office in the community site where the research took place and were approximately one hour. The audio recordings and transcripts were stored on a password-protected computer, that only the researcher had access to. No personal participant information was disclosed; only the researcher and their supervisor had access to this information. Confidentiality and anonymity of participants in the thesis and any subsequent publications that emanated from the research was assured. Debriefing sessions with an objective social worker were available to any participant who experienced any emotional discomfort during the interview process.

1.8 Significance of the Study

The findings of the study were to provide an understanding of the experiences of young females involved in the selected youth development programme. The research was to help to sensitize stakeholders and policy makers of the experiences and needs of young females as they design and implement future youth empowerment programmes.

1.9 Limitations of the Study

An identified limitation of this study was its focus on a specific population and its small sample of female participants. Given that the findings of this study only reflect the experiences and perspectives of this select community in the Eastern Cape, no claims of generalisability beyond group are offered.

1.10 Definitions of Keywords

Developmental approach: An approach to service delivery that uniquely integrates economic and social objectives, which emphasizes economic development, for the purpose of self-reliance and empowerment (DSD, 2007).

Empowerment programmes: Programmes that involve processes aimed at empowering individuals, groups, organisations, and communities deemed powerless. The processes involve, but are not limited to, creating an awareness of power dynamics, developing skills and capacity for gaining some reasonable control, without infringing upon the rights of others (McWhirther, 1991).

Poverty: Refers to the lack of opportunities and the inability to meet basic needs, such as food, housing, and access to healthcare. In addition, it violates human dignity, and a lack of basic capacity to participate effectively in society (United Nations, 1998).

Socio-economic infrastructure: Refers to the basic facilities, including health, education, and housing for economic development, which are necessary for the human development of a nation (Fourie, 2006).

Social Development: A process of planned social change, designed to promote the well-being of the population as a whole, in conjunction with a dynamic process of economic development (DSD, 2007).

1.11 Presentation of the Chapters

Chapter 1: Provides an overview of the research study. It entails the study background and introduction to the research problem, research aim, questions, and specific objectives. It provides the significance of the study, the study limitations, definition of concepts and chapter outline.

Chapter 2: Presents the literature review and the theoretical framework to contextualize the study.

Chapter 3: Provides the research methodology used in the study; the study aim and objectives, population, sampling procedures, research setting, methods of data collection, data analysis, data verification, trustworthiness and ethical considerations.

Chapter 4: Presents the study findings; demographic details, detailed discussions on themes and subthemes that emerged from the findings and chapter conclusion.

Chapter 5: Presents the study conclusions and recommendations.

1.12 Chapter Summary

This chapter summarized the study and introduced the preliminary literature review and theoretical framework. The next chapter presents an in-depth presentation of the literature on the research topic and offers a description of the study's theoretical framework with is underpinned by feminist and empowerment theories.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 Introduction

The previous chapter introduced the research study. In this chapter the literature reviewed is presented.

Creswell (2013) states that a literature review is central to the research process as it enables the researcher to gain insight into the topic under investigation. Researchers can employ various types of literature reviews (Cronin, Ryan & Coughlan, 2008). A narrative literature review has been selected to critique and summarise a body of literature related to the research topic. The choice of narrative literature review allows the researcher to draw conclusions about the topic under investigation (Creswell, 2013). According to Bryman and Bell (2014), narrative literature reviews provide a comprehensive background to understanding the current knowledge about an area of research as well as highlighting gaps in the research topic. Therefore, the literature review presented here incorporates relevant references, studies and information in line with the research topic.

Explorations for the literature review focuses on the perceptions and experiences of females regarding adolescent sexual risk behaviour (SRB). Various research sites were accessed including Google Scholar, Ebscohost, Educational Resources Information Centre, Science Direct, PubMed and the National Electronic thesis and dissertations.

Concepts that were explored related to global and regional literature, including research on adolescent SRB and development programmes aimed at youth empowerment. A discussion of the YOLO programme as a tool for youth development is also presented, as well as policy and legislation that frames youth development programmes in SA. The theoretical framework, namely, developmental social welfare, which underpins adolescent and youth development programmes in SA, are also discussed in this chapter.

2.2 Female Adolescent and Sexual Risk Behaviour

2.2.2 Defining Adolescence

Adolescence is defined differently in different contexts and is a term which is socially constructed regarding both age and social context. The World Health Organisation (WHO, 2017) distinguishes between adolescents (age 10-19 years); youth (age 15 -24 years) and young people (age 10-24 years). Thus, the socio-cultural and economic context in which the person lives determines how adolescence is defined and who might be referred to as an adolescent. To highlight the influence of context on how the terms are defined, the South African National Youth Development Policy Framework (2015 -2020) defines youth as a group aged between 14- and 35-years, while the South African National Adolescent and Youth Health Policy (SANAYHP, 2017) defines adolescents and young people as those between 10 and 24 years. Given the South African location of this study, the definition and criteria proposed by the National Youth Development Policy Framework (2015-2020) for adolescents was used.

Adolescence literally means to grow up (Lemer & Steinberg, 2009). Kar, Choudhury & Singh (2015) indicate that the term adolescence is derived from the Latin word adolescere which means to grow up. They further state that adolescence is a critical stage of development that

involves major biological and psychological development in an adolescent's thoughts and perceptions, as well as their response to their developing sexuality (Kar, Choudhury & Singh, 2015). The term adolescence is also defined as the stage of life that starts with puberty and, later, with adult independence (Blakemore & Mills, 2014). Therefore, this stage in a young person's life is a period of deep social, psychological, and biological change. It is also a period in an individual's life where time is mostly spent with peers, when one's self concept starts to change and when one's wellbeing and behaviours come under increased influence of risk taking and risk perceptions (Blakemore & Mills, 2014).

According to Blakemore, Mills, Crone and Dall, Steinburg and Telzer (in Yeager, Danl & Dweck, 2018) adolescence is a maturational stage of great exploration, learning and opportunities for the individual. It is also characterised by age, social, hormonal, biological and behavioural changes. Additionally, adolescence is furthermore characterised by several behaviours as Hofmann, Sawyer and Fang, 2012 (in Lucian, Bjork & Nagel, 2018) observe that it is a critical period for the development of emotional skills. However, it is also a period where dysfunctional development can occur, which can have severe negative consequences leading to mental health challenges, risky behaviour and poor social skills.

2.2.3 Sexual Risk Behaviours and their Consequences in Adolescence

Risky sexual behaviour is regarded as irresponsible sexual behaviour such as having sex with multiple partners, not using protection such as condoms when engaging in sex, forgoing the use of contraceptives, having sex when under the influence of mind-altering substances (drugs and alcohol) and engaging in dangerous sex practices such as violence and using dangerous objects while having sex (Amoateng, Kalule-Sabiti & Arkaah, 2014; Groenewald, Essack &

Khumalo, 2018; Ngidi, Moyo, Zulu & Adam, 2016; and Ssebunya , Matovu, Makumbi & Kisiti., 2019).

According to Baams, Dubas and Overbeek (2014), some consequences of SRBs include unwanted pregnancy, contracting sexually transmitted infections (STIs) or HIV and abortion. When adolescents engage in SRBs there is also a need for immediate intervention to prevent the detrimental consequences of possible unwanted pregnancies, STIs or HIV infection (Baams et al, 2014). Davids, Roman and Leach (2015) contends that several risk behaviours displayed during adolescence affect an individual's health and wellbeing at a later stage, nothing further that adolescent decision making depends mainly on the social environment in which they find themselves. Furthermore, adolescent behavioural and health problems can emerge or worsen with consequences that will extend to adulthood (Yeager et al., 2018). Adolescents who engage in risk sexual behaviours are likely to encounter behavioural problems in young adulthood and are also likely to be less educated, experience teenage pregnancy, abortion, early parenthood, have low-income jobs or be unemployed (Thornberry & Krohn, 2001).

Like other sub-Saharan African countries, SA is also confronted with a high prevalence of HIV/AIDS, STIs and teen pregnancy (Xoko, 2017). To prevent and address these social ills, it is important to understand risky sexual behaviours that occur among adolescents and teenagers (Gebregiorgis, cited in Xoko, 2017).

Adolescent females who engage in SRBs are likely to become infected by HIV and STIs (Harris & Cheney, 2018). Porter (2019) regards the lack of confidence in adolescent girls as a factor associated with risky behaviours, including illicit drug use, early sexual experiences and

delinquent behaviours. Early initiation of sexual behaviour has also been linked with the increased risk for unwanted pregnancies, STIs and depression (Baams et al, 2014). Similarly, a study by Dilebo (2018) found that adolescents face a vast range of sexual and reproductive health risks, which emanates from teenage pregnancy, early unprotected sex and STIs (Dilebo, 2018). The Widman, Bradly and Noar (2016) study that investigated adolescents in the United States of America confirmed that SRBs among adolescents represented is a serious public health problem. Although adolescents make up only a quarter of the sexually active population, they contract half of all STIs and are at highest risk of unintended pregnancy (Widman, Choukas-Bradley & Noar, 2016).

A comparative analysis of HIV policies for adolescent women in SA conducted by Mouk (2019) found that adolescent women are up to six times more likely to become infected with HIV than their male counterparts. Tlhako (2016) in her study exploring socio-economic, cultural, and environmental factors influencing young women's vulnerability to HIV in Pretoria, also reported that women face a greater risk of contracting HIV infections compared to men. The study also found poverty, peer pressure and multiple sexual partners as a major factor that increased adolescent women's vulnerability to contracting HIV and STIs (Tlhako, 2016).

In a study investigating the relationship between socio-economic status and transactional sex among young women in SA, Sello (2017) reported that across the Sub-Saharan Africa, transactional sex is characterised by the exchange of money or gift for sex. The study also found that multiple sexual partners, non-condom use, and transactional sex are the driving forces behind negative health outcomes for the adolescent females compared to their male

counterparts. Meshki, Lin and Tsai (2019) also reported the existence of a correlation between increased low-income households and the likelihood of adolescents in these communities displaying health problems such as HIV/AIDS which are associated with risky sexual behaviour.

Using drugs in early adolescent has been associated with distinct problems such as risky sexual behaviour, health problems, depression, crime and drug addiction, which are often manifested at a later age in adulthood (Rich, 2020). Adolescents with limited involvement and participation in school related programmes have been found to be at a higher risk of juvenile delinquent behaviours such as; alcohol problems, aggressive behaviours, sexual risk-taking behaviours and teenage pregnancy (Wadsworth et al. in Ansong, Okumu, & Hamilton, 2018).

Parent-adolescent communication is regarded as another contributor to SRB during adolescence. However, Moshotane (2018) opines that while parents are aware of their role and responsibilities towards adolescents' sexual behaviours, but they suitably informed about the form their involvement should take, for example, whether they should advise or communicate about the nature of risky sexual behaviours with their adolescents. Consequently, some parents believe that discussions about sex with their adolescents will lead inadvertently to risky sexual behaviours. Davids et al (2015) maintains that paternal and maternal parenting styles impact health lifestyles, behaviours and the development of adolescents. The importance of parent-adolescent relationship was also highlighted by Anyanwu (2018) who found that the adolescents in his study felt disconnected with their parents because of the age gap. As a result, disengagement by parents about sex education with their children, adolescents feeling vulnerable and display deviant behaviours and engage in SRB. Dietvorst, Hiemstra and Hillegers (2018) found that family dysfunctionality, poverty and unemployment were attributing factors that contributed to SRB in adolescent women. Furthermore, it was also

established that secretive behaviour on the part of adolescents had specific significant implications for SRB, suggesting a link between limited communication between parents and adolescent children and risky sexual behaviour (Dietvorst et al., 2018)

A study by Moraope (2014) found that adolescents engaging in risky sexual behaviour such as having sexual relationships with older persons, having multiple sex partners, engaging in transactional sex and watching pornography, often had limited sexuality education. This study also found that the absence of positive role models, poverty, peer pressure, the lack of privacy and the beliefs in myths about sex were contributing factors to risky sexual behaviour (Moraope, 2014). Similarly, Wang's (2009) study conducted with adolescents in the Western Cape province of SA reported that increased sexual risk- taking behaviours can be linked to specific familial and environmental characteristics, such as marital status of parents and family conflicts.

In a study to determine HIV/AIDS knowledge gaps and factors that influence the perceptions of the risks of contracting of HIV/AIDS in relation to the sexual behaviour of high school learners in Port St Johns, Eastern Cape, Kibirge (2014) found that, females who had inaccurate perceptions about sexual risky behaviours were easily involved in unsafe sex. These studies suggest that limited reproductive health knowledge may play a contributing role in the SRBs displayed by female youth in both rural and urban areas of South Africa (Xoko, 2017).

Early sex debut is a further contributing factor contribution towards SRBs as adolescent females face sexual risk experiences (Ncitakalo, 2011). SRBs are experienced during the adolescence and continue into adulthood, thus affecting the health and wellbeing of an

individual in their later life stages (Pharaoh, 2014). Adolescent SRBs are known to rarely occur as an 'once-off' activity, rather there is growing evidence from various studies suggesting that it may be more relevant to look at a bigger picture of sexual risky behaviours that occur concurrently. Gateway theory (Hale, Fitzgerald-Yau &Viner, 2014) proposes that participation in sexual risky behaviour can increase the likelihood of adolescent women to engage in another risky behaviour. Cooper, Lhussier and Shucksmith (2017) postulate that even though adolescence typically represents a healthy stage in the human life cycle, various risky health behaviours such as alcohol abuse, smoking, drug abuse and risky sexual behaviours can become a major concern during this stage of the life cycle.

2.2.4 Cultural Norms as a Risk Factor

Higgins, Hoffman and Dworkins (2010) opine that systems of oppression and male domination predominantly account for women's disproportionate vulnerability to HIV infection. A study on masculinity and HIV/AIDS in Botswana furthermore demonstrated that it is customary for men to have higher socio-cultural status than women in some communities (Rakgoasi & Odimegwu, 2013). Thus, men dominate women when making decisions at home and on issues related to sex and private relationships (Rakgoasi & Odimegwu, 2013). A study by Mokoele (2013) further found that traditions and culture were implicated in gender inequality practices. In Lesotho, Ramalefane's (2014) study showed how cultural and religious traditions resulted in women and young girls being brought up in a manner that placed them at a lower social status than men or boys. Similarly, the study by Mokoele, (2013) in Limpopo, reported that the lower social status and self-esteem experienced by women were attributed to Basotho norms and cultural practices.

A study by Luthanda (2017) conducted in Limpopo South Africa also confirms how cultural norms, which consists of boy's initiation at schools and polygamous marriages, contribute to the belief that boys and men are the principal wage earners in their communities. Furthermore, these cultural norms created acceptance in these communities that men should exhibit aggressive and controlling behaviours and that they be considered the main decision makers; thus positioning men as more powerful and superior to women or young girls.

Adolescent risky sexual behaviours are regarded as influenced by the social and cultural norms and practices in communities (Mantell in Ncitakalo, 2011). This is a view which is dominant in many South African communities where men are seen as the primary wage earners. Men are also regarded as the primary decision markers within sexual relationships and determine condom use. Additionally, there is an acceptance that men are more sexually experienced than women and have multiple sex partners. Also, men are likely to be heads of households because they have more power than women in their community (Mantell in Ncitakalo, 2011). Leclerc-Madlala, Simbayi and Cloete (2009) are of the opinion that patriarchal social norms give advantage and power to men while it oppresses and marginalises women. Additionally, men regard themselves as being naturally superior to women and thus expect women to submit to their male counterparts (Leclerc-Madlala et al., 2009). A study by Geldenhuys (2011) on gender-based violence in two rural schools in Kwazulu-Natal found that men's patriarchal power was a major cause of gender-based violence. Therefore, the manner in which social and cultural factors are accepted in a community shapes the behaviour of individuals in that society. It is no wonder that this patriarchal mind-set is seen as one of the factors influencing gender-based violence and the oppression of women in a society.

In the study conducted by Shabane (2011) on gender, sex, power and inequalities in the context of HIV/AIDS at Kwamashu, in the Kwazulu Natal province of SA, gender inequality was found to be inherent in most patriarchal cultures evidenced by the extent to which boys and men up knowingly believing that they are socially superior to girls and woman. Patriarchal cultural practices are known to increases gender inequality and the vulnerability of young girls to sexually transmitted diseases. Frequently, young girls experienced oppression by men, are forced to marry older men or strangers hereby increasing their risk of contracting HIV/AIDS and other sexually transmitted diseases (Shabane, 2011). Mokoele's (2013) study concluded that gender inequality was a major concern in the rural areas of Limpopo. Patriarchal practices continue to oppress women in rural areas of Limpopo to the extent that women are denied the power to make certain decisions and are reduced to a lower socio-economic status when compared to men (Mokoele, 2013).

