

The Construction of Gender in Times of Change: A Case Study of School-Based HIV/AIDS Education in Kilimanjaro

Sheri Bastien



Masters of Philosophy of International and Comparative Education,
Institute for Educational Research

UNIVERSITY OF OSLO

April 27, 2005

Abstract

This case study utilized qualitative and quantitative methods to examine how gender, power and HIV/AIDS merge to create situations of risk and vulnerability for young people in the Kilimanjaro region, Tanzania. Questionnaires were collected from 160 secondary school students, while qualitative data came from 3 focus group discussions (one mixed and two single sex), interviews with one male and one female parent, one male and one female teacher, and an educational representative, in addition to observation. By looking at the socially constructed and multifaceted nature of gender and its inherent connection to power, this study highlights the contradictory and confusing state young people find themselves in nowadays. Particularly in regards to gender norms, roles and expectations, this study found that the school appears to be a modernizing influence, more overtly oriented towards gender equality in comparison to other facets of society such as the home and the work place, where inequality is still pervasive. Yet even there, it becomes obvious that changing long held beliefs concerning the roles, abilities, and characteristics of girls and boys takes considerable amounts of time. Gender inequality and entrenched power structures creep insidiously even into schools, which are supposed to be the levelers of difference.

The push and pull factors at work in Kilimanjaro are also evident considering the plethora of sources of information concerning sexuality, gender, condoms and HIV/AIDS that shape young people's attitudes, beliefs and behavior. Competing "moral regimes" and the subsequent incongruence and ambiguity of messages emanating from the mass media, religious institutions, parents, peers and teachers undermine any prevention program and have clear implications for HIV/AIDS program planners attempting to design and implement contextually sensitive school-based programs based on a coherent, unified stance. Thus, the importance of context and change were recurring themes in the study as having relevance for HIV/AIDS programming. Most strikingly, the need for a forum where young people can openly articulate their concerns, fears, questions and desires as well as address the ambiguities and contradictions in their lives emerged as having importance for programming.

Key Words: HIV/AIDS; gender; modernity; tradition; AIDS education; young people; Tanzania

Acknowledgements

I am in debt to a number of individuals and organizations for their invaluable assistance in completing this thesis. Firstly, I wish to thank the Ministry of Health in Tanzania and the National Institute for Medical Research (NIMR) for granting my research permit, and the Regional Education Office for issuing the final clearance. For his assistance in expediting the process of obtaining the permit in the first place, I would also like to extend my appreciation and sincere thanks to my field supervisor Dr. Melkiory Masatu of CEDHA (Center for Educational Development in Health, Arusha. Dr. Masatu also provided valuable assistance in reviewing my research instruments. To my supervisors in Norway, Researcher Arnfinn Helleve and Professor Knut-Inge Klepp, both from the Faculty of Medicine at the University of Oslo, I am so appreciative and fortunate that they agreed to guide me in my thesis. As my primary supervisor, Arnfinn went above and beyond his duty and was everything a student hopes for in their supervisor: his response rate was timely, his comments critical and his patience unending. Knut-Inge's assistance with the statistical portion of this thesis was invaluable. Their input and support of this thesis has improved the quality of it greatly, and for that I am extremely grateful.

The field work benefited from the financial support from ReddBarna (Save the Children, Norway). I wish to thank them for recognizing the value of my study and for their financial contribution.

In Tanzania there are countless people I would like to thank. Without them, the data collection process could have gone painfully slow and been much less pleasant and informative. I would like to thank all the teachers and students at the schools where I conducted my pilot test and the actual case study. I would like to extend my gratitude to the following people who made my stay in Moshi highly enjoyable: Mama Zawadi for being my surrogate mother, Susan and Inge for being my sounding board and sharing their company, and all the people at Aman's. I'll be back.

I would also like to thank my classmates in the CIE master program for their good company and discussion over the last 2 years, especially in my colloquium group. In particular, I would like to thank Olivia Borgia Mugabirwe and her family for welcoming me into their home in Uganda and my dear friend Nedzada Faginovic whose company I missed dearly in the second year. To Martin, who has been nothing short of a pillar of patience through this process, I am so lucky to have you. Last, but never least: I am more deeply indebted to my parents than I could ever express. Without their never-ending moral and financial support I would never be able to achieve the dreams I aspire to.