2.2.5 Policies and Legislation for Youth Development Programmes

International frameworks are aimed at improving the health, education, security and the livelihoods of children, adolescents and young women (Toska, Hodes & Cluver, 2019). Consequently, intervention programmes targeting adolescent SRB have become more visible in both policy and practice in the last few years (Fuller, 2012; Sawyer, 2012).

The South African legal and regulatory frameworks that guide children, adolescents and young peoples' rights have been at the centre of policy reforms. These reformations ensure government's commitment to providing healthcare services, basic education, social services, housing, water and sanitation to the most vulnerable in society.

Despite these governmental reforms outlined in Table 1, research (Sibanda & Lombard, 2015; RSA, 2018) show that it is not possible for government role players and stakeholders to implement these policies and legislation because such programmes are not consistently monitored and evaluated, thus making it difficult to achieve programme objectives.

Table 1: South African Policies aimed at Children and youth protection and wellbeing

Policy	Aim	Objectives	Challenges
Adolescent and Youth health Policy (AYHP, 2017)	Provide guidance to the department and various organisations working with the Department of Health	Improve sexual reproductive health, violence, nutrition, obesity and substance empowerment.	Lack of access to services by youth. Lack of monitoring and evaluation of the programme.
National Youth Development Agency, 2020	Provide a monitoring and evaluation framework and system which will enable co-ordinated nationwide reporting of youth development programme's implementation in all sectors.	-To ensure participation of young people in economy. -To promote access to quality education and skills to in and out of school youth. -To create job opportunities for youth. -To improve health and wellbeing of youth. -To ensure promotion of sport, arts and culture and raise awareness.	Implementation without means of tracking. Poor reporting, lack of uniformity and inaccurate data.
National youth policy, 2020-2030	Facilitate, coordinate and monitor the implementation of youth development programmes and policies as well as initiate and implement strategic project.	Integrate youth development into the mainstream o government policies. Ensures that policies function effectively. Strengthen the capacity of key youth development institutions to ensure delivery of youth services. Strengthen a culture of patriotic citizenship among young people and help them become responsible individuals.	Youth policy is being implemented by multiple stakeholders and partners including government and civil society without any means of tracking and however this result in poor reporting.

		Ensure participation by youth in building activities. Ensuring gender equality and enforcing the spirit of Ubuntu by all.	
Children's Act 38 of 2005	Focus on family preservation, care and protection of children, chapter two guidelines and highlights that the best interest of the children is of most important concerning their care and wellbeing.	Aim of the Act is to give certain rights of children as contained in the constitution. To set out principles relating to the care and protection of children. To define parental responsibilities and rights; to make further provision regarding children's courts; to provide for partial care of children; to provide early childhood development ; to provide for the issuing of contributing orders; to provide children alternative care; to provide for foster care, adoption , drop in centres and child and youth care centres.	Lack of capacity from stakeholders to implement the Act. Shortage of resources to implement the Act. Shortcomings in the new legislation.
Integrated Youth Development strategy	The IYDS has been developed to be a holistic and integrated strategy which should respond to all socio-economic needs of young people in South Africa.	Improve sexual and reproductive health education within families.	Poor monitoring and evaluation of the programme
National Development Plan, 2030	Aim to focus mainly on youth more especially at those at age 15-35 year.	National development plan highlight needs for economic empowerment, job creation and skills advancement among youth.	Poor monitoring and evaluation of the programme.

Source: Children's Act 38 (2005); Sibanda and Lombard (2015); RSA, (2018)

2.2.6 Development Programmes for Addressing Sexual Risk Behaviour

A development programme is a set of organised activities supported by a set of resources to achieve a specific and intended result (Centre for Disease Control, 2012). Harris and Cheney (2018) claim that programmes that target youth development serves as an important strategy able to affect sexual health relationships and equip adolescents to make healthy choices concerning their sexual life. Youth Development is an approach that encourages the development of young people and adolescents by decreasing sexual risky behaviours and eliminating other risky activities that obstruct good health within the community (Perkins, 2009).

Susan and Marshalla (2018) describe several strategies and initiatives that have been used to reduce adolescent SRB and to promote healthy sexual relations in Uganda. The DREAM (Determined, Resilient, Empowered, Aids-free, Mentored and Safe) is such an initiative aimed at addressing SRB and promote sexual health in adolescents. The DREAM project was designed to reduce and prevent HIV transmission amongst adolescent girls and young women in Sub-Saharan have reported reductions in HIV infections rates. The project utilised a mixture of interventions that aimed to; empower young women and girls to reduce their risk of contracting sexually transmitted infections and spreading them to their sexual partners (United Nations, 2018).

In a study that investigated the factors that influenced the adolescent peer education, Marzieh, Zeinab and Zohreh (2016), reported that peer education was an effective strategy to improve adolescent behaviour as it affects adolescents' knowledge, attitudes and beliefs regarding

various health issues. Marisen and Adamson (2019) in their study in Malawi, also found that peer educational interventions impacted HIV risk reduction. However, a study by Mathews, Eggers and Townsend (2016) reported that while the PREPARE intervention programme reduced the chances of HIV and STIs infections, it did not reduce adolescents' SRBs. The researchers suggested additional studies were needed to investigate the impact of adolescents SRB (Mathews et al., 2016).

Catalano and Petoni (2019) recommend positive youth development as a key strategy for youth development programmes in developing countries. This recommendation takes into consideration that positive youth development has the potential to empower youth with the correct skills and the sexual reproductive health knowledge required to build healthy relationship, while grooming adolescent for a successful adulthood. A study by MacArthur, Cadwell and Redmore *(*2018) found that school-based interventions addressing multiple risk behaviours in adolescents played a significant role in eliminating tobacco, alcohol and illicit drug use, anti-social behaviours and improved physical activity among young people. Dupas, Huilley and Seban (2018) in their study of risk information, risk salience and adolescent sexual behaviour in Cameroon, reported that sexual education programmes aimed at adolescents had a significant impact on sexual health knowledge. Such programmes that were facilitated by trained instructors during school hours also appeared to contribute to reduced teenage pregnancy rates in the months following the programmes. While Susan and Marshalla (2018) in their study, exploring the experiences and perceptions of adolescents and their teachers regarding school-based sexuality education programmes, reported that adolescents benefited from the programme even though national officials, community members and some families were against the offering of the programme in the schools. Notwithstanding these challenges, Bhebe (2018) argues that positive youth development programmes in SA are required to

address the multiple challenges faced by the youth resulting from the harsh socio-economic and environmental factors, such as poverty, alcohol and drug abuse, teenage pregnancy, violent behaviour and dropping out of school. Similarly, Catalano and Petoni, (2019) agree that positive youth development programmes have resulted in positive outcomes and have a direct effect on adolescent risky sexual health behaviours, including substance abuse.

However, Mouk (2019) cautions that increased knowledge (about what?) had limited impact on adolescent women. Instead, they reported that a small financial assistance programme resulted in consequential behavioural changes in adolescent women and reduced HIV risk among participants of the programme. Similarly, Fudu (2017) assert that youth development programmes that include participants in the planning of the programmes, as well as providing opportunities for participants to reflect and learn from their mentors, resulted in youth empowerment. Thus, the implementation of youth development programme that place adolescents at the centre of the programme, from the planning to the implementation stages, has proven to be more effective (Fudu, 2017).

Programme evaluation has been demonstrated to be paramount in the success of youth development programmes. Using the DREAM toolkit to conduct a programme evaluation, Bhebe (2019) established that the programme was reliably implemented in a manner that satisfied the participants while also assisting adolescents to overcome their life challenges. The "Girls Only" programme employed group-based interventions to the improve self-esteem of at-risk adolescent (Porter, 2019) The results of this study reported that, on completion of the programme, participants' self-esteem was boosted and further emotional and behavioural problems were not evident (Porter, 2019). Wasiu (2012) notes that sport-based prevention programme for sexual risk reduction have a positive impact because adolescents who participated in this programme had higher self-efficacy, committed to abstain from sex during

adolescence and were able to express their needs. Another recommended youth empowerment programme, with the objective of increasing the impact of various inventions in SA, took the form of a three-year empowerment programme aimed at coordinating the planning and monitoring of programmes for adolescence girls and young women (SheConquers, 2019). The Youth Risk Behaviour Survey (YRBS, 2019) also represents another strategy used to monitor the high prevalence of teenage pregnancy health risk behaviour, alcohol and drug abuse that affects youth from adolescent to adulthood (YRBS, 2019).

Aiyede (2015) explored the perception of high school teenagers in the Whittlesea area in Eastern Cape- who participated in a sexual health promotion programme. The programme comprised sexual health education and the building of life skills. The participants found the programme to be practical and helpful. It is suggested that schools act as a beneficial site for implementing adolescent health programmes (WHO, 2017). Youth empowerment programmes offered by the government at schools have been shown to keep pregnant adolescent girls in schools. Such programmes have also been found to help reduce SRBs among adolescents, delay unplanned pregnancies, and decreasing the rates of HIV infections. Researchers (Mehra, Daral & Sharma, 2018; Kuo, Mathews & LoVette, 2019) agree that school attendance, sexuality education and feeding schemes can have a positive impact on reducing exposure to SRBs in adolescents. Furthermore, these programmes also provide access to supportive services which are available to schools and help to cultivate healthy relationships amongst adolescents.

2.3 You Only Live Once (YOLO) Programme for Youth Development

In SA, the YOLO is a Department of Social Development programme aimed at youth between the ages of 15-24 years. It was developed to respond to the social and behavioural drivers of HIV, particularly among vulnerable young people (DSD, 2018). The aims of the YOLO Programme are as follows:

- To build young people's resilience, self confidence and self-esteem.
- To reaffirm young people's human rights in terms of sexual and reproductive health.
- To minimise HIV transmission among the youth through skills development around risky sexual behaviour.
- To build young people's knowledge, attitudes, and skills to voluntarily assume positive practices and sustain positive behaviour outcomes.
- To develop and invest in social skills, in young people to build healthy relationships and communicate effectively about their healthy sexual choices.

The YOLO programme is an empowering programme focused on youth development and reducing risky behaviour, especially among vulnerable groups in poorly resourced communities. In Figure 1 below, the structure of the YOLO programmes is graphically illustrated.

Figure 1: The structure of the YOLO programme

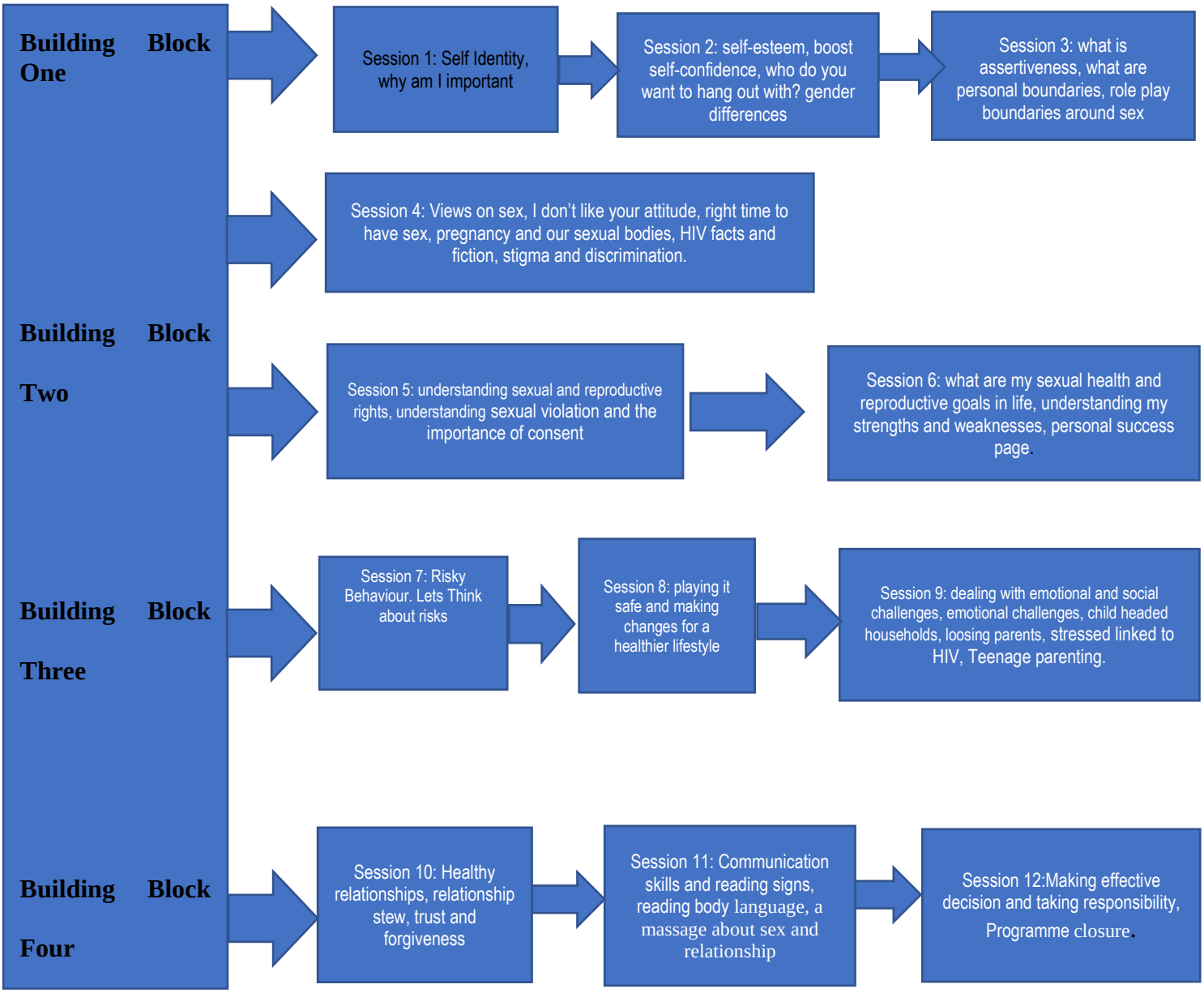


Figure 1 shows the five pillars on which the YOLO programme is based. YOLO is designed and comprises five key building blocks. Each block has several learning and expected behavioural outcomes. The five building blocks comprise twelve sessions, with specific learning outcomes, that address different social and behaviour skills required to assist youth in reducing HIV transmission and unplanned teenage pregnancy. YOLO sessions are aimed at

helping young people to become accountable and responsible citizens. These sessions are facilitated by social workers from the Department of Social Development (DSD, 2018).

Some of the key objectives of the DSD and the Government Capacity Building and Support include strengthening social and behavioural change to prevent HIV infection in children and youth (RSA, 2018). In July 2018, the Private Agencies Collaborating Together or PACT hosted a pre -conference event on the topic of addressing the needs of adolescent girls and young women in the fight against HIV/AIDS. The YOLO programme is regarded as key in helping young people to achieve a sense of identity, a need for positive social interaction and develop skills and attributes, such as self-confidence, a positive self-image, assertiveness and decision-making skills. The programme contributes to efforts towards attaining a HIV/AIDS free generation.

It can thus be argued that youth development programmes have an important role to play in the SA context. Studies have highlighted the limited contribution parents make towards sex education and also shown that dominant culture norms linked to patriarchy influence levels of gender-based violence, marginalisation and oppression of women by men. These factors are linked to the increase of risky sexual behaviours by adolescent girls and young women.

2.4 Challenges of Youth Development Programmes

According to Kabo (2017) there are several challenges that impede the implementation of youth development programmes and social policies; these challenges are outlined as follow:

- Absence of effective empirical, social policy research

Studies conducted by scholars and self-governing bodies are not taken serious by governments and do not inform policy development. The government regards the findings of these studies as providing insufficient evidence for effective policy interventions.

- Coordination problems

The failure of the government developmental programmes are the result of the lack of monitoring and evaluation which leads to incompetence, wasteful budgets and repetition of activities. However, there is no monitoring and evaluation to ensure that the programmes are implemented with the same aim as the programme was planned.