Table of Contents

List of Figures and Vignettes	iii
List of Acronyms.....	iv
Chapter 1: Introduction to the Case Study	1
1.1 Rationale for the Research	1
1.2 The Research Questions	4
1.3 Thesis Structure.....	5
Chapter 2: Contextual Analysis	6
2.1 HIV/AIDS in Sub-Saharan Africa.....	6
2.2 HIV/AIDS in Tanzania.....	7
2.3 Governmental and International Mobilization against AIDS in Tanzania.....	8
2.4 The Link between Poverty, HIV/AIDS and Gender in Tanzania	9
2.5 General Background of Tanzania.....	10
2.6 The Kilimanjaro Region.....	11
2.7 Tanzania’s Education System	13
Chapter 3: Conceptualizing Gender and Power	18
3.1 Gender	18
3.2 Tradition, Modernity and Gender.....	19
3.3 The Intersection of Gender and Power.....	22
3.4 Risk.....	27
Chapter 4: The “Window of Hope”: HIV/AIDS and School-Based Programs	33
4.1 Types of School-Based Programmes	33
4.2 Approaches on a Gendered Continuum	35
4.3 Problems facing School-based Programs.....	37
4.4 Theories of Behaviour Change.....	38
4.5 Sex and HIV/AIDS Education in Tanzania: From Past to Present	40
4.6 A Review of Effectiveness of School-Based Programs Focusing on Tanzania.....	41
4.7 Consciousness Raising Pedagogies.....	42
Chapter 5: Methodology	45
5.1 Philosophical Orientation.....	45
5.2 The Fieldwork	46
5.3 The Case Study Approach.....	48
5.4 Triangulation and Validity	49
5.5 Qualitative Methods	50
5.6 Quantitative Method: The Questionnaire.....	55
5.7 Limitations of the Study	58
5.8 Ethical Issues.....	58

Chapter 6: Polarized Perceptions: Exploring the Production and Reproduction of Young

People’s Identities	60
6.1 Gender Scales.....	60
6.2 The Traditional vs. Modern Dichotomy.....	62
6.3 Conceptions of Masculinity and Femininity.....	64
6.4 Gendered Expectations in Contemporary Relationships: The “Dating” Game, Partner Characteristics, Virginity and Control.....	67
6.5 Abusive Relationships.....	71
6.6 Exploring the Sexual Double Standard.....	75
6.7 Coping with the Challenges of Youth.....	77
6.8 AIDS as a Source of Concern for Young People.....	78
6.9 Sources of Information about Sex, Condoms and HIV/AIDS.....	80

Chapter 7: Schools as Microcosms or Catalysts of Change?.....89

7.1 The School Environment.....	90
7.2 HIV/AIDS in the Curriculum.....	92
7.3 Explicitly Gendered Messages.....	95
7.4 Implicitly Gendered Messages.....	98
7.5 Corporal Punishment.....	99
7.6 What Role Can and Should the School Play?.....	101

Chapter 8: Contextually Sensitive Programming: Rhetoric or Reality?.....103

8.1 Issues of Semantics.....	104
8.2 The Importance of Context: Addressing Collective Identities and Understandings of Risk.....	105
8.3 Designing Contextually Sensitive Programs.....	108
8.4 Widening the Scope: Community Mobilization, Cohesion and Empowerment.....	110
8.5 Healthy Schools, Healthy Students: Building a Health-Promoting Environment.....	112
8.6 Listening to the Voices of Young People.....	113

Chapter 9: Challenging AIDS at its Gendered Roots.....115

9.1 Synopsis of the study.....	115
9.2 Summary of the Main Findings.....	116
9.3 Recommendations for Future Research.....	117
9.4 The Way Forward.....	120

References.....	121
-----------------	-----

Appendix 1: Programmatic Recommendations.....	135
---	-----

Appendix 2: Student Questionnaire on Gender, Risk and HIV/AIDS.....	137
---	-----

Appendix 3: Single Sex Focus Group Discussion Guide.....	144
--	-----

Appendix 4: Mixed Focus Group Discussion Guide.....	145
---	-----

Appendix 5: Translation of <i>Starehe</i> song lyrics.....	147
--	-----

List of Figures and Vignettes

1. Figure 1:	Map of Tanzania.....	10
2. Figure 2:	Types of Gender Programming.....	35
3. Figure 3:	Gender Scales.....	60
4. Vignette 1:	Gang Rape (<i>Mtungo/Kubaka</i>).....	71
5. Vignette 2:	Willing Participant or Coerced Victim?.....	73
6. Figure 4:	Risky Behavior in the context of HIV/AIDS.....	79
7. Figure 5:	Enrolment Figures.....	95
8. Figure 6:	Boys are smarter and do better at school than girls.....	96
9. Figure 7:	Girls can be leaders just as well as boys can.....	98
10. Figure 8:	Values and Interests.....	108

List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
DANIDA	Danish International Development Agency
CIDA	Canadian International Development Agency
DFID	Department for International Development
EFA	Education for All
ESDP	Education Sector Development Programme
ESDPD	Education Sector Development Programme Document
ESR	Education for Self-Reliance
FGDs	Focus Group Discussions
FGM	Female Genital Mutilation
FTI	Fast Track Initiative
HIPC	Heavily Indebted Poor Countries
HIV	Human Immunodeficiency Virus
IMF	International Monetary Fund
KSEP	Kilimanjaro Socio-Economic Profile
MDGs	Millennium Development Goals
MRALG	Ministry of Regional Administration and Local Government
MSTHE	Ministry of Science, Technology and Higher Education
MoEC	Ministry of Education and Culture
MTCT	Mother to Child Transmission
NABA	National Advisory Board on AIDS
NACP	National AIDS Control Programme
NGOs	Non-governmental Organizations
NORAD	Norwegian Agency for Development Cooperation
PMTCT	Prevention of mother to child transmission
PRSPs	Poverty Reduction Strategy Papers
PTCT	Parent to Child Transmission
SAPs	Structural Adjustment Programs
SIDA	Swedish International Development Agency
TACAIDS	Tanzania Commission for HIV/AIDS
TGNP	Tanzania Gender Networking Programme
UN	United Nations
UNAIDS	Joint United Nations Program on HIV/AIDS
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific, and Cultural Organization
UNICEF	United Nations International Children's Fund
UNFPA	United Nations Population Fund
UPE	Universal Primary Education
USAID	United States Agency for International Development
WHO	World Health Organization
ZAC	Zanzibar AIDS Commission

Chapter 1: Introduction to the Case Study

This chapter will introduce the basis of this case study, the reasons why more empirical research in this area is urgently needed, the research questions underpinning the study and an overview of how the rest of the thesis will unfold.

1.1 Rationale for the Research

At the outset of the HIV/AIDS pandemic, it was largely viewed as a health problem and the fight against the virus was dominated by epidemiologists and the medical community. However, a shift in thinking has recognized that the virus is deeply embedded within the social fabric of societies. In sub-Saharan Africa for instance, people do not experience AIDS as being a discrete problem; rather, they experience it as being embedded within and exacerbated by wider social issues such as poverty, discrimination, stigma and inequality (Barnett & Whiteside, 2002). Accordingly, a paradigm shift has seen the social sciences attempt to supplement the biomedical community's knowledge by contextualizing understandings of the virus in a holistic manner. Consequently, prevention programs rooted in an understanding of contextual factors that contribute to its spread have recently emerged as a focal point of efforts.¹ Underscoring this importance, Philip Setel, who has worked extensively in Kilimanjaro has cautioned that, "our ability to comprehend and respond to AIDS will ultimately depend on how we understand the dynamics of transmission in social and cultural context" (1999:2).

It has been stressed that HIV/AIDS is a highly gendered pandemic, which affects girls and women disproportionately for many socio-cultural and economic reasons, making gender issues an area which demands further attention (Rivers and Aggleton, 1999; Boler *et al.*, 2003; UNAIDS, 1998; Gupta, 2000; Machel, 2001; Boler & Aggleton, 2004). Therefore, focusing on understanding the construction of gendered identities, as well as power relations during adolescence is important since this is the time at which, in several realms, including sexual life, boys gain autonomy, mobility, opportunity and power, while girls are deprived in their development of these characteristics (Harrison, Xaba & Kunene, 2001). This is one of the gaps in the literature which this thesis hopes to address, as few studies have explored this theme in depth in relation to HIV/AIDS.

The entry of gender into mainstream development discourse, particularly in terms of the

¹ Education is but one component in a multi-pronged fight against HIV/AIDS. Aside from prevention efforts, the ongoing pursuit of vaccines and microbicides, and VCT (voluntary counseling and treatment) are also integral components in the fight against AIDS.

education sector can be traced back to 1990 at the international conference in Jomtien, Thailand where the underachievement of girls' in comparison to boys in developing countries was identified as a source of concern. Empirical studies which have focused on gender disparities in education with reference to access and completion rates (Colclough *et al.*, 1998; Stromquist, 1990), attainment levels (Epstein *et al.*, 1998), and curriculum content (Omari & Mbilinyi, 2000), have highlighted the way in which girls are disadvantaged in the school. These studies have also brought attention to surrounding issues such as early marriage, teenage pregnancy and the burden of domestic responsibility and their impact on girls' education (Adomako Ampofo *et al.*, 2004). Again in 1995, this dilemma was highlighted when the World Bank issued their statement of educational policy priorities that emphasized the role of basic education, especially girls' education (Heward, 1999; Bloch & Vavrus, 1998). The follow-up to Jomtien, held in Dakar, Senegal in 2000 reiterated the concern for girls' education and commitments were made to achieve gender parity in terms of enrolment in primary and secondary education by 2005 and gender equality a mere decade later (UNESCO, 2003/4).² These conferences and the policy documents to emerge from them have centered the issue of "the girl child" as central theme for donors, governments and NGOs.