- Top-down policy process

The failure of government to include young people's voice during the policy planning hinders youth development programmes in the implementation phase. Furthermore, in some instances, it becomes difficult to interpret these policies and to translate it into reality. Kabo notes that it has been a government tendency to develop youth programmes without youth involvement in the planning stages and they can't even make inputs on programme development.

It is argued that youth development programmes and policies for youth are developed to gain political control over youth, hence most programmes are established during or around election time.

- Inadequate training mentorship

The failure of developmental programmes is caused by the absence of training and mentorship for programme recipients.

- Exploitation of participants

Youths are exploited by government by being offered intern positions and freezing of permanent positions. This creates frustration, as there is limited hope that they will be absorbed by permanent vacancies. Insufficient salaries also cause additional levels of oppression.

- Lack of monitoring and evaluation

Not much attention is paid to the impact of the programme on the intended beneficiaries; in particular, sustainable employment creation and improvement of youth livelihoods.

It would see that government is more interested in the number of projects that can be funded, and the number of young people that have been assisted instead of the impact the interventions have made to improve the quality of life of the target population. Thus, it seem that monitoring and evaluation of programmes are somewhat neglected. Keetile (2014) also highlighted the significance of monitoring and evaluation, stressing that there is a need for programme monitoring and evaluation to check the impacts of these programmes on the participants' lives and futures.

South Africa has a disproportionate burden of HIV infection with 7.7 million people living with HIV/AIDS (UNAIDS, 2018). The country faces several challenges regarding the implementation of HIV treatment and intervention programmes. According to the Human Science Resource Council (2018:19), the challenges faced in curbing HIV in young people include: gaps in the epidemiological and behavioural profiles of young population and the complex process involved in conducting HIV research with adolescents and young people; contradictory age-related legislation and policies on consent to sex, access to HIV testing and counselling, as well as sexual reproductive health services.

In the Eastern Cape, the limited way in which adolescents and young women in rural communities communicate about risky sexual behaviours remain a challenge. This is because parents and schools focus only on promoting the avoidance of pregnancy and HIV /AIDS, while neglecting other contributing factors to risky sexual behaviours. It has also been noted that the Eastern Cape has not moved from past cultural norms that expose adolescents and young women to risky sexual behaviours. This suggests that rural families are not taking into consideration the adaptation of their cultural practices to modern times. Furthermore, there is still an indication that most adolescents will be sexually active without being capacitated with skills and adequate knowledge of SRBs to enable them to protect themselves from HIV/AIDs (Mantell in Ncitakalo, 2011).

2.5 Theoretical Framework

A theoretical framework of a research study assists in explaining the importance and significance of the research problem or phenomenon (Lederman, 2015). This study was informed by the two theoretical approaches namely feminist theory and empowerment theory. Feminist theory is comprehensively discussed in this chapter as it is the chosen theoretical framework for this study. Empowerment theory acts as the second theory in this research and is used to understand the empowerment of women and young adolescent in this study.

2.5.1 Feminist Theory

Feminist studies typically employ features of ethnography and history. This allows women's voices to be heard and their viewpoints to be accentuated as it is assumed that t women acquire knowledge and view the world differently from men (Rubin & Babbie, 2014). The Feminist

theory is used to explain the reason for women's oppression while providing further explanations of the cause of inequality experienced by women in different contexts (Stanley & Wise, 1983). Stanley and Wise (1983) claim that feminist research can only be done by feminists and that men cannot be feminists because they cannot share women's experiences of oppression. Delma (1972) defines feminism as the radical movement of women, with women responding to their own oppression. Factors identified as contributing to women's oppression are biological, psychological and economic (Delma, 1972) cited (in Stanley & Wise, 1983).

Feminists are normally concerned with empowering females, supporting their initiatives and implementing qualitative research (Anastas, 2017). Furthermore, feminists see females as the most oppressed and marginalised group in a community. They share a common belief that women are oppressed (Stanley) cited (in Stanley & Wise, 1983). Feminists also accept that women are oppressed due their experiences, arguing that women's oppression is not unavoidable, but it can be transformed (Stanley) cited (in Stanley & Wise, 1983). Additionally, Campbell (2004) notes that social personalities are not necessarily permanent and thus they can be changed.

With respect to research, feminist theory asserts that the researcher's own experiences and involvement in the research play an important part. It is therefore acceptable for the researcher to make assumption based on what she has experienced and witnessed (Stanley, 1993). For many academics, feminists research is conceived of in specific terms. Their empirical and theoretical investigations address a range of topics that often cohere around notions of sexual differences (Stanley & Wise, 1983).

In the context of this study, several researchers have reported how women are marginalised and oppressed in different ways. For examples, studies have shown how gender-based inequalities and poverty amongst women have led to increased levels of transactional sex between women and older men as a mean for women to gain financial stability. Submission by young females to their male partner during sexual activities leads to unprotected sexual behaviour. Evidence from the literature show that adolescent girls are frequently not in control of their sexuality and have limited information about how to engage in sexual activities (Flanagan, 2013). Moreover, young SA women lack equal decision-making powers when it comes to having sex which hinders their adoption of safe sex practices (Flanagan, 2013).

In certain cultures, topics that address sexuality are regarded as taboo, yet young women are blamed when they become pregnant due to lack of information. Young women and adolescents are also marginalised and sometimes forced into marriages with older men for personal gain. With limited negotiating power, women are unable to insist on condom use.

A feminist approach was selected to contextualise the phenomenon under investigation, because feminist studies commonly use qualitative methods and is associated with qualitative research (Rubin & Babbie, 2014). Feminist studies typically employ features of ethnography and oral history and attempts to allow women's voices and their points of view to be heard (Rubin & Babbie, 2014). According to (Rubin & Babbie, 2014), the feminist paradigm focuses on using research to empower women. The feminist paradigm speaks to this study, because the objectives of this investigation seek to explore and describe young females' perceptions and experiences regarding SRB after their involvement in youth development programme in a selected community in the Eastern Cape.

Secondly, his theory is relevant to the study as it is valuable in helping to explain the conditions of women's levels of marginalisation and oppression in the context of their early sexual debut. Such early sexual experiences may in turn result in HIV infections, STI's, unplanned pregnancies and other sexual risky behaviours whose negative consequences threaten to impact the lives of adolescents into adulthood (Stanley & Wise, 1983; Anastas, 2017).

A final reason for the adoption of a feminist theoretical framework is based on the ability of this approach and its empirical and theoretical methods to explain and contextualise the exclusion and discrimination typically experienced by women (Carey, 2013). (Nna & Nyenke, 2005) notes that the theory of feminism assumes that political inequalities experienced by women reflect the socio-economic and domestic inequalities. They further argue that unless the structures which engender inequality are dismantled, women will remain politically disempowered (Nna & Nyenke, 2005). Therefore, this study places gender at the centre of social enquiry, while presenting the diversity of women's perspectives.

2.5.2 Empowerment Theory

Empowerment is the process whereby people take a stand about what they want to achieve in life and start to plan on how to achieve their goals (Rappaport, 1984). Rappaport (1987) furthermore defines empowerment as a process whereby people gain control and power over their lives. A more extensive definition is offered by Maton (2008:20) who sees empowerment as a "group based, participatory, developmental process through which marginalised or oppressed individuals and groups gain control over their lives and environment, acquire valued resources and basic rights and achieve important life goals and reduce societal marginalization". Empowerment and participation by young people and adolescent go hand-in

-hand. Adolescents have an obligation to be involved in any youth development and empowerment programmes. Empowerment is a stage where people are involved in decision making that can affect in their lives for the better (Masango, 2002). Thus, empowerment theory can be viewed as a dimension of the feminist theory and is an appropriate means for contextualising the experiences of female adolescents and young women regarding the YOLO programme they were engaged in.

According to (Hoaeane, 2018) empowerment theory contributes to youth development through the capacity it offers to reassure youth to make reasonable changes that can improve and give them control over their own lives. (Hoaeane, 2018). The term empowerment is used when people gain positive power to decide for themselves. It also includes a belief in self-effectiveness and a positive sense of self-esteem (Zimmerman, in Hoaeane, 2018). Rappaport (1984) also agrees that empowerment can occur in any sphere of life; it is a process where people, communities and institutions gain power over their lives. Thus, empowerment is the ability of individuals to gain social, political, economic and psychological control through (1) access to information, knowledge and skills; (2) decision making; (3) individual self-efficacy, community participation and perceived control Rappaport and Zimmerman (in Hoaeane, 2018)

Mosedale (2005) proposes four features of empowerment, which include: (a) being disempowered or powerless, continuous disempowerment of women by men clearly indicates that women do not need men but need to be empowered, (b) no third party can empower another person which means that for empowerment to be successful individuals needs to be fully involved in the empowerment process, (c) the empowered individual has to cultivate a sense of constructing resolution about important issues in their life, (d) empowerment is not a once-

off occurrence, it is continuous. Therefore, it can be postulated that empowerment is a process whereby individuals train themselves with skills and information that will permit them to change their own life (Kasturirangan, 2008).

In the context of this study, it means that should the developmental initiatives and empowerment programmes that focus on addressing adolescent risky sexual behaviour be implemented, adolescent and young people increase their power and exercise more control over the challenges they confront in relation to risky behaviours and take reasonable decisions about their lives for the future. This theory is therefore relevant to this study as it deals with how people can before empowered to improve the quality of their own lives. Young women and girls can be empowered to take more control over their lives through their involvement in decision-making processes that affect them, including taking control of their sexual relationships and enabling their movement away from oppression and marginalisation at the hands of their male counterparts.

2.6 Chapter Summary

This chapter presented the literature that was reviewed to conceptualise the study and also discuss the feminists' and empowerment theories employed to contextualise the research phenomenon. In the chapter that follows, the research methodology is presented.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The previous chapter presented the literature and the theoretical framework underpinning the study. This chapter focuses on the research methodology that was utilised during the research process. Presented here are the aims and objectives, population and sampling procedures, research setting, methods of data collection, data analysis and data verification. Methods of trustworthiness as well as the ethical approval procedures that were used in this study are also outlined. The chapter is concluded with a discussion of the significance and limitations of the study, and a final chapter conclusion.

3.2 Aims of the study

The aim of the study was to understand the perceptions and experiences of females regarding adolescent SRB after being involved in a youth development programme in a selected community in the Eastern Cape.

3.4 Objectives of the study

The following objectives were pursued in this study:

- To explore and describe the perceptions of females regarding adolescent sexual risk behaviour after their involvement in a selected youth development programme,
- To explore and describe the perceptions and experiences of females regarding their attitudes and norms relating to adolescent sexual risk behaviour after their involvement in a selected youth development programme.
- To interpret from a feminist perspective, the perceptions and experiences of the participants regarding their attitudes and norms of adolescent sexual risk behaviour after their participation in a youth development programme in a selected community in the Eastern Cape.

3.5 Research

The study was conducted in a selected municipality in the Chris Hani district in the Eastern Cape province of SA. The community, where the study was conducted, is a rural area in which 67% of the population are youth between 15 and 24 years of whom 59,5% are unemployed (StatsSA, 2017; 2018). The community has high levels of poverty, unemployment and crime, as well as poor infrastructure, and limited resources aimed at youth empowerment, especially aimed at female-headed households. The DSD offers programmes to address the scourge of these socio-economic challenges, faced by the community, especially among females, who make up 51% of the community (DSD, 2018; RSA, 2018).

3.6 Research Design

Research design is a detailed plan regarding how to conduct a research study and provides information about the operational variables, selection of a sample, the population and data collection and analysis (Creswell, 2014; De Vos *et al*, 2005). A qualitative research approach (Carey, 2013) was employed, as it was deemed appropriate to answer the research question, as well as satisfy the aim and objectives of the study, while allowing the researcher to make sense of a phenomenon. The primary focus was to understand the participants' own accounts of their perceptions and views, and the meaning they attach to the social phenomena. According to Babbie (2016) research comprises three purposes; to explore, to describe and to explain.

> The current study aimed to explore and describe adolescent SRB, by gathering participants' perception and experiences after being involved in youth development programme in a specific Eastern Cape community.

In order to address the research question, a combination of exploratory and descriptive designs (Babbie & Mouton, 2007) was used. This also helped secure an understanding of the phenomenon in question. Explorative and descriptive designs require the adoption of a qualitative approach, as it intends is to interpret human perceptions and experiences (Bonnie, Yegidis, Weinback & Meyers, 2012). Creswell (2013) contends that the qualitative approach is employed to understand social phenomenon and explain the phenomenon. This study enabled the researcher to explore and describe the lives of individuals in an in-depth fashion and the barriers or challenges they encountered from their own perspectives.

In Table 2 below, the differentiating features and characteristics of the qualitative and quantitative approaches are summarised.

Table 2: Difference between Qualitative and Quantitative Approaches.

Qualitative Research Method	**Quantitative Research Method**
This approach occurs in a natural setting and reflects real world results, which provide a more realistic view of the world	This approach often occurs in sterile testing environments for example labs and might reflect laboratory results.
The researcher is the primary instrument in data collection and interacts with the participants in their own language and familiar setting through immersion of the situation of context.	Non-living mechanisms are used to gather data but can provide a greater sample.
Multiple sources of data (interviews, observations) provide a holistic view of the study.	Collects numeric data using various sources and over time.
Data in this study is descriptive in the form of pictures and words. Researcher when collecting data can be extend to observation.	Data is not descriptive but in numbers
Limitations	Generalizations are made and personal bias can be avoided.

Source: Creswell (2014).

Qualitative research occurs in the real world and allows the researcher to study human lives and investigate their experiences and their perceptions. This research approach provides descriptive data, while quantitative approaches privilege the use of numbers. Moreover, qualitative research investigates how people or participants live using mostly written or textual data rather than the presentation of numerical data, which is used in quantitative research (Creswell, 2014).

3.7 Population and Sampling

3.7.1 Population

The population in a research study describes the group of individuals who share common characteristics and whom the researcher draws a conclusion from (Babbie & Mouton, 2010; Cunningham, Weathington & Pittenger, 2013). According to Creswell (2014) a researcher is expected to choose a population from which conclusions can be drawn and that can respond to the research question. The population for the study was young women between the age of 18 and 25 years from an elected community in the Eastern Cape Province of South Africa, who participated in a youth development programme aimed at female adolescent empowerment. The population were females, between 18-25 years of age, who attended the YOLO programme in 2016.

3.7.2 Sampling

Sampling is a process whereby a researcher selects a specific section of the population to participate in the study in order to respond to a research question (Monette, Sullivan & De Jong, 2010). In this study, purposive sampling was used to gain more knowledge and understanding of the perceptions and experiences of females regarding adolescent SRB after participating in a youth development programme. The concept of purposive sampling is employed in qualitative research and involves the selection of participants because they can purposefully provide insight into phenomenon under investigation Creswell (2014).

Non-probability sampling (Bryman, 2008) was used to purposively select young women from the YOLO programme who met the following criteria:

- Participants were between the ages of 18 and 25 years of age.
- Participants who live in three selected communities in the municipality in the Eastern Cape.
- Participants involved in the YOLO programme in the selected municipality between 2016 and 2017.
- Participants who completed the YOLO programme.

An initial purposive sampled group of 20 females, aged between 18 and 25 years were included in the study, but due to the process of data saturation only 15 females were interviewed. Study participants were only selected from those who took part in the YOLO programme. Data saturation is a process whereby the researcher collects data from participants until they reach a point where they have gained sufficient information about the phenomenon under investigation and they can confidently conclude that all avenues were explored (Kelly, 2006).

3.8 Phases of Data Collection

Four data collection methods are commonly used in research that adopts a qualitative approach namely, participant observation, observation, in-depth interviews (whether with individuals or focus groups) and field notes. Also, Interviews should elicit a distinct explanation of the participant's viewpoint of the research topic (Marshall & Rossman, 2010). In this study, individual semi-structured interviews were chosen as the method of data collection. The following matters were considered before the interviews were conducted:

3.8.1 Preparing entry to the community

- The researcher looked for participants that were involved in YOLO programme.

- The researcher consulted officials that were involved in the YOLO programme for assistance to identify or select a community.
- The researcher approached participants regarding the study and their availability to take part in the study.
- When participants indicated their willingness to participate, the researcher made appointments with each participant for a suitable time.
- The researcher arranged suitable venues for the face- to- face interviews. Venues had to accommodate the social distancing requirements and observation of COVID-19 regulations.
- The researcher organised masks, sanitizers, and temperature checks in accordance with COVID 19 regulations.
- The researcher prepared two recording devices; an audio tape recorder and personal laptop with passwords that were only accessible to the researcher.