The well-placed position of the school, in that large numbers of young people who are most at risk and vulnerable are concentrated there, and are likely to be uninfected, mean that the education sector has come to be somewhat viewed as a panacea. The World Bank and the UN contend that education is the single most effective preventative weapon against HIV/AIDS (Jellema & Philips, 2004). While education has been identified as being instrumental in fostering social and physical well-being and poverty reduction, it has even been asserted that not only must schools and the educational system respond to the changes brought on by the virus, they also have an essential role in *reversing* it by changing and developing healthier sexual habits and values (Carr-Hill, Kataboro & Katahoire, 2000). Indeed, it has been predicted that if every child were to receive a complete primary school education, around 700 000 cases of HIV could be prevented each year, resulting in 7 million in a mere decade (Jellema & Philips, 2004).

Nevertheless, a number of salient issues challenge the capacity of the educational system to address HIV/AIDS. Some of the internal barriers such as teacher related AIDS deaths, restricted

² Gender parity is a measure of the proportion of boys and girls in relation to their respective age groups, which enter and complete the full primary and secondary school cycles. The Gender Parity Index (GPI) is measured by the ratio between female and male values for any given indicator, with parity being equal to one. Gender equality is a much loftier goal that entails innumerable and often hard to measure indicators such as equal chances to attend and benefit from education, gender sensitive curricula, equal outcomes in terms of length of schooling, achievement, academic qualifications and equal job opportunities and earnings for similar qualifications and experience. A number of additional, more qualitative indicators such as perceptions and expectations regarding treatment of boys and girls are necessary to obtain a more accurate assessment (UNESCO, 2003/4).

access of girls to education, large numbers of out of school youth, power structures within the school³, harassment and abuse⁴, teacher-student sexual relations⁵, lack of resources, an overcrowded curriculum, teacher discomfort and lack of knowledge of AIDS, and external barriers such as religious influences and parental disapproval, conspire to create an environment which is not conducive to discussing sensitive and traditionally taboo topics. Furthermore, many of these factors actually contribute to the increased vulnerability of young people.

In addition, the education sector is but one arena in which young people are sent implicit and explicit messages regarding sex, condoms and HIV/AIDS and ultimately their gendered and sexual identities. Mass media, the market economy, and the educational system are all potential agents of change impacting identity formation and values not only of the individual, but also society in general (Darnell & Hoëm, 1996). Indeed, an additional gap in the literature centers on the lack of comprehensive studies into how young people in societies undergoing significant social and economic change such as Tanzania construct and reconstruct their gendered and sexual identities and the implications this has for HIV/AIDS programming. The fact that sexual behavior and identities are underpinned by innumerable social contextual factors means that greater in-depth studies are needed to inform program design. As this study will highlight, the diversity and often conflictual nature of gendered messages that young people are exposed to can often be seen to run along the fault lines of tradition and modernity and the expectations and norms bound up in each. By exploring these tensions and subsequent power relations as they are played out in young peoples relationships with each other, their teachers, their parents and the wider community through a case study, insight into the way in which gendered identities are constructed may contribute to broader understandings of young peoples' social context.

Since education has come to be perceived as a "social vaccine", a particular focus on examining the social context of the school as one crucial arena where gendered identities are constructed and reconstructed may yield some practical suggestions for designing contextually sensitive HIV/AIDS educational programs. Though the link between gender and HIV/AIDS is acknowledged in relation to education, translating theory to practice has been slow and there is a relative paucity of programs designed to address this need and move forward aiming to transform

³ Mirembe and Davies (2001) exposed a number of power structures within a Ugandan school that heightened risk of HIV/AIDS for both girls and boys.

⁴ Leach and Machakanja (2000) noted that the majority of studies thus far have focused on external barriers to girls' enrolment such as indirect costs related to school fees, uniforms and textbooks and also distances to school, early marriages and parental resistance, while ignoring the barriers within the school itself (such as violence and abuse) that prevented them from completing their education successfully. Similarly, Human Rights Watch (2001) has conducted a study looking into violence in South African schools. A website developed by Leach, www.id21.org serves as a platform for disseminating work related to gender violence in schools.

⁵ Shumba's (2001) study looks at teacher-student sexual relations in Zimbabwean secondary schools.

gender roles and power relations (Gupta, 2000; Rivers & Aggleton, 1998; UNAIDS, 1999a).

Despite questions surrounding the effectiveness and limitations of school-based HIV/AIDS education programs, and despite the persuasive influence of sources other than school on young people, schools nevertheless have a significant role to play in the fight against HIV and every effort must be made to improve school-based programming. The case study approach was chosen in order to expose how the school, as one example of an institution where “gender regimes” are produced and reproduced plays a role in shaping young peoples sexual and gendered identities and what this means for program planners of HIV/AIDS educational programs.

Although views from related key informants such as teachers and parents are included to present a broader, more holistic perspective, the central focus lies primarily on the views and experiences of students themselves in recognition that the most effective interventions incorporate insights from young people, whom the programs are designed for. Despite the fact that sexual behavior is a complex interaction of factors which may not be readily identifiable by young people, their views are essential to understanding how social and cultural norms, values and gendered identities in relation to sexuality are produced and reproduced.

1.2 The Research Questions

This research aimed to investigate how gender roles in the Kilimanjaro region may heighten the risk and/or vulnerability⁶ of boys and/or girls to HIV/AIDS, with a focus on the school. The target population in this case study was adolescents, whom WHO (1989) defines as being between the ages of 10 and 19. This transitional period in life is characterized by simultaneous changes in the physical and psychological realms and is the period in which decision making capabilities and health related habits are formed (WHO, 1989).⁷ In Tanzania, an adolescent or youth is called *kijana* in Kiswahili, though the meaning depends largely on the context and speaker using the term (Stambach, 2000). This expression is used to demarcate the period in which young people are not yet adults (*watu wazima*) but are no longer small children (*watoto wadogo*). While other terms may be used other than adolescents, such as youth, throughout this thesis the term young people is used

⁶ Risk and vulnerability, often used interchangeably are semantically differentiated by the fact that risk refers to engaging in behaviors or situations where HIV can be transmitted. Vulnerability refers to the extent to which a person has control over the level of risk they are exposed to. Essentially, risk is an objective concept, whereas vulnerability is more subjective in that it examines how and why some groups of people experience higher levels of risk in their lives. Vulnerability, though it has been said to stigmatize certain groups, has also been viewed as the opposite of empowered and thus can refer to several groups, including men.

⁷ It should be noted that this phase cannot be viewed homogeneously; in many societies transition to adulthood is marked in different ways and at different ages, making cross-cultural comparisons without knowledge of the context problematic (UNAIDS, 1999b).

as a descriptor for this phase in life.

The primary questions that guided the study were:

- 1. To what extent do students in the Kilimanjaro region perceive that there is a contradiction between the gendered expectations and messages about sex and gender roles in the school as opposed to messages they receive from parents and wider society?*
- 2. To what extent does the school environment send implicit and explicitly gendered messages to students that might be harmful and limit the success of HIV/AIDS educational programmes?*
- 3. What are the implications of these findings in terms of devising contextually sensitive HIV/AIDS educational programming?*

1.3 Thesis Structure

This thesis is divided into 9 chapters. While this chapter has aimed to introduce the study and topic of gender and HIV/AIDS education, the following will contextualize the factors surrounding the HIV/AIDS pandemic in Tanzania and provide pertinent background information relevant to the study. The third chapter discusses a number of central concepts relevant to this study such as gender, tradition, modernity, power, and risk. In particular gender and power are linked in a framework to explore how gender and power relations are manifested in the school setting. Following, a chapter reviewing the literature on school-based education will outline the types of HIV/AIDS educational programs, their location on a gendered continuum and review the literature on their effectiveness. Also included will be a look at past and present sex education in Tanzania. This will be followed up with a systematic outline of the research methodology that was utilized in the thesis, and set the stage for the presentation of the findings and results in the next three chapters. The last chapter will synthesize the findings generate suggestions future research.

Chapter 2: Contextual Analysis

Having briefly introduced the context of this study, this chapter will set the stage for the rest of the study by providing pertinent background information both on the issue of HIV/AIDS, and on Tanzania in order to contextualize and map out relevant issues. An overview of HIV/AIDS in Sub-Saharan Africa and Tanzania and the governmental response to the epidemic will be followed by a more detailed look at the interrelatedness of gender and risk of HIV. Following, the intersection of poverty, gender and HIV will be explored. A section detailing basic information on the country itself and the Kilimanjaro region will follow. Finally, the education system will be described in its historical context and current reforms being implemented by the government will be discussed.