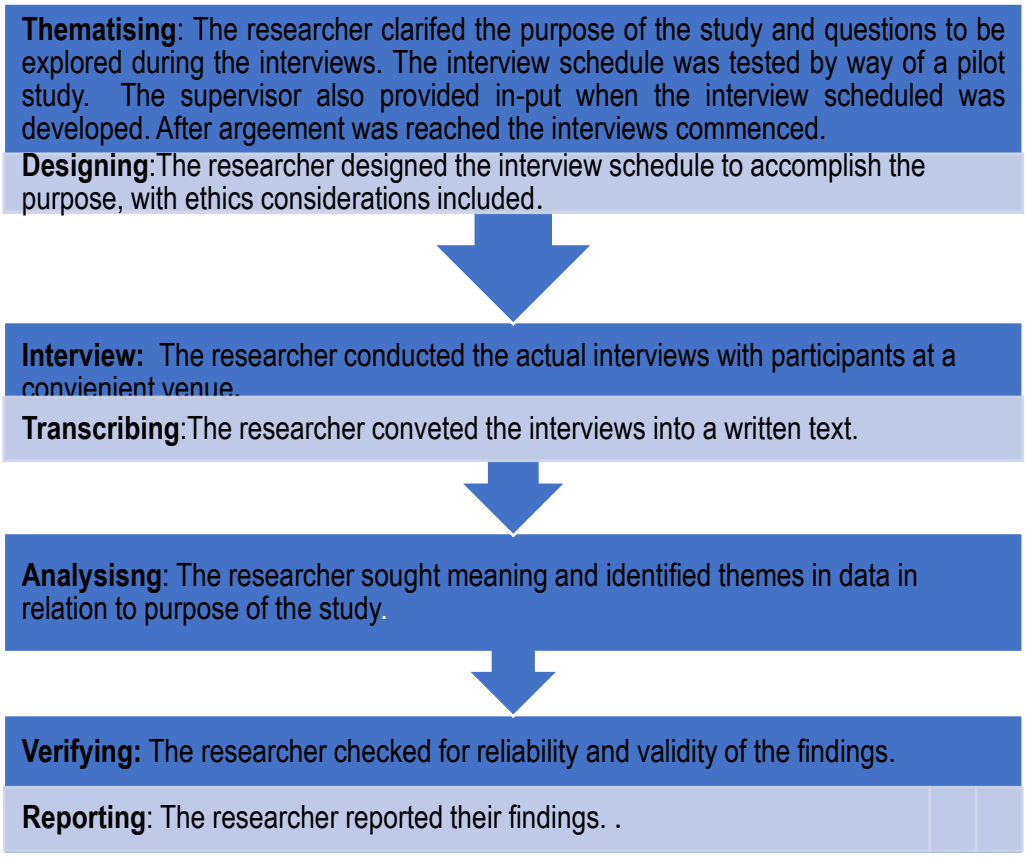
3.8.2 Interviews

According to Greeff (cited in Poggenpoel, 2018) interviews are a key method of qualitative data collection, even though the method can also be used in, quantitative research. Interviews are a form of structured or unstructured communication between the researcher and the participants (Babbie & Mouton, 2007). A semi-structured interview schedule and interview guide was utilised as an interview guide to facilitate the process that enable open and honest responses from participants (Babbie, 2016; Creswell, 2014). The questions included in the interview guide were related to the aims and objectives of the study. Open-ended questions characterised the interview guide and this allowed for probing questions to be used where

necessary. The researcher received permission to conduct the study from each participant after they signed the consent form.

Since the interview were often conducted in participants' home language (IsiXhosa) the information sheet, interview guide and the consent form were translated from English to IsiXhosa prior the interview process. During the interview, the researcher used an audio recorder and also took written notes which acted as a back-up and helped to record any non-verbal responses. The researcher followed the stages of interviewing as outlined in *Figure 2* below.

Figure 2: Stages of Interviews



Source: *(Babbie &Mouton) 2007, (Braun & Clarke) 2006*

In *Figure 2* the importance of the interview process was outlined; the interview stages were illustrated and the purpose of the study was identified by the researcher.

Conducting the research presented the researcher with various challenges. The researcher was based in the Eastern Cape, but her supervisor was located in the Western Cape. This restricted the amount of face-to-face supervision sessions with most communication taking place via email and instant messaging platforms and supervision sessions conducted via virtual-meeting software. However, the contact between the researcher and the supervisor was consistent and productive with each session resulting in clear communication of expectations and due dates.

The COVID-19 pandemic introduced additional challenges, especially for the data collection stage of the research, which resulted in various delays. Additional ethical approval also had to be sought to accommodate new social distancing protocols for the interviews. The amendments included requesting permission to conduct interviews under COVID-19 regulations and precautions; these included maintaining the 1,5 metres social distance requirement, mask wearing and hand sanitisation during interviews. Impact of the lockdown had minimal effect on how the interviews were conducted.

The researcher was very familiar with the environmental and infrastructure of the communities where the research was conducted because of her role as social worker in the province. As a result, she was able to identify possible interview venues and her rapport with the broader community ensured that venues were conducive to the interviews (with limited noise and other disturbances). The interviews were conducted in the Centre for Older Persons which is located in the community where the participants lived.

Interviews were frequently delayed as participants arrived late for their scheduled interview slots. Participants also had other priorities, such as school or domestic responsibilities which impacted on their ability to meet their interview times. These factors did impact on the planned duration of the interviews, which were meant to be up to an hour long. These challenges were

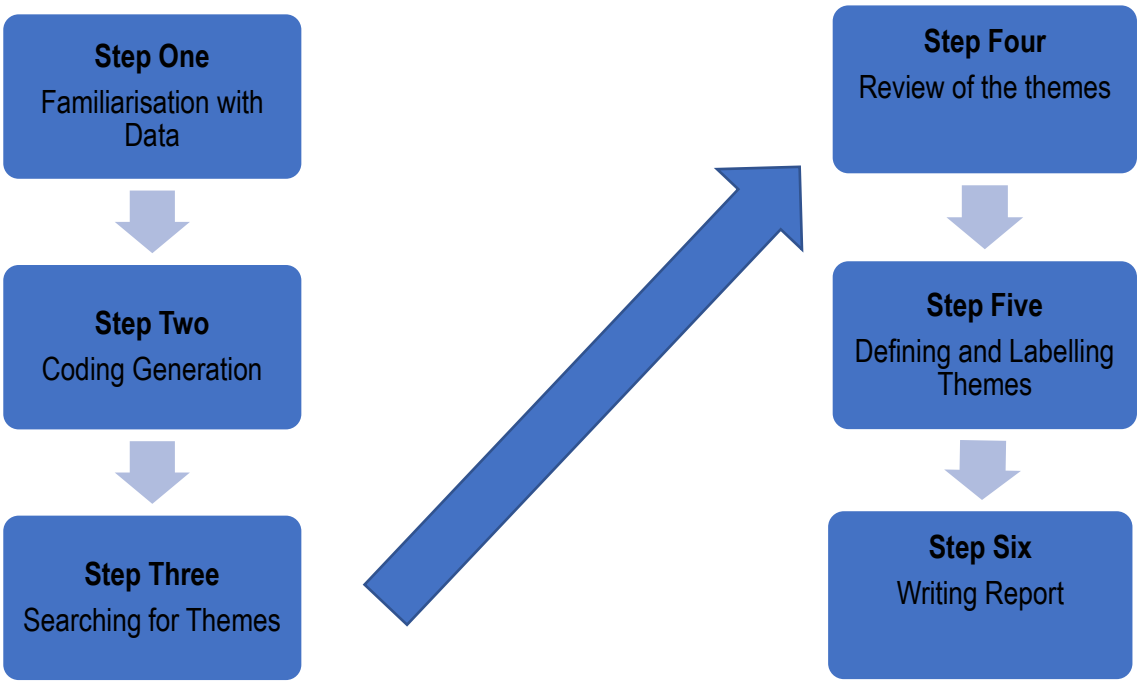
raised when debriefing sessions between the researcher and her supervisors we held. The researcher's role as a professional social worker assisted in the interview process and allowed her to conduct the interviews in a suitably thoughtful manner. This helped to ensure that interviewees responded comprehensively to the interview questions posed.

3.9 Data Analysis

Data analysis in qualitative research comprises of preparing and organising data (text in transcripts) for analysis, reducing data into themes through a process of coding and finally presenting the data as figures, tables and discussions (Creswell, 2013). Data analysis is a step-by-step process which is guided by the purpose of the study to provide answers to a research question (De Vos, Strydom, Fouche & Delport, 2005). The study employed the thematic analysis proposed by Braun & Clarke (2006). Thematic analysis helped a researcher to identify important information from the data collected and offered guidance with respect to the coding of the data, the identification of themes and subthemes which resulted in the presentation of a rich and detailed account of data (Braun & Clarke, 2006).

This study used the six phased thematic analysis process proposed by Braun and Clark (2006), which are represented below in Figure 3. Following this process allowed for the emergence of the themes which are presented in the Research Findings chapter of this thesis.

Figure 3: Phases of Thematic Analysis



Source:(Braun & Clarke,2006)

3.9.1 Phase One: Familiarising yourself with data

In this phase, the researcher analysed data she collected through interviews. The researcher had areas of interest, thoughts and knowledge about the data. The researcher transcribed the interviews into written form to prepare it for thematic analysis. The transcripts were checked against the audio recordings to ensure accuracy of the data. The transcription process helped the researcher gain more familiarity with the data she collected. The researcher immersed herself to the data and repeatedly read the interview transcripts in order to become more familiar with the data. She sought to gain meaning and identified shapes and patterns in the data. The researcher took notes while reading the data in preparation of coding process. Bird, (cited in Creswell, 2013) argues that the transcription process is a key phase of analysing the data in qualitative research. It is also the process where the data is identified and spoken words are transformed into written texts.

3.9.2 Phase Two: Generating Initial codes

This phase began just after the researcher became familiar with the data. The researcher deconstructed the data and compared similarities and started to generate a list of ideas or opinions about the data and areas of interests. Data coding for this study was done manually using highlighters to indicate potential patterns and to identify interesting codes for potential themes. The generation of codes proved to be challenging, however the online supervision sessions assisted with the analysis process and helped with initial codes identification process.

3.9.3 Phase Three: Searching for themes

This phase began after all the initial data were coded and a long list of codes were produced. The researcher focused on the themes rather than the codes and arranged the codes into potential themes. The researcher collected coded data extracts within the identified themes. These were presented in table format and this adoption of this procedure helped to sort the codes into their respective themes. Themes are a clear and meaningful patterns in data. Identifying themes involves a similar process to coding as the researcher had to identify and organise themes. Searching is the process when the researcher discovers and interpret themes (Braun & Clarke, 2006). The researcher identified a set of main themes and subthemes.

3.9.4 Phase Four: Review of themes

In this phase, the researcher identified and refined the themes. This phase began when the audit trail and questioning process was employed. This involved the division of the themes into subthemes to provide a comprehensive analysis.

3.9.5 Phase Five: Defining and Labelling Themes

During this phase the researcher determined which aspects of the data each theme captured and identified what interests the themes represented and the reasons for this (Braun & Clarke, 2006). During this phase the supervisor scrutinised the themes and provided comments as an independent reviewer.

3.10 Phase Six: Report Writing

Once the researcher fully established the themes, the last phase of the analysis process started. The themes were analysed and interpreted from a feminist perspective to show the link between empowerment and development. In the final phase, the researcher wrote the research report, and drew on the links between empowerment and development, as discussed in more detailed in Chapter Four.

3.11 Trustworthiness

Trustworthiness in qualitative research helps support the argument that the research findings are worthy of attention (Lincoln & Guba, 1985). Data verification and methods of trustworthiness, as proposed by Patel (cited by Dartey, 2017), were employed in this study:

Credibility: is an evaluation of whether the research findings represent a convincing conceptual interpretation of the data drawn from the participant's original data Cutcliffe and McKenna (1999) (in Poggenpoel, 2018). Credibility in this study was ensured firstly, by using member checking, i.e., asking participants to check their own transcript and having the transcripts reviewed by the supervisor for correctness and authenticity, and secondly, using

peer debriefing, through consultations with the supervisor. Credibility is also achieved through prolonged engagement in the setting until data saturation is achieved.

Transferability: refers to the degree to which the findings can be generalised to other settings, contexts or populations. Transferability is enhanced when the researcher provided detailed descriptions of the research methods, contexts and assumptions underlying the study. Transferability was also ensured by providing a detailed description of the research setting and the processes followed in the research.

Dependability: is the assessment of the quality of the integrated process of data collection and data analysis (Lincoln & Guba, 1985). This was achieved by ensuring data consistency and usability as the researcher scrutinised the sampling method, the characteristics of participants and the data collection and analysis procedures employed.

Confirmability: is a process of how well the researcher's findings are supported by the data collected. Confirmability describes the degree of neutrality or the extent to which the findings of a study reflect the respondents' opinions and experiences rather than the researcher's biases, motivations, or interests. Conformability was attained by the precise presentation of the research results, the establishment of a through audit trail and the consensus that was reached between the researcher and supervisor about themes that emerged from the analysis. Confirmability was also achieved as the participants and the researcher's supervisor were asked to examine the analysis of the data and ensure the correctness and credibility (Creswell, 2013). The findings were then interrogated by the supervisor through ongoing dialogue with the researcher. Specifically, questions were asked, critical feedback was given and the interpretations of the researcher checked.

Reflexivity was also used as a way for the researcher to distance herself from the research and to guarantee that the research findings were not influenced by her personal opinions and

judgements. The researcher used reflexive notes and kept a diary to interrogate her own bias and assumptions. These were then discussed with her supervisor. Patton (2002) contends that reflexivity is an important aspect of any research project and emphasises the significance of self-awareness, cultural consciousness and ownership of one's perspective. Furthermore, it important the researcher's biases are considered throughout the study. The researcher felt that the language used to report the findings of the would impact on how interview data were understood. The researcher identified language as an influencing factor. Because the interviews were conducted in isiXhosa and had to be translated into English, the meaning of certain isiXhosa words or phrases were lost as these could not be directly translated into English.

3.12 Ethical Considerations

MacMillan and Schumacher (2001) emphasise the importance of ethical guidelines. Ethical considerations are important when conducting research among human beings the rights and welfare of participants must be protected. Prior to the commencement of this study, ethical clearance and the permission to conduct this study was obtained from the University of the Western Cape, Humanities and Social Sciences Research Ethics Committee (see Appendix 5: Ethical Clearance obtained from Humanities & Social Science Faculty, UWC) and the Department of Social Development (see Appendix 6).

The participants completed and signed consent forms (see Appendix 2) in a language that they, as well as the researcher, were fluent in. Thus, their voluntary participation in the study was also obtained. Permission for the interviews to be audio-recorded was also obtained.

The researcher provided the information letter (see Appendix 1: Information Letter) to all the participants and informed them about the study. The participants were assured that no personal

information would be disclosed, and that only the researcher and the research supervisor would have access to the transcripts. The identities of the participants remained confidential and anonymity was ensured. The audio recordings, transcripts, memos and data analysis documents were stored on a password-protected computer. Only the researcher has access to these files. A copy of the thesis as well as any publications that might emanate from the study will be made available to all relevant stakeholders. A social worker was available when any participant experienced emotional discomfort. The study participants did not receive any remuneration or compensation for their participation in the study. Their rights as research participants were explained and they were informed that they could withdraw from the study at any stage without suffering any consequences.

3.16 Chapter Summary

This chapter presented the aims and objectives of the study and described the research setting, the research design and methods of sampling, data collection and analysis used. It also presented a discussion about how trustworthiness and reliability was achieved and the steps taken that ensured the research was conducted in an ethical manner. The significance and the limitations of this study were also described.

The findings of this study are presented in next chapter.

CHAPTER FOUR

PRESENTATION AND DISCUSSION OF THE FINDINGS

4.1 Introduction

In the previous chapter, the research methodology was presented. This chapter reports on the research findings that emanated from the interviews. The findings support the research aim and answer the research question, namely what the perceptions and experiences of female youth regarding their involvement in the YOLO program in a selected community are.