2.1 HIV/AIDS in Sub-Saharan Africa

HIV/AIDS is reversing positive development trends in Africa, with the continent accounting for 80% of new infections worldwide (UNAIDS, 2004). The pandemic has grave consequences economically, politically and socially, and is proving to be a significant barrier to achieving Education for All (EFA)⁸, which includes universal primary education (UPE) and gender equity (2 of the 8 Millennium Development Goals), by 2015. In sub-Saharan Africa (SSA) the crisis is particularly acute, having the world's highest prevalence rates, which have been steady in recent years due to a balance between mortality rates and new cases. In the face of increased funding, political commitment and resources being expended to stem the flow of the pandemic, the number of cases continues to rise and outpace all efforts to contain it.⁹ In sub-Saharan Africa, the primary mode of transmission remains heterosexual contact. It is estimated that in 2003, the region saw the infection of 3 million people (UNAIDS, 2004). Considering that since the first AIDS case was reported in 1981, 20 years have elapsed and 20 million lives have been lost, it is clear that the pandemic has left the weakest countries even weaker.

Without a cure on the horizon, and the inability of the poor to purchase antiretroviral

⁸ The World Conference on Education for All took place in Jomtien in March 1990 and was sponsored by the World Bank, UNDP, UNESCO and UNICEF. The main goals to be attained by 2000 were to reverse stagnant enrolment trends in developing nations, falling completion rates and substandard learning outcomes (Brock-Utne, 2000). This conference has been criticized and said to result in "Education for Some", rather than Education for All due to the macro-economic policies being pursued. The follow-up conference in Dakar, Senegal in April 2000 reaffirmed these goals. In 2002, the World Bank initiated the Fast Track Initiative (FTI) to speed up the process.

⁹ Several conferences such as the Cairo International Conference on Population and Development, the Millennium Summit, the 2001 UN General Assembly Special Session on HIV/AIDS, and the 2002 UN General Assembly Special Session on Children have all pledged action against HIV/AIDS.

medicine, it is clear that effective prevention is essential to alleviate and halt the spread of the virus. HIV/AIDS exposes and preys on the young in their most reproductive years (15-24), and it also affects a disproportionate number of women, thus making young women the most vulnerable of all. Indeed, young people represent almost half of all new HIV infections across the globe. In 2003, women comprised 50% of those infected worldwide, and 57% in sub-Saharan Africa (UNAIDS, 2004). Aside from biological reasons¹⁰, social, cultural, and economic reasons put women and girls at greater risk and vulnerability. Stigma, violence, lack of education and job opportunities, their role as caregivers, and violence are some examples of the factors that conspire to heighten their risk. Other groups of youth at risk include migrants and refugees, the homeless, intravenous drug users, sex workers, and young girls forced to have sex.

In the wake of the virus, it is estimated that either one or both parents have died leaving 12 million orphans in sub-Saharan Africa. As of 2002 in the Kilimanjaro region, it was estimated that there was a minimum of 50 000 orphans, though the figures are undoubtedly higher; stigma prevents the reporting of orphans in many instances (Lie & Lothe, 2002). Children whose lives are affected by HIV/AIDS are left to care for sick relatives and parents, and are likely to drop out of school and enter the informal labour sector to make ends meet. This will affect girls more than boys, to a large extent. It will also affect the nations' teachers: the World Bank estimates that 14 460 teachers could die as a result of HIV, further straining an already weak system (Garbus, 2004).

2.2 HIV/AIDS in Tanzania

The first reported cases of AIDS in Tanzania occurred in the northwest region of Kagera in 1983 (Measure, 2001; Klepp *et al.*, 1995). Now, HIV/AIDS has spread throughout all areas in mainland Tanzania and Zanzibar. It was estimated that in 2002, more than 2 million people were infected in Tanzania, when the president Benjamin Mkapa declared that the pandemic had created a national disaster (TACAIDS, 2003; USAID, 2004). According to an HIV sentinel surveillance in 2002, the overall prevalence rate in the country was 9.6% (Garbus, 2004). However, it is difficult to obtain accurate numbers and figures, as widespread underreporting and lack of diagnostic tools skew the data. Currently, 60% of the nation's 35 million inhabitants are under the age of 25, underscoring the urgency of educating this cohort (USAID, 2004). Approximately 80% of all cases occur in the most productive years (20-44), with women being four to seven times more likely to

¹⁰ Biologically, women are more at risk to do the fact that: the vagina has a larger area of exposed, sensitive skin than the penis, the virus survives more readily in the vagina than on the surface of the penis, and there are more copies of HIV in a man's semen than there are in the fluids of the vagina (UNAIDS, 2001). This holds true for the anus, which is more likely in all cases to be more susceptible to HIV, hence the high risk nature of anal sex. In addition, "silent" untreated STDs appear to be more common in women than in men (Klepp *et al.*, 1995).

die of AIDS than men (TACAIDS, 2003; UNAIDS, 2002). In addition, prevalence is at least three times higher in urban areas compared to rural settings (Measure, 2001).