In this chapter, a description of the participants' demographic details is provided before a detailed discussion of the themes and subthemes that represent the findings are presented. The themes are then discussed in relation to the literature on the research phenomenon. Finally, a chapter conclusion is provided.

4.2 Demographic Details of Contributors

The population of the study were females in a selected community between the age of 18-35. A sample of 15 females from the community that were taking part in the YOLO programme in 2016 constituted the study participants. As mentioned in the previous chapter, non-probability sampling (Bryman, 2008) was used to purposively select young women from the YOLO programme who met the following criteria:

- Participants were between the ages of 18 and 25 years of age.

- Participants who live in three selected communities in the municipality in the Eastern Cape.
- Participants involved in the YOLO programme in the selected municipality between 2016 and 2017.
- Participants who completed the YOLO programme.

In Table 3 below the demographic details of the research participants are reported.

Table 3: Demographic Details of the Participants

Participants	Age	Education	Employed
P1	19	12	No
P2	18	10	No
P3	18	11	No
P4	19	12	No
P5	18	10	No
P6	18	12	No
P7	18	10	No
P 8	20	12	Part Time
P9	18	10	No
P10	18	11	No
P11	19	10	No
P12	22	Higher education institution (HEI)	No
P13	19	12	No
P14	22	12	No
P15	19	12	No

Initially, 20 participants were sampled, however, 15 were interviewed as data saturation was achieved. All the participants were black females between the age of 18 to 22 years old and were mother-tongue isiXhosa speaker. The participants all resided within the selected community where the study was conducted. It has been reported that globally youth populations have grown exponentially (Salam, Das & Lassi, cited in Mlungwana (2019). According to the United Nations (2018) report, there are 12 billion youth aged between 15 to 24-year-olds thus making up 60% of the global population. This age group is regarded as being disproportionately exposed to factors such as sexually transmitted diseases, early sexual debut, high levels of HIV infections, teenage pregnancy, transactional sex and sex without condom use (Plummer, Obasi, Wamoyi & Mtshana cited in Mlungwana, 2019).

The interviews were conducted in IsiXhosa and later translated into English. All the participants had completed the YOLO programme, with the majority of study participants in high school completing grades 10 to 12. One participant was a first-year university student, who also worked part-time. All 15 participants were assigned an alphanumerical code name as a means to ensure confidentiality and provide anonymity.

4.3 Presentation of the Themes and Subthemes

Due to the sensitive nature of the research topic, individual interviews were conducted. As previously noted in Chapter Three, Section 3.8, Braun and Clark's (2006) thematic data analysis process was used to analyse the research data. The findings comprise five major themes and several subthemes and these are presented in Table 4 below.

Table 4: Themes and Subthemes

Theme 1: Knowledge about the YOLO programme	Subtheme1.1: Knowledge about the YOLO programme through DSD awareness campaigns Subtheme 1.2: Knowledge about the YOLO programme through word of mouth
Theme 2: Benefits of attending the YOLO programme	Subtheme 2.1: Developing an awareness of negative peer influences Subtheme 2. 2: Developing awareness of the dangers of 'blessers' Subtheme 2.3: Developing awareness to become independent
Theme 3: Reduced risky behaviour	Sub-theme 3.1: Reduced sexual risk behaviour Sub-theme3.2: Stopped using illicit substances
Theme 4: Psychosocial impact of engaging in the YOLO programme	Sub-theme 4.1: Informed decision - making Sub-theme 4.2: Improved family and peer relationships
Theme 5: Participants' recommendations to improve the YOLO programme.	Sub-theme 5.1: Offering the YOLO programme on a continuous basis Sub-theme 5.2: Offering the YOLO programme to a younger age group

4.4 Discussion of the Themes and Subthemes

Each theme and their respective subtheme are presented in order. Extracts from participant narratives from the interviews are used to substantiate the findings of each theme. A discussion of the themes is then presented, which uses the literature and previous studies to draw attention to areas of alignment or comparison with existing knowledge and understanding of the topic.

4.4.1 Theme 1: Knowledge about the YOLO programme

The aim and objectives of the YOLO programme, discussed in Chapter Two, noted its focus on empowering youth to make positive life choices. Also mentioned was that the programme, which is facilitated by the Department of Social Development (DSD), targeted vulnerable youth in poorly resourced communities. When participants were asked how they found out about the YOLO programme, two viewpoints were expressed. Theme 1 provides insight into how participants came to know about the programme, either through DSD awareness campaigns held in the community or by word-of-mouth.

Subtheme 1.1: Knowledge about the YOLO programme through DSD awareness campaigns

Most participants said that they found out about the programme through the DSD. Before the commencement of any programme DSD officials conducted community mobilisation about programmes, they offered in order to create strong networks within the community and to build trust, respect and a sense of belonging to the community at large (Eastern Cape Department of Social Development) [ECDSD], Services offered, Development and Research, 2021). Social workers and psychologists serve as front-line workers to provide self-leadership, life- coaching strategies that could assist youth in developing skills such as self-awareness, coping skills, goal setting, self-evaluation and functional self-talk (Jooste & Maritz, 2014). Pharaoh (2014) recommends that programmes are facilitated by professionals are recommended and who can provide effective life skills. In the narrative extracts below, participants share how organisations used awareness campaigns and other empowerment strategies to enhance development in the community:

I was on the street when I met DSD officials, saying that they are going to run a programme that is going to teach young people how to behave and I got interested to go and listen for myself and to learn how to conduct myself. (P1)

DSD officials came to us and collected us to make a group out of ourselves. (P6)

I heard from DSD female staff that came to our street telling people that there is a programme that is going to start in our community. (P9)

The DSD's core function includes an objective to implement integrated development programmes that facilitate the empowerment of women in general and particularly the most vulnerable and marginalised groups in society (DSD, 2018). Furthermore, a key objective for the ECDSD regarding youth development programmes is to create an environment to help young people to develop constructive, positive and sustainable livelihoods. They also seek to provide opportunities for young people to develop their competencies and acquire skills that would enable them take decisions about their lives and their communities (Eastern Cape Department of Social Development) ECDSD, 2021). "Be the Dream" programme is a positive youth development programme that was implemented in Cape Town in 2016. Facilitators found that participants or beneficiaries of the programme showed positive self-esteem and positive results regarding decision making (Bhebe, 2018).

Subtheme 1.2: Knowledge about the YOLO programme through word of mouth

The dissemination of information about development programmes is an important aspect of creating access to such programmes. Often when programmes yield positive outcomes, it becomes popular in communities and gains the support of community members. These community members, in turn, inform others about the resource. This trend was also evident in

the current study. In the extracts below, participants express how they received information about the YOLO programme through word-of- mouth, from either friends or family members:

> *I heard people saying there is a programme that is taking place at the Baptise church, I didn't attend in the beginning but as I see people keep going there then I started to go as well. (P2)*

> *I heard through other children who told me and my father also told me about the programme. (P8)*

> *There were friends of mine who had already started to attend the programme, they told me about the programme. (P13)*

A study by Toefy (2020) found that parental and positive peer involvement in an adolescent's journey, and especially their involvement in developmental programmes, serve an importance role in the individual's development and success. The findings of the current study shows similar results to those of the Toefy (2020) study. It suggests that peers and parents played a vital role in assisting participants, motivating them, guiding them and encouraging them to join YOLO programme.

The importance that 'knowledge is power' relates to the feminist empowerment perspective, in terms of people being disadvantaged if they lack access to information. The way the programme was introduced and advertised in the community was empowering for community members who could in turn share the knowledge of the programme with the youth who eventually participated and benefited from the programme.

In the next theme, the benefits of involvement and participation in the YOLO programme are discussed.

4.4.2 Theme 2: Benefits of attending the YOLO programme

When asked what the programme meant to them, the participants all said that they benefited from the programme in different ways. As a result of their involvement in the YOLO programme, distinct benefits for participants emerged. Participants listed the following benefits: (a) realizing negative peer influences (b) raised awareness of the dangers of "blessers" (c) learning to become independent (d) increased psychosocial coping skills. Pharaoh (2014) suggest that when considering which elements are required when designing comprehensive youth development programmes, it is essential that such programmes ensure participants are equipped with skills that can help them make effective decisions and healthier choices. In this way, their needs and own experiences in dealing with challenging and ever-changing environments are considered. Findings from a study by Wozencroft, Scott, Waller and Parsons (2019) that looked at positive youth development programmes, showed that youth benefitted from attending the programme as it allowed opportunities for socialising with friends, becoming part of the programme family and thus created positive feelings of acceptance and allowed participants to be themselves.

Youth development programmes create a process whereby young people are engaged in attempting to build their skills and competences so that they can meet their social needs and to develop the community (Kazadi, 2015). Youth development programmes are organised well, create a safe environment and give youth participants the confidence to express themselves naturally (Jacobs, 2020). Research by Moshatane (2018) demonstrated that parental programmes, health, religious and educational campaigns are interventions and an effective approach in addressing adolescent sexual behaviours. Similarly, Kapundu (2017) established that organisations use forums, awareness campaigns and other empowerment strategies to enhance development of youth and adolescents in the community.

Pokpas (2019) claims that non-profit organisations and development programmes are regarded as driven by strong values geared towards empowering individuals and communities for positive change. In a similar vein, Marais (2018) indicates that life skills programmes have been proven effective in reducing many health risk behaviours in adolescents. The use of life skills development approaches has been found to improve adolescents' capacity to change. These programmes do so by building skills that are essential for health development and building participants' ability to deal with life challenges (Mudzingaidzwa, 2020). Youth programmes interventions in SA are regarded as effective in encouraging young people to improve the health seeking behaviour; this was most notable in the implementation of the 'Love Life' campaigns, which was part of the government strategy to promote positive youth sexual and reproductive health issues (Geza, 2020). Findings of the study by Govender, Naidoo and Taylor (2018) suggest that certain programmes have a beneficial impact in more than one behaviour.

Subtheme 2.1: Developing an awareness of negative peer influences

This subtheme emerged when participants were asked about their greatest spheres of influence. Most participants reported that they were mostly influenced by their peers. Participants described the influences they experienced in their communities. These influences, such as friends, relatives or other members of their community, play a significant role in determining their behaviours and determine their decision-making practices. Participants also mentioned how people they encounter in their lives came to influence their decision making. The issue of peer influence also emerged during interviews. Most participants mentioned the immense pressure friends and peers exert on them. Frequently, their risky behaviours are as a result of succumbing to peer pressure and were motivated by their desires to fit in with a peer group.

I used to go up and down in the street with friends not knowing where I'm going till late hours. (P3)

After attending the programme there was a change because I used to be that person who listened to and was influenced by friends if they come and tell that we must go. I would go with friends to drink alcohol but I changed after I was told in the programme that what I was doing was not right. (P15)

I was taught to love myself and not to imitate my peers as I used to. (P9).

The study by Rich (2018) confirms these finding. This study reported that participants felt that their peers influenced their behaviours in both direct and indirect ways when it came to actions such as alcohol use, early engagement in sexual intercourse, and making reasonable decisions (Rich, 2018). Other researchers, such as, (Marais, 2018; Tlhako, 2016) have also reported similar findings that highlight the major role that peer pressure plays and its contribution towards SRB. They further note that females are more likely to come under the influence of peer pressure and engage in risky behaviour than their male counterparts. (Marais, 2018 ; Tlhako, 2016). Furthermore, Tlhako (2016) claims that peer pressure and multiple sex partners are contributing factors that influence young women's vulnerability to HIV. (Marais, 2018) also argues that adolescents, in the presence of their peers, are more likely to engage in health risky behaviours due to peer influence (Marais, 2018). The study's findings also corroborate those reported by Hoskins and Simons (cited in Mokoena, 2018). It concludes that adolescents closely associated with their peers who engage in practices linked to SRB are more like to engage is those same risky sexual behaviours (Hoskins & Simons, in Mokoena, 2018).

Subtheme 2.2: Developing awareness of the dangers of 'blessers'

Participants expressed their knowledge and awareness of the dangers associated with having sexual relationships with so-called “blessers”. The label “blessers” are assigned to older men who lure young girls into having sex with them in exchange for money. In the communities where the study was conducted, “blessers’ were a growing phenomenon.

In the excerpts from participants below, they comment on the knowledge they gained from the YOLO programme:

> *We were taught not to engage in [sexual] relationships with older persons in return for money. You must wait for a right time to have your own money. (P2)*

> *I used to have relationship with older people but after the programme I changed and started dating in my age group. (P8)*

> *I was taught that older people or blessers come to us with diseases and that money is not everything. You must wait for your time. (P10)*

Participants’ responses highlight awareness of the associated dangers of having a relationship with older men or “blessers”. A research study by Sello (2018) reported that young girls engaging in sex for exchange of money or gifts was a contributing factor towards an increase in HIV/AIDS infections. Such behaviours also contribute to risky sexual behaviour such as non-condom use, having multiple sexual partners, and having relationships with older men in exchange for money to either support your household or drug habit. Similarly, Moraope (2014) in her study on risky sexual behaviours among adolescents in rural setting, in Rustenburg SA, also found that adolescents have a tendency to engage in risky sexual behaviours by having multiple sex partners with older men in exchange for money and gifts. Avert (2020) explains these relationships are motivated by the assumption that sex will be exchanged for material

support or other benefit. So as Ncithakalo (2011) further observed that multiple sexual partnerships are also associated with intergenerational relationships, where young women engage in a sexual relationship with older men to gain financial independence.

To support the position advanced by the above study findings, research from Sub-Saharan Africa concluded that transactional sex is one of the central factors in women's heightened vulnerability to HIV and other STIs (UNAIDS,2018). Additionally, Dellar (cited in Bomester, 2021) mentions the high prevalence of intergenerational relationship between young girls and older men. Such relationships place young girls at a higher risk of HIV acquisition and also place young girls in particularly vulnerable positions as they cannot negotiate safe-sex practice because of the status and economic power of these older men.

Subtheme 2.3: Developing awareness to become independent

Several participants during the interview commented on how their levels of independence changed because of their involvement in the YOLO programme. The participants reported that they were able to engage in better self-management practices and felt better and more confident about themselves.

> *I used to have a low self-esteem and low confidence and not believing in myself but after the programme all that was improved. (P8).*

> *The programme came with something good to us, because we were thought to know what is right or wrong, to know where to go and not to go due to our age. (P7)*

The benefits of participating youth development programme were confirmed by Wozencroft, et al (2019). These researchers found that youth became more independent, autonomous and to be more self-confident after their involvement in a youth development programme.

Behavioural changes were also evident in participant narratives in this study. The findings confirm those of Jacobs (2020) who suggest that intervention programmes are age-specific training that contributes to individual confidence and promotes holistic development. Jacobs (2020) further mentioned that youth development programmes foster social change in communities and in adolescents.

Other studies have reported that youth development programmes that address comprehensive sexual education play a crucial part in sensitising young people to understand their sexuality, while supporting them to have positive sexual experiences and establish a positive sexual identity (UNESCO,2018). Similarly, Rashid and Mwale (2016) contend that sex education in schools has an essential role in providing awareness of reproductive health issues, encouraging reproductive health, helps to prevent risky sexual behaviour and contributes to the decrease in teenage pregnancy. The study by Myers, Carney, Browne and Wechsberg (2019) that investigated substance use and sexual risk reduction interventions for young women in SA discovered that rates of drug use and peer drug use were lower, while scores for drug refusal and coping skills and self-esteem and self-efficacy rates increased, after participation in these intervention programmes.

Judging from an empowerment perspective, the benefits of participating in the YOLO programme was first and foremost the empowerment of the young females. The fact that they are black females living in an underprivileged community has been made earlier in Chapter 1 and 3. Adding to this, they are part of the youth population in South Africa which suffers the highest unemployment and poverty rates, a fact also pointed out in the previous mentioned chapters. In line with principles of feminism presented in Chapter 2, the YOLO programme empowered these participants in two ways in particular, namely, decision-making and independence as they became aware of male dominance in terms of so-called ‘blessers’, and

the sexual exploitation they were subjected to at the hand of these male predators. After their involvement in the programme they could make independent decisions about their lives as young black females.

The next theme that is discussed in reduced risky sexual behaviour.

4.4.3 Theme 3: Reduced risk behaviour

This theme is important as it highlights the influence of the programme on participants' knowledge and perceptions of risky sexual behaviour**.** Most participants mentioned they became aware of risky sexual behaviour such as sexually transmitted diseases (STIs), teenage pregnancy, condom and contraception use, and transactional sexual practices. Participants commented that after their involved in the programme they stopped their illicit drugs and substance use. Most of the participants also reported their involvement in numerous risky behaviours, while offering different reasons for these actions. Participants described how these risky behaviours nonetheless directly affected their daily living in multiple ways, while acknowledging that they were exposed to risks and dangers as a result. The participants expressed how females are more likely to be involved in risky behaviours because of peer influence. They were also more likely to engage in relationships with older persons in exchange for money, fall pregnant, contract infectious diseases or engage in drug use.

Marais (2018) explains that because adolescence is a transitional period between the childhood and adulthood, adolescent tends to experiment and want to discover who they are and they are therefore more susceptible to risk health behaviours. The researcher identified language as an influencing factor. Because the interviews were conducted in isiXhosa and had to be translated into English, the meaning of certain isiXhosa words or phrases were lost as these could not be

directly translated into English argument is supported by Bomester (2021) who notes that frequently adolescent engage in behaviours that unknowingly expose them to risk. In the SA context, such sexual risk-taking behaviours include early sexual debut, engagement in unprotected sex and having multiple sex partners without contraception use (Bomester, 2021). Pharaoh (2014) also notes that youth engagement in behaviours that risk their health is the major concern both locally and internationally. Additionally, such SRB is more prevalent with female adolescent learners (Pharaoh, 2014).

Research suggests that parental programmes, health, religious and educational campaigns are perceived as interventions and are an effective method to address adolescent risky sexual behaviour (Moshatane, 2018; Jacobs, 2020). School-based interventions offered to address engagement in multiple risk behaviours played an important role in preventing tobacco, alcohol and illicit drug, as well as antisocial behaviour (Govender et al, 2018).

Sub-theme 3.1: Reduced sexual risk behaviour

Participants commented that after learning about SRB, they were empowered about how alcohol influenced their behaviour and that it made them more likely to engage in sexual activities using no protection, thus exposing them to HIV and other infectious diseases. They were informed that these behaviours also exposed them to teenage pregnancy.

> *I heard that I have to use protection when I'm engaging in sexual intercourse and that I must not engaged in sexual intercourse under the influence of alcohol because I might get pregnant. (P12)*

> *I learned that I must not engage in sexual intercourse with a person on the first day I meet him, because it might happen that this person had an illness or disease and it affects me. (P15)*

I was taught not to engage in sexual activities without using protection because I might be infected with diseases or get pregnant. (P13)

Research has reported that risky sexual behaviour can be defined as a continuous non-condom or contraception use and engaging in sexual debut with different sexual partners (Rashid & Mwale cited in Mokoena, 2018 and Maureen, 2019). Moreover, risky sexual behaviour such as having multiple sexual partners, non-condom use and transactional sex are considered as the driving forces behind negative behavioural health outcomes for young people (Sello, 2017). Mokoena (2018) also mentioned that the paucity of knowledge about sex, contraception, unhealthy coping strategies, peer pressure and the lack of support from parents are all factors that contribute to teenage pregnancy Mokoena (2018). Haroona (2018) suggests a significant relationship exists between risky sexual behaviour and substance abuse among adolescents. While the findings from the Myers et al (2019) study indicated that sexual and physical trauma, along with, substance abuse are contributing factors and increase the risk of young women acquiring HIV.

According to Carroll (2019) a connection is evident between engaging in risky sexual behaviour and exposure to and contracting sexually transmitted diseases. Carroll (2019:30) describes high-risk sexual behaviour as follows:

- Engaging in an unprotected vaginal or anal intercourse without the use of a male or female condom unless this happen in a long-term relationship in which both partners have been tested for STIs.

- Engaging in oral sex with a male or female partner without using condom or dental dam unless this happen in a long-term, single –partner monogamous relationship in which both partners have been tested for STIs.
- Engaging in vaginal or oral intercourse before age of 18 years.
- Having multiple sex partners or having sex with a partner who has multiple sex partners.
- Engaging in any sexual behaviour with an older person or someone who injects with drugs.
- Engaging in sex with a sex worker or a person who was involved in sex work.

The finding of this study concurs with Caroll's (2019) assertions that SRB amongst adolescent girls and young women is associated with other negative health outcome. These include STIs and unplanned teenage pregnancy, to name a few. Adolescent alcohol or illicit substance use is also associated with more increased sexual activity and less frequent use of condoms (Cloete, 2018).

While the majority of the participants generally presented with limited knowledge about the consequences of their SRBs, one participant expressed understanding of the risks, but still continued to engage in unsafe sexual practices which eventually resulted in a pregnancy.

> *I was the member of the YOLO programme. I attended the programme from the beginning to the end. I wish other adolescents aren't like me because I fell pregnant while I was educated and empowered by YOLO about risks of engaging in unsafe sex. (P2)*

Sub-theme 3.2: Stopped using illicit substances

Participants outlined the impact that their consumption of illicit substances had on their behaviour patterns. While they described how they were affected, they also confirmed that as part of the YOLO programme, they were advised about the consequences of using substances.

Participants acknowledged alcohol and drug use as a risky behaviour which expose them to the risks of pregnancy and infectious diseases. Research has established that substance abuse during adolescence is a global concern (Nkwanyana, 2018; Hendricks, 2018 and Casker, 2019). Using substances by adolescents has been linked to a number of negative consequences (Nkwanyana, 2018). Some of the study participants shared the following sentiments:

> *I became aware that young females of my age are not allowed to drink alcohol, and I was using alcohol but stopped using alcohol after attended YOLO. (P10)*

> *I used to stay with boys and I was smoking dagga. After the programme I managed to quit smoking. (P6)*

> *I used to drink alcohol while I was still young and I was associating myself with older men to gain money for alcohol. (P3).*

When discussing their general perceptions on adolescent sexual behaviour and the causes of risky sexual behaviour, some participants identified alcohol use and were able to associate it with increased risks of having unprotected sex.

> *In the limited time that I attended the programme I learnt that when I'm under the influence of alcohol I must not engaged in sexual intercourse because there might be things that I did not plan such as having unprotected sexual debut, STIs and becoming pregnant. (P11)*

These findings are similar to those reported by Rich (2018) who argue that drug abuse at an early age is associated with various problems, such as risky sexual behaviour, health problems, depression, crime and addiction in adulthood. Research by Hoaene (2017) also reported on the link between drug abuse and RSB, health problems, depression, crime, and addiction. Similarly, Schwinn, Schinke, Keller and Hopkins (2019) note that the higher prevalence of

drug use among adolescent girls contributes to their increased vulnerability to the associated risks.

In her study on exploring the role of the parent in the aftercare of their adolescent children who participated in the treatment programme for substance abuse, Felkers (2019) describes how substance abuse remains a devastating social ill which has a debilitating effect on family life. She contends that the impact of adolescent substance abuse is particularly profound due to the negative consequences on their development. Therefore, it seems that teenagers who engage in alcohol consumption or who take illicit substances are more likely to become sexually active earlier and have with multiple sex partners. The finding in this theme concurs with sentiments by Genna and Cornellius (in Cloete, 2018) who argue that the use of illicit substances by adolescents and young women can lead to teenage pregnancy that can affect several generations.

One participant commented on how substance abuse and illicit drug use were also associated with theft and crime. This insight was expressed in the following statement:

> *When I was using substances I used to steal money, I used to take any money I see at home. (P3)*

Kirby and Dugosh (cited in Casker, 2019) confirm this insight and explain that substance use can affect family finances. Substance abusers also tend to sell households items or steal money from their families to buy alcohol or any drug.

Yet another participant mentioned the possible negative health outcomes associated with substance or illicit drug use, when they stated that:

The YOLO programme taught me that substance use can lead to cancer or lung disease. (P3)

This viewpoint in similar to that of Cloete (2018) who argues that unhealthy behaviours such as smoking and excessive alcohol drinking can increase risk of health conditions such as lung cancer and liver disease.

One participant described the detrimental impact that substance use had on her life. She noted that her drinking contributed towards her pregnancy, which resulted in her dropping out of high school.

I was using alcohol, got pregnant the same year I attended YOLO and even dropped out of school. (P2)

Linked to the above viewpoint, adolescent substance abuse is not only influenced by individuals but also influenced by family, environmental factors and peer influences. Adolescent substance use has a negative effect on educational outcomes (Welby-Solomon, 2021). Although teenagers know about the dangers of unsafe sex, they tend to ignore the consequences of their risky sexual behaviour (Qolesa, 2017). Similarly, the study by Mchunu (cited by Qolesa (2017) on factors influencing teenage pregnancy in Heidedal location, Mngaung District, found that adolescents do not take into consideration the risks involved in engaging in unprotected sexual debut, which could result in teenage pregnancy. There seem to be a lack of communication between adolescents and their parents about sex-related issues which can cause the valuing of the opinions and advice of friends, above those of their parents. This can also result in placing adolescents at risk of teenage pregnancy because they lacked correct information.

From a feminist empowerment point of few, exposure to risk and engaging in risk behaviour for survival plays an important part in understanding the dynamics involved in oppression and marginalisation. The risks that these participants described was not merely because they were seeking the thrills of having a good time, but it was more so as a means of survival. The point here is to look beyond the risk behaviour and to understand the underlying reasons for such behaviour, which in this study seem to be a question of survival in the context of poverty.

The next theme discusses the psychosocial impact of involvement in the YOLO programme.

4.4.4 Theme 4: Psychosocial impact of engaging in the YOLO programme

Participants were asked how their involvement in the programme changed their decision making and lifestyle choices. Participants noted they became more informed about appropriate decision making and they experienced improved relations with family and peers because of attending the programme.

The term psychosocial is derived from the combination of a word ‘Psyche’ referring to an individual psychological behaviour. The word ‘Social’ refers to a social setting or community in which the individual lives and interacts with others (Toefy, 2020). During adolescence, individuals encounter different problems which impedes their normal psychosocial development (Bista & Hayward cited in Toefy, 2020). The psychological problems encountered during adolescents are associated with from behavioural problems such as substance and illicit drug use., conduct disorder, educational difficulties including dropout and emotional problems (Ahmad cited in Toefy, 2020).

Sub-theme 4.1: Informed decision - making

Half of the participants reported that the YOLO programme helped them make better life decisions. Most participants stated they could express different opinion and list the influences affected on their decision making and were guided towards how to better manage and resist those influences.

The following are participant responses when asked how the YOLO programme helped to equipped them with the necessary life skills to make decisions:

> *I started by thinking before taking any decision, every time I had to take a decision I thing of everything that I was taught by YOLO Programme. (P1)*

> *YOLO helped me to take a wise decision by not being friends with males as I used to before. It come to my mind after I attended YOLO that something bad might happen to me. (P21)*

> *My decision making improved a lot after I attended the YOLO programme because, before I attended the programme I used to steal money but now I have to think that I might be stealing something needed the most. (P4)*

An important insight resulting from these responses is that most participants had problems regarding decision making in their lives. The YOLO programme, however, help empower them to make informed decisions. As a result of their involvement, some participants stopped stealing money, while another stopped mingling with male friends who had exerted a bad influence over her and another incorporated the YOLO teachings into her decision making processes.

These findings are consistent with those reported by Nalwadda, Namutebi and Volgsten (2019). They note that life skills can be used as a planning tool and are useful in assisting young people with acquiring knowledge about their bodies. It is also helpful for developing informed decision-making skills. For adolescents it is an important task to learn to make or take decisions as it enables them to take good decisions which later help them become independent individuals, establish their character and can equip them to take good decisions about their lives (Halpern-Felsher, cited in Mudzingaidzwa (2019). Furthermore, Mudzingaidzwa (2019) emphasizes that when adolescents attended life skills programmes, they are taught decision-making skills. The researcher identified language as an influencing factor. Because the interviews were conducted in isiXhosa and had to be translated into English, the meaning of certain isiXhosa words or phrases were lost as these could not be directly translated into English also suggest that adolescence is a stage where peers had to play an important role in decision making.

When discussing decision making, a participant stated that instead of making her own decisions, she would often simply follow those of her friends. She stated the following:

> *I depended on taking decisions based on my friends, not considering what I'm thinking and what is best for me but that changed after I attended the programme. (P5)*

Somerville, Haddara, Sasse Skwara and Moran (2019) notes similar insights and state that adolescents and young persons are influenced by their peers to make hazardous choices. Adolescents initially depend on the advice of their peers when making decisions (Buritica, Heekeren & Van De Bos, 2019). Tomova and Pessoa (2018) also claims that risky decisions are determined by the choices of significant others, thus riskier decisions made by others can lead to riskier behaviour whereas the safe choices of others lead to fewer risky behaviour.

Reiter, Suzuki, O'Doherty and Li (2019) further argue that individual risk preferences are being determined by observing and learning risk related choices others make. Chierchia, Pi-Singer and Blakemore (2020) also assert that as adolescences is known as a stage where an individual is heavily influenced by their peers, this can lead to harmful decision making that can cause unsafe behaviour.

Sub-theme 4.2: Improved family and peer relationships

Most participants commented that after attending the programme, they learned to respect their elders and parents. They also reported that their relationship with their peers improved as the programme encouraged group sharing.

> *The programme helped us, because in our community we were not getting along but YOLO made us to be united. (P8)*

> *I learned to respect my parent and the community elders. (P2)*

Participants also cited gaining benefit from attending outdoor therapeutic programmes and recreational camps. These activities created opportunities to interact with old and new friends and fostered feelings of group or family membership. As a result, participants' feelings of self-acceptance increased. Muchiri and Dos Santos (2018) observe that family management factors such as parental monitoring, discipline and behavioural control act as a risk or protective effect in adolescent risk behaviours.

In terms of theme four, oppression is not only the lack of knowledge and or poverty, which can be associated with aspects of social justice when one view these issues from a feminist

empowerment perspective. However, in this study, oppression was also psychological as participants felt a lack of positive self-regard, which could be due to their financial circumstances, being that they live in poverty as well as the position in society, being young black females between 18-24. However, their involvement in the programme created awareness into the 'self' in that they realised that they have made poor decisions regarding their lives in the but after their involvement in the programme and using the knowledge they received they are able to make informed decisions about their lives. Also, they now see the importance of family and peer relationships and how such relationships should be nurtured as it provides a protective barrier from the risks; they are exposed to such as for example being lured by so-called 'blessers.'

The next theme to be discussed is the participants' recommendations to improve the YOLO programme.

4.4.5 Theme 5: Participants' recommendations to improve the YOLO programme

When asked, what their recommendations to improve YOLO programme are, participants mentioned that the programme should be offered continuously and that it must also be offered to a younger age group.

Sub-theme 5.1: The programme must be offered on a continuous basis in the community

Most participants, when they were asked about recommendations they had about the YOLO programme, mentioned that the programme should be facilitated on a yearly or continuous basis.

> *YOLO needs to come on a continuous basis because there are adolescents who are already on a wrong track in this community. (P3)*

I think that the programme must continue hence there is a COVID 19 pandemic. Maybe if they can take five leaders so that they can come and roll out to others. (P4)

The programme must continue and more important aspects must be added to the programme. (P15).

Pharaoh, Smith and Frantz (2018) mentioned that programmes should be offered on an on-going basis, rather than as a once off three-day training. The findings of the study are supported by the study of Dilebo (2018) who recommends that the programmes of this nature must be implemented on a weekly basis and where session last are least 45 minutes in duration. Moreover, each school grade should have such programme and learners should receive sexual risk information and services as a means of becoming empowered with knowledge and skills. Dilebo (2018) maintains that a need exists for similar programme to be conducted in other districts. (Hoaene ,2018) recommends that government provide financial assistance to institutions who offer youth development programmes to allow for the expansion of such service to wider communities. Additional funds would increase the impact of these programmes and also enable the facilitation of much needed critical skills (Hoaene, 2018).

Sub-theme 5.2: Offering the YOLO programme to a younger age group

As part of the recommendations offered by participants, the need to expand the programme to include younger participants was frequently voiced. A further suggestion was the inclusion of sport to the programme activities, as sport was identified as an activity that garnered widespread interest in their communities.