In Tanzania, transmission figures currently rest at approximately 80% via heterosexual transmission, less than 5% parent to child transmission (PTCT)¹¹, and less than 1% through blood transfusion (USAID, 2004). One of several indicators that the pandemic is reversing positive trends in the nation's development, the presence of AIDS has decreased the life expectancy of Tanzanian's by 10 years due to adult and child mortality rates (TACAIDS, 2003).

Although most have heard of AIDS and know how it is transmitted, there are still glaring gaps in the knowledge of the public, and numerous misconceptions regarding AIDS and condoms abound, for example: you can tell by looking at a person if they are infected, having sex with a virgin will cure you, you can get AIDS from a mosquito bite or by eating with someone who has it (Measure, 2001). In addition, contradictory messages primarily from religious leaders regarding the efficacy of condoms in particular are problematic and will be discussed in greater detail in the results and discussion chapters. Another barrier to condom use in Tanzania is that sex by definition means ejaculation into a woman. To use a condom is considered to be "dirtying oneself" (Setel, 1996). Similarly, Heguye (1995) found that Tanzanians likened condoms to "eating sweets wrapped in plastic paper".

2.3 Governmental and International Mobilization against AIDS in Tanzania

In 1985, the government formulated a national response to re-evaluate its development strategy through a series of short and medium term plans, the latest being in January 2003. The Tanzania Development Vision 2025¹² and Kilimanjaro Vision 2025 have also been instrumental in formulating strategic AIDS policy, though the goals are far from being met (UNICEF, 2002).

The National Multi-Sectoral Strategic Framework on HIV/AIDS (2003-2007), which laid out the principles and approaches to guide the national response, acknowledges that structural constraints and lack of political will in the past have meant that while frameworks have been developed, plans have not been operationalized, such as in the realm of education where implementing a comprehensive, mandatory HIV/AIDS program in primary and secondary schools was mandated but not actualized until much later. Tanzania has established the National AIDS Control Programme (NACP) which is spearheaded by the Ministry of Health, a National Advisory Board on AIDS (NABA), Zanzibar AIDS Commission (ZAC), and the Tanzania Commission for

¹¹ The expression "Mother to child transmission" has undergone criticism because it essentially stigmatizes and blames women. Alternatively, some are beginning to use "Parent to child transmission".

¹² This document lays the groundwork for the nation's future macroeconomic plans.

HIV/AIDS (TACAIDS), all of which are responsible for coordinating the national response to the pandemic (UNAIDS, 2002). The role of the MoEC (Ministry of Education and Culture) will be outlined later in this chapter. In relation to gender, the Tanzania Gender Networking Programme (TGNP) who lobby to have gender mainstreamed in all of the nations policies have been influential (Baylies & Bujra, 2000). In conjunction with USAID in 2003, Tanzania also established a Prevention of Mother to Child Transmission (PMTCT) program (USAID, 2004).¹³

One of the main obstacles to Tanzania's multi-sectoral approach is that it has been largely uncoordinated, disjointed and overlapping in many areas (USAID, 2004). This has resulted in the dissemination of various conflicting and confusing messages. There have also been very limited efforts at integrating messages of gender equity into the broader social context in order to influence familial and community relationships, reinforcing more long-term, sustainable behavior change.

2.4 The Link between Poverty, HIV/AIDS and Gender in Tanzania

Poverty, gender and AIDS are inextricably linked, resulting in inequalities which underpin the social fabric in societies in a manner which facilitates the spread of AIDS and undermines prevention efforts (Campbell, 2003). For instance, debt and economic structural adjustment programs (ESAPs)¹⁴ have deepened the problem by depriving the educational and health sectors of desperately needed funding (Heward, 1999; Stromquist, 1999; Adomako Ampofo *et al.*, 2004). Despite Tanzania's macroeconomic gains, benefits have yet to trickle down to the micro-level and the nation remains one of the world's poorest (Garbus, 2004). It has been found that SAPs exacerbate the gender issue, affecting women and girls disproportionately in terms of education, employment and economic opportunities (Garbus, 2004; Heward, 1999). As Baylies and Bujra (2000:41) explain, AIDS came at a time when Tanzania was, "...firmly locked in the embrace of International Monetary Fund with its neo-liberal formulas dictating that public spending be reduced, government cut down to size, and private provision encouraged".