I think the young age group of this community love sport. If this programme can be in a form of sport it can draw a lot of young people's attention. (P8)

I would like to say the programme must be implemented again to children because they are getting pregnant at a very young age. (P1)

I would like that the programme is repeated yearly because the adolescents born in 2005 are not taking life serious, they take things for granted. (P2)

A study by Sanders (2018) supports the findings of this study, as the study noted that sport enjoys much popularity and have the ability to gather communities together. Sport is also used to encourage social change in individuals. Pharaoh, Smith and Frantz (2018) mention that a primary recommendation for youth development programmes is that they are revised to cater for age and grade cohorts. Therefore, a need exists to develop programmes aimed at empowering adolescent learners from Grade 8-10 or those in the age bracket 13 to 16 years (Pharaoh et al, 2018). Finally, Dilebo mentions that programmes should be developed to accommodate primary school learners. As some primary school learners engage in sexual activities at a very early stage, teenage pregnancies also occur amongst primary school level (Dilebo, 2018).

There is no doubt that the YOLO programme is an empowering initiative on the part of DSD. However, the programme coud be further strengthen if as participants suggested, it is offered to younger pre-teens and primary school learners who are becoming increasingly more at risk in terms of being lured by so-called ‘blessers’ and who seem to be engaging in sexual risk behaviour from a young age. Also, a significant suggestion is the inclusion of male pre-teens and adolescents in YOLO programmes. Since feminists and empowerment theories related to the oppression of females and the structural oppression and marginalisation of females in terms of culture being a significant form of oppression, in stands to reason that the YOLO programme

aimed at males would play a significant role in reducing female oppression and marginalisation in terms of sexual risk behaviour.

4.5 Chapter Summary

This chapter presented the finding of this research study. The demographic profile of the study participants was described before a list of the themes and subthemes were presented. A comprehensive report of the themes was then provided, and these were discussed in relation to previous studies and literature which substantiated and highlighted contrasting findings

In the next chapter the conclusions and recommendations of the study, which are based on the findings discussed in this chapter, will be offered.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

In the previous chapter, the findings were discussed according to the themes and subthemes that emerged.

The study aimed to explore and describe the perceptions and experiences of females regarding adolescent sexual risk behaviour after being involved in a youth development programme in a selected community in the Eastern Cape province of South Africa.

The study set out to pursue the following objectives:

- To explore and describe the perceptions of females regarding adolescent sexual risk behaviour after their involvement in a selected youth development programme,
- To explore and describe the perceptions and experiences of females regarding their attitudes and norms relating to adolescent sexual risk behaviour, after their involvement in a selected youth development programme.
- To interpret from a feminist perspective, the perceptions and experiences of the participants regarding their attitudes and norms of adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape.

The final chapter discusses the main conclusions from the research and relates them to the objectives of the study. Conclusions that emanate from the themes and subthemes of this study are also presented in this chapter. The findings of the study directed the recommendations made with respect to various stakeholders.

5.2 Conclusions

The conclusions derived from the research investigation and study findings are as follows:

5.2.1 Conclusions Relating to the Theoretical Framework

This study was informed by the two theoretical approaches, namely, feminist and empowerment theory. In this study, feminist theory was significant as it emphasises gender neutrality, while promoting that point of view and voices of women and vulnerable groups. The five themes and their respective subthemes give expression to women's experiences and perceptions. These were communicated through the study participants who were adolescent women who, within the context of SA, can be seen as a vulnerable group due to their gender identity and socioeconomic status in society. The themes link to feminist theory in terms of its emphasis on women’s oppression and marginalisation in different ways. The study highlighted the relationship between participants’ age, their engagement in transactional sex practices, their lack of access to information, which were exacerbated due to cultural norms and beliefs that are accepting of intimate relationships with older men for financial survival.

Empowerment theory was used to understand the empowerment of adolescent women in this study. This theory was applicable and relevant in this current study as it accounted for how adolescent were able to make reasonable decisions about their lives. For example, participants mentioned that as a result of their involvement in the YOLO programme, they learnt to take informed decisions. Participants were candid about the extent to which their involvement in the YOLO programme served as a positive influence and affected their decision making. Empowerment theory was therefore appropriately utilised in this study as it assisted in understanding and explaining participants' ability to take control of their lives, move away from oppression and marginalisation and actively seek and use information and knowledge for personal development, empowerment, responsible decision making and self-efficacy.

5.5.2 Conclusions Relating to the Research Methodology

The current study aimed to understand the attitudes and norms of females regarding adolescent risk behaviour, following their participation in a youth development programme in a selected community in the Eastern Cape. The research question posed was: *What are the perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape?* In order to address the research question, a combination of an exploratory and descriptive design was employed. Using both a explorative and descriptive design enabled the researcher to explore and describe adolescent women's perceptions and experiences in an in-depth manner. It further illuminated the challenges they encountered and presented these in ways that foregrounded their perspectives. Thus, accentuating their narratives and voices to capture their subjective perspectives and experiences.

The study population consisted of females, between 18-25 years of age, who attended the YOLO programme, offered by the Department of Social Development (DSD) in the Eastern Cape Province, South Africa, in 2016. Purposive sampling was used and deemed appropriate as the researcher wanted to gain understanding of the phenomenon in question from adolescent women who attended the selected YOLO programme. Twenty female's participants were originally recruited, however, 15 were interviewed as data saturation was reached at this stage. Due to the sensitive nature of the topic, individual semi-structured interviews were chosen as the method of data collection. The study employed thematic analysis as a data analysis tool. The interview data was analysed and a set of themes and subthemes emerged. Trustworthiness and self-reflexivity were an imperative part of the study and helped ensure the research integrity and rigour of the study. Ethical procedures were employed and were aligned to the POPIA regulations and the SACSSP ethical standards. Ethical clearance to complete this study was granted by the UWC Humanities and Social Sciences Ethics Committee.

5.6 Conclusions Relating to the Research Findings

The findings of the study focused on perceptions and experiences of females regarding adolescent sexual risk behaviour after being involved in a youth development programme in a selected community in the Eastern Cape. The five main themes and 11 subthemes emerged from the study. These themes detail the perceptions and experiences of female's participants following their involvement in the selected youth development programme. The findings of this current study can be summarized and concluded as follows:

5.6.1 Theme 1: Knowledge about the YOLO Programme

Theme 1 outlined how participants gained knowledge about the YOLO programme. Two sub-theme gave expression to participants' insights. Two subthemes are highlighted:

- Subtheme1.1: Knowledge about the YOLO programme via DSD awareness campaigns.
- Subtheme 1.2: Knowledge about the YOLO programme via through word of mouth.

This theme highlighted how participants were informed about the YOLO programme by the DSD officials who promoted the programme. Participants also heard about the programme through word-of-mouth channels such as their parents, friends and other community members. Therefore, awareness programmes by social services organisations are an effective way for communities to access information. In a township community, accessing resources through word-of-mouth appears to be widespread. It is unclear if such a strategy would be as effective in more affluent communities where neighbours do not really engage with each other.

5.6.2 Theme 2: Benefits of attending the YOLO programme

Theme 2 relate to the benefits of attending the YOLO programme and consists of three subthemes:

- Subtheme 2.1: Developing an awareness of negative peer influences.
- Subtheme 2. 2: Developing awareness of the dangers of 'blessers'.
- Subtheme 2. 3: Developing awareness independence.

The findings outlined the many ways in which participants benefited after engagement with the programme. The findings also show that participants developed a sense of independence and gained self-confidence because of their participation in the YOLO programme. The YOLO

programme therefore significantly impacted on the improvement of the lives of adolescents in poorly resourced communities and addressed the needs of this vulnerable group in society.

5.6.3 Theme 3: Reduced risky sexual behaviour

In the Theme 3 reduced risky sexual behaviour emerged with two associated subthemes:

- Sub-theme 3.1: Reduced sexual risk behaviour.
- Sub-theme3.2: Stopped using illicit substances.

The findings highlighted that despite their understanding of sexual risk behaviours, adolescent continued to engage in unprotected sexual activities which resulted in pregnancy. As a result of their involvement in the YOLO programme some participants realised their misguided thinking relating to unprotected sex. Alcohol and drug use were some of the influences on risky behaviour and a link was established between substance use and sexual risk behaviour, thus confirming findings from other research.

5.6.4 Theme 4: Psychosocial impact of engaging in the YOLO programme

Regarding the psychosocial impact of engaging in the YOLO programme in theme 4, two subthemes were reported:

- Sub-theme 4.1: Informed decision - making
- Sub-theme 4.2: Improved family and peer relationships

Findings demonstrated that participants were empowered by the YOLO programme to make informed decisions about their lives, to desist from negative peer influences and sexual risk behaviours. The findings established that peer pressure acts as a factor influencing decision making. Adolescents tended to make important life-decisions based on the advice of their peers, which were often detrimental to their wellbeing.

5.6.5 Theme 5: Participants' recommendations to improve the YOLO programme.

Theme 5 presented the participants' recommendations to improve the YOLO programme and reported two subthemes:

- Sub-theme 5.1: Offering the YOLO programme on a continuous basis.
- Sub-theme 5.2: Offering the YOLO programme to a younger age group.

Due to the positive impact of the YOLO programme, participants felt it should be an ongoing programme, allowing more youth to benefit. They also felt that a sport component should be included as part of the programme in order to attract more adolescents, and especially male participants. A further addition was that the programme should cater for younger teenagers.

5.7 Recommendations

In this section, the recommendations based on the findings and literature review of the study are presented.

5.7.1 Recommendations for Social Work Practice

- More social workers at DSD should be appointed to ensure that the YOLO programme is implemented by social workers attached to the programme, rather than volunteers.
- Social workers from DSD who implement the YOLO programme need to be trained to improve their insight into the programme framework and its theoretical underpinnings.
- DSD social workers need to integrate with social workers from Department of Education and NGOs that are offering similar programmes such as YOLO. This will improve insight

into how departments deal with the type of challenges expressed by participants in this study.

- The DSD social workers need to offer ongoing awareness programmes to educate and empower youth and adolescents who present with risk behaviour, such as, teenage pregnancy, unprotected sex, substance abuse or illicit drug use, transactional sex with "blessers", multiple sexual partners and engaging in sex at an early age.
- The DSD implementing YOLO programmes needs to provide after-care services that can assess whether the programme achieved its intended impact, enabling adjustments and facilitate the planning of alternative interventions.
- DSD should offer behaviour modification programmes aimed at youth to address cultural norms relating to gender roles.
- The South African welfare budget should be expanded to provide more financial assistance to the YOLO programme and reach a wider population of adolescents.

5.7.2 Recommendations for Social Work Education

- Training of social work students in the Bachelor of Social Work (BSW) should include cultural sensitivity training. This would ensure that graduates understand the role and impact of culture on gender and identity. In so doing, social workers will be more knowledgeable and sensitive to the challenges experienced by individuals, groups, and communities.
- Social workers should engage in continuous professional development relating to feminist and empowerment approaches and how these approaches can be utilised to assist individuals, groups, and communities in order to contextualise phenomena and to provide services from an informed theoretical foundation.

- A YOLO programme aimed at adolescent males should be developed by DSD to address sexual risk behaviours among this population grouping in the selected province where this study was conducted.

5.7.3 Recommendations for Policy

- Government and policy makers need to re-evaluate programmes that seek to address risky sexual behaviours, substance use and illicit drug use, decision making and peer pressure amongst young women, and adolescents.
- Policy makers from the DSD need to collaborate with different stakeholders and develop programmes that will benefit adolescents encountering sexual risk behaviours.
- Policy makers from DSD should develop programmes aimed at adolescent males as they contribute to peer influence, unprotected sex and substance use that result in teenage pregnancy.

5.7.4 Recommendations for Future Research

- This study has been highlighted that adolescents engage in risk sexual behaviours at a very early stage. Therefore, to prevent these early engagements in risky sexual behaviours, targeting youth and adolescent at an early stage before they start to engage in risk behaviour would be a significant preventative measure. Future research studies focused on sexual risk behaviours in pre-adolescents aged 10-12 years should be conducted to ascertain the prevalence and perceptions of this population group about this phenomenon.
- Research relating to the inclusion of sport as part of life skills training and education programmes should be conducted by social workers in collaboration with other professionals such as nurses, sports coaches, physiotherapists, occupational therapists and

teachers. Such research should be aimed at investigating harm reduction with primary school leaners.

- A longitudinal study should be conducted to trace the impact of the YOLO programme on participants involved in this programme.

5.8 Chapter Conclusion

This chapter presented the conclusions and recommendations that emanated from the research project. It raised specific conclusions as they related to the theoretical framework, research methodology and the themes and subthemes that arose from findings. Recommendations for practice, education, policy and future research were made based on the conclusions derived from this study.

5.9 Final Conclusion

This qualitative study investigated the experiences and perceptions of adolescent females regarding sexual risk behaviour after being involved in a youth development programme as an important topic in social work. The aim of this study was achieved, as the researcher was able to describe and explore participants' experiences and perceptions. The study employed a qualitative approach and used thematic analysis.

Five main themes that emerged support previous studies on youth development and youth empowerment. The results of this study suggest that a need exists for continuous studies

focused on younger teens, including male teenagers and adolescents. The findings also pointed to specific areas for future research in this field in terms of social work practice, education, policy and general research on the phenomenon of youth development and youth empowerment relating to sexual risk behaviour.

The researcher is grateful to the participants who generously agreed to be part of this research. It is hoped that the findings and recommendations made in this study will be considered by stakeholders and policy makers in social work and related fields.

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Appendix 1: Information Letter

UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: 27 021 9592277

E-mail: 3984420@myuwc.ac.za

INFORMATION SHEET

Project Title: **The perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape**

What is this study about?

This research project will be conducted Vuyokazi Makeleni a MSW student in the Social work department at the University of Western Cape. You are invited to participate in this study because you have been identified as a person who could provide relevant information of the topic due to your involvement in a selected youth empowerment programme. The research study aims to gain understanding of young females' perceptions and experiences regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape.

What will I be asked to do if I agree to participate?

You will be requested to sign a consent form which confirms your decision to participate. The researcher will conduct an individual interview with you which will be approximately one hour where you will be required to share your perceptions and experiences and possible recommendations on the topic. You will also be requested for permission by the researcher to audio record all the discussions for purposes of accurate documenting.

Would my participation in this study be kept confidential?

All information gathered during the interview will be handled in a professional and confidential manner. The researcher will also take necessary precautions for the audio recorded data which will be stored in a safe and secure location and will be password protected. Except for the researcher, only you and the research supervisor will have access to

the information collected if the need arises. Your name and any identifying information will not be used when publishing the results of the study. The researcher will make use of identification codes, such as 'Participant A'. All information gathered will be stored on a computer and it will be secured with a password. When writing up the final research report, your identity will be protected at all times. There are however limits of confidentiality which is in accordance with legal requirements and professional standards, where information must be made available to appropriate individuals and/or authorities for example, when it comes to information about ethical behavior, child abuse or neglect or potential harm to you or others.

What are the risks of this research?

There are no foreseen risks with regards to the research study however, if at any point you experience uneasiness in your participation please do inform the researcher for possible assistance or solution.

What are the benefits of this research?

This research is not designed to help you personally, but the results may help the researcher learn more about youth empowerment programmes aimed at women empowerment. We hope that, in the future, other people might benefit from this study through improved understanding of youth empowerment programmes aimed at female empowerment.

Do I have to be in this research and may I stop participating at any time?

Taking part in this study is completely voluntary. This means that no one can force you to participant in the study. If you take part in the study and wish not to continue anymore, you may stop participating at any time. You will not be penalized.

Is any assistance available if I am negatively affected by participating in this study?

If at any point you experience emotional distress during or after participating in the study, you will be referred to a counselor for counseling if you feel the need for it. The researcher has made the necessary arrangements for this in your district.

What if I have questions?

This research study will be conducted by Vuyokazi Makeleni, a MSW student in the Social Work Department at the University of the Western Cape. Should you have further questions about the research study itself contact Vuyokazi Makeleni at: Cell 078 590 2124 or e-mail: 3984420@myuwc.ac.za.

Should you have any questions regarding this study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

Prof Marichen Van Der Westhuizen

Department of Social Work: Head of Department

Faculty of Community and Health Sciences

University of the Western Cape

Tel: 021 959 2277

Email: mvanderwesthuizen@uwc.ac.za

Prof Anthea Rhoda

Dean: Faculty of Community and Health Sciences

University of the Western Cape

Private Bag X17

Bellville 7535

chs-deansoffice@uwc.ac.za

This research has been approved by the University of the Western Cape's Humanities and Social Sciences Research Ethics Committee.

Humanities and Social Sciences Research Ethics Committee

University of the Western Cape

Private Bag X17

Bellville

7535

Tel: 021 959 4111

e-mail: research-ethics@uwc.ac.za

REFERENCE NUMBER: HS 20/4/24

Appendix 2: Consent Form

UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-959 2846 Fax: 27 21-959 2277

E-mail: 3984420@myuwc.ac.za

CONSENT FORM

Title of Research Project: The perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape

The study has been described to me in language that I understand. My questions about the study have been answered. I understand what my participation will involve and I agree to participate of my own choice and free will. I understand that my identity will not be disclosed to anyone. I understand that I may withdraw from the study at any time without giving a reason and without fear of negative consequences or loss of benefits.

___ I agree to be **[**audiotaped**]** during my participation in this study.

___ I do not agree to be **[**audiotaped**]** during my participation in this study.

Participant's name……..

Participant's signature…….

Date……

Appendix 3: Interview questions

Individual Interview Guide

Title of Thesis: The perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape province of South Africa

Interview questions:

Biographical details:

I. How old are you?

II. What is your home language or preferred language?

III. How long have you been involved in the youth development programme?

1. How did you get to know about the youth development programme and why did you decide to get involved in the youth development programme?
2. What would you say were the benefits for you of being involved in the youth development programme?
3. What did you like about the programme, were there any aspects of the programme that you did not like and why?
4. How has the programme influenced your knowledge and perceptions about risky sexual behaviour? (Probe- influenced on knowledge and perceptions about youth engaging in risky sexual behaviour, such as one-night stands, having sex under the influence of drugs and alcohol, being involved with so-called blessers?)
5. How has your involvement in the programme changed your decision-making regarding (healthy) life choices?
6. What recommendations do you have to improve the youth development programme?**Thank You for taking time to participate in the research project.**

Appendix 4: Permission Letter

UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-959 2846, Fax: 27 21-959 2845

E-mail: 3984420@uwc.ac.za

LETTER OF PERMISSION TO CONDUCT RESEARCH

Project Title: **the perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the eastern cape.**

The Manager

Department of Social Development

Engcobo, 5050

My name is Vuyokazi Makeleni, I am a Masters in Social Work (MSW) student in the Social Work Department at the University of Western Cape. I am requesting permission to gain entry into the community to conduct the research study in the community of Engcobo at Chris Hani District. This study will fulfil the requirements of my MSW degree in Social Work. The main purpose of the study is to gain understanding of young females' experiences of their involvement in a youth empowerment programme in the selected community. The participants will be informed that they have the right to withdraw from the research at any time and that there is no foreseen harm by taking part in the study.

The study will contribute to scientific knowledge on the experiences of young females of their involvement in the youth empowerment programme in the selected community. The research is being supervised by Dr Shernaaz Carelse of the Department of Social Work, University of Western Cape, Cape Town and her contact details are above.

Hoping for your positive support to this research study.

Kind regards.

Ms Vuyokazi Thelma Makeleni

E-mail: 3984420@myuwc.ac.za

Cell: 078 590 2124

Appendix 5: Ethical Clearance obtained from Humanities & Social Science Faculty, UWC

UNIVERSITY *of the* WESTERN CAPE

60 YEARS *of hope, action & knowledge*

11 June 2020

Mrs VT Makeleni
Social Work
Faculty of Community and Health Sciences

Ethics Reference Number: HS 20/4/24

Project Title: Perceptions and experiences of females regarding adolescent sexual risk behavior, after their participation in a youth development programme in a selected community in the Eastern Cape.

Approval Period: 10 June 2020 – 10 June 2023

I hereby certify that the Humanities and Social Science Research Ethics Committee of the University of the Western Cape approved the methodology and ethics of the above mentioned research project.

Any amendments, extension or other modifications to the protocol must be submitted to the Ethics Committee for approval.

Please remember to submit a progress report by 30 November each year for the duration of the project.

The Committee must be informed of any serious adverse event and/or termination of the study.

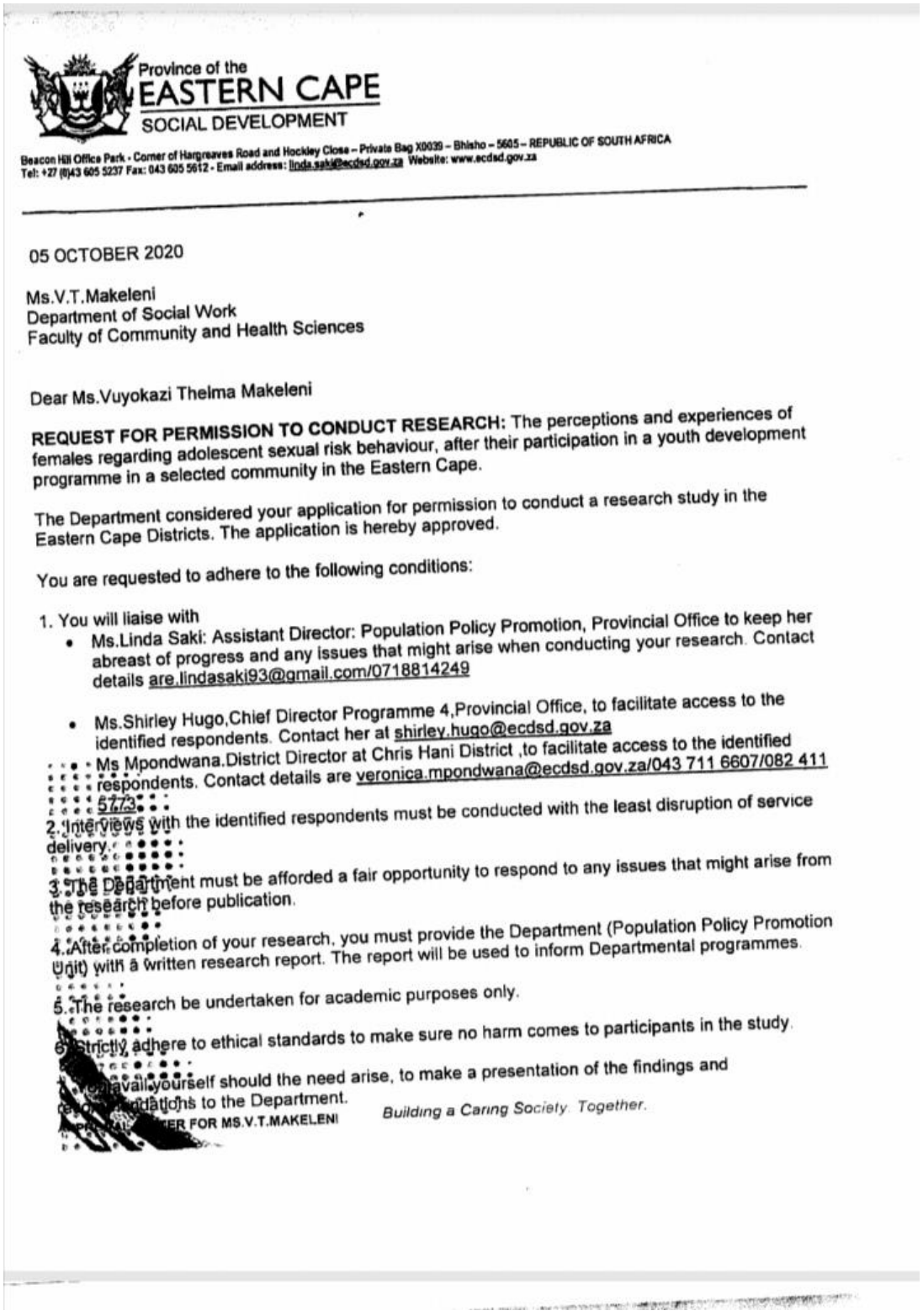
Ms Patricia Josias
Research Ethics Committee Officer
University of the Western Cape

Director: Research Development
University of the Western Cape
Private Bag X 17
Bellville 7535
Republic of South Africa
Tel: +27 21 959 4111
Email: research-ethics@uwc.ac.za

NHREC Registration Number: HSSREC-130416-049

FROM HOPE TO ACTION THROUGH KNOWLEDGE.

Appendix 6: Ethical Clearance obtained from DSD



Province of the
EASTERN CAPE
SOCIAL DEVELOPMENT

Beacon Hill Office Park - Corner of Hargreaves Road and Hockley Close – Private Bag X0039 – Bhisho – 5605 – REPUBLIC OF SOUTH AFRICA
Tel: +27 (0)43 605 5237 Fax: 043 605 5612 - Email address: linda.saki@ecdsd.gov.za Website: www.ecdsd.gov.za

05 OCTOBER 2020

Ms.V.T.Makeleni
Department of Social Work
Faculty of Community and Health Sciences

Dear Ms.Vuyokazi Thelma Makeleni

REQUEST FOR PERMISSION TO CONDUCT RESEARCH: The perceptions and experiences of females regarding adolescent sexual risk behaviour, after their participation in a youth development programme in a selected community in the Eastern Cape.

The Department considered your application for permission to conduct a research study in the Eastern Cape Districts. The application is hereby approved.

You are requested to adhere to the following conditions:

1. You will liaise with
   - Ms.Linda Saki: Assistant Director: Population Policy Promotion, Provincial Office to keep her abreast of progress and any issues that might arise when conducting your research. Contact details are.lindasaki93@gmail.com/0718814249
   - Ms.Shirley Hugo,Chief Director Programme 4,Provincial Office, to facilitate access to the identified respondents. Contact her at shirley.hugo@ecdsd.gov.za
   - Ms Mpondwana.District Director at Chris Hani District ,to facilitate access to the identified respondents. Contact details are veronica.mpondwana@ecdsd.gov.za/043 711 6607/082 411 5773
2. Interviews with the identified respondents must be conducted with the least disruption of service delivery.
3. The Department must be afforded a fair opportunity to respond to any issues that might arise from the research before publication.
4. After completion of your research, you must provide the Department (Population Policy Promotion Unit) with a written research report. The report will be used to inform Departmental programmes.
5. The research be undertaken for academic purposes only.
6. Strictly adhere to ethical standards to make sure no harm comes to participants in the study.
7. Avail yourself should the need arise, to make a presentation of the findings and recommendations to the Department.

[redacted] FOR MS.V.T.MAKELENI

Building a Caring Society. Together.

I wish you well with the research and look forward to the findings and recommendations.

Yours sincerely

MS.N. BAART
HEAD OF DEPARTMENT
DATE: 16/4/2020

ACKNOWLEDGEMENT OF RECEIPT

Please acknowledge and sign this document to indicate that you agree to and accept the conditions as stated above. Return the signed document via e-mail to the Assistant Director: Population Policy Promotion E-mail, lindasaki93@gmail.com

MS.V.T.MAKELENI
MASTERS CANDIDATE: UNIV OF THE WESTERN CAPE
DATE:_____

ER FOR MS.V.T.MAKELENI

Building a Caring Society. Together.

Appendix 7: Turnitin Report

turnitin

Digital Receipt

This receipt acknowledges that Turnitin received your paper. Below you will find the receipt information regarding your submission.

The first page of your submissions is displayed below.

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File size:	160.79K
Page count:	95
Word count:	24,177
Character count:	134,380
Submission date:	01-Dec-2021 08:40PM (UTC+0200)
Submission ID:	1717605304

CHAPTER ONE

OVERVIEW OF THE RESEARCH STUDY

1.1 INTRODUCTION

Youth empowerment is a global concern and enjoys high priority on the global agenda. Although some progress has been made in reducing social, economic and health disparities, in respect of children, youth and women, gender equality continues to be an elusive goal (Cloete & Maree, 2017). In addressing gender disparity among other key strategic areas, the 15th session of the United Nations General Assembly ratified key priority areas, grouped in three clusters for youth development. The first is youth in a global economy, which include issues relating to poverty, employment, education and globalisation. The second is youth well-being, which focuses on health, drug abuse, girls and young women, as well as HIV/Aids and crime. The third is youth and civil society, which relates to information and communication technologies, environment and leisure. Youth development and well-being, therefore, has taken centre-stage on the international development agenda, driven by new funding, and reporting priorities of the World Bank, as well as allied international and national aid organisations (World Bank, 2006). However, many young females in African countries still experience high levels of marginalisation and exploitation, resulting in a high prevalence of teenage pregnancies, as well as an alarmingly high number of abortions, as they simply cannot afford to raise children, due to their own personal, psychosocial, and economic circumstances (Chege, 2011).

South Africa is no exception, when considering young people at risk, living in poverty, familial disruptions, high levels of crime and violence (especially against females), as well as a high

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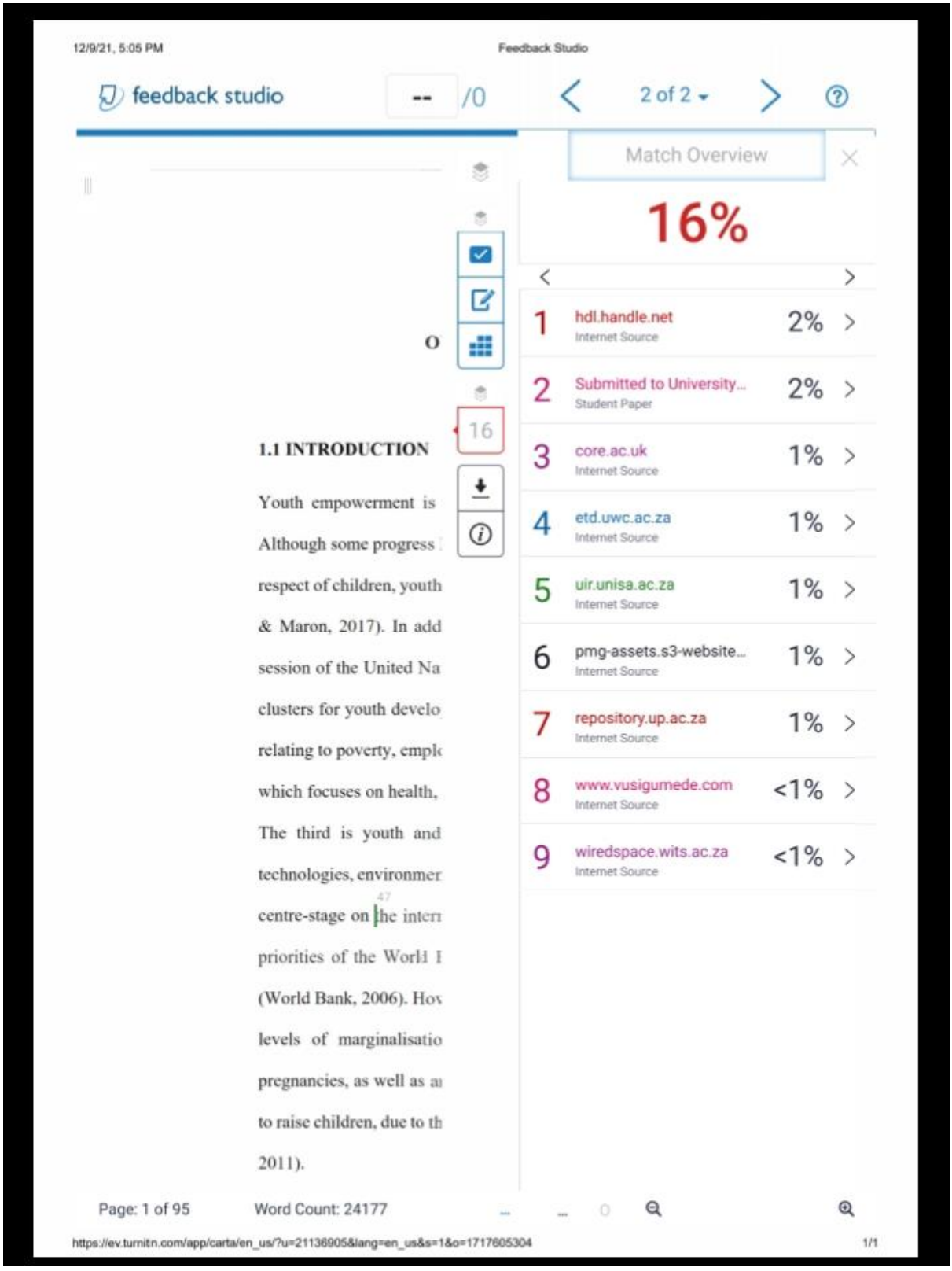
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16
1.1 INTRODUCTION
Youth empowerment is
Although some progress
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