Shedding light on the interlocking concepts of gender, poverty and HIV/AIDS, Håkon Björkman, who is a senior advisor in UNDP, explains that:

"HIV/AIDS is not strictly speaking a disease of poverty, as it affects people at all income levels. But evidence from some countries in advanced states of the pandemic show that new HIV infections

¹³ There is a burgeoning NGO scene in Tanzania contributing to the multi-sectoral approach to HIV/AIDS including USAID, Ireland AID, DANIDA, CIDA, SIDA, NORAD, DFID, UNFPA, UNICEF, UNAIDS, WHO, Marie Stopes, YouthNet, ActionAid, Care, World Vision, Red Cross and the African Medical Research Foundation (AMREF). KIWAKKUKI (Women's Group Against AIDS in Kilimanjaro), one of the most prominent grassroots organizations in Moshi is predominantly comprised of women, but provides outreach, education and VCT to both men and women.

¹⁴ Brock-Utne (2000) describes how some refer to ESAPs as being "Extreme Suffering for the African People".

disproportionately affect poor people, unskilled workers, and those lacking literacy skills-especially young women in each of these categories. The relationship among poverty, gender and HIV vulnerability has important policy implications” (Björkman, cited in Garbus, 2004:16).

Poverty Reduction Strategy Papers (PRSPs) are planning instruments that determine national priorities and resource allocation. The fact that HIV/AIDS contributes and thrives in poverty has prompted UNDP to recommend that HIV/AIDS be placed at the center of all planning.

Tanzania is one of the poorest countries in sub-Saharan Africa. In UNDP’s Human Development Index (HDI), Tanzania ranked 160 out of 175 countries whose HDI was calculated. Moreover, Tanzania’s HDI has actually been decreasing since 1990. In other rankings, the country scored 130 out of 144 nations on UNDP’s Gender-related Development Index (GDI) which incorporates data on life expectancy, education and income (Garbus, 2004). Despite being a recipient of debt relief under HIPC (debt is not cancelled; rather, payments are restructured through the provision of grants), Tanzania still faces enormous obstacles in terms of access to health care due to lack of infrastructure and distance to facilities in rural areas (Garbus, 2004).¹⁵ In the case of women, the situation is exacerbated by their low socio-economic status. At particularly high risk are commercial sex workers, including bar workers and prostitutes (Talle, 1995).

2.5 General Background of Tanzania



Figure 1: Map of Tanzania

The United Republic of Tanzania was formed in 1964 as a result of the union between mainland Tanganyika and Zanzibar, and is divided into 26 regions, with 21 being on the mainland and 5 on Zanzibar (which retains a considerable amount of autonomy). In 2003, the population was

¹⁵ The HIPC (Highly Indebted Poor Countries) program is kick-started when a nation has been deemed to stabilize their economy. See www.worldbank.org/hipc for more information.

35.4 million, which is expected to increase to 52 million in 2025 and 73.8 million in 2050 (Garbus, 2004).

The population is approximately 45% Muslim, and 45% Christian¹⁶, with the remaining followers being practitioners of various indigenous beliefs. There are over 130 tribes represented, which make generalizations about “Tanzanians” impossible. Even within the Chagga, there are different clans, with different linguistic and cultural backgrounds and practices. The nation’s first president, Julius K. Nyerere pushed for national unity which has meant that there has been very little tension between the various groups and inter-marriage has become more common. His pursuit of a socialist model of development with a distinctly African flare is well known, though it was largely unsuccessful.¹⁷ Kiswahili is the national language that unites Tanzanians and indeed East Africans.

The site of this case study was the Kilimanjaro region, which will be discussed below to provide relevant background information.

2.6 The Kilimanjaro Region



The Kilimanjaro Region, so named for its proximity to the famed mountain, is located in north-eastern Tanzania. It borders Kenya in the north, Tanga region in the southeast, and Arusha region to the southwest (National Bureau of Statistics & Kilimanjaro Regional Commissioner’s

¹⁶ Christian missionaries were active in Tanganyika from the mid-19th century, bringing with them for better or worse not only their religion, but also hospitals and schools patterned on those found in the West.

¹⁷ The reasons for this are debatable but could be attributable to: resistance from upper and middle class traders, the bureaucratic bourgeoisie, and the mode of production’s inability to keep pace with demands of the more modern socialistic mode of production (Hyden, 1980). Despite this, Nyerere remains a much loved and respected figure who managed to create a sense of unity that transcended tribe, clan and religion in stark contrast to the situation in neighboring countries such as Rwanda, Burundi and Uganda which are embroiled in civil conflict and unrest.

Office, 2002).¹⁸ Kilimanjaro is the smallest region in terms of area on the mainland, but one of the most prosperous. Due to contact with missionaries as early as the 1840s, education and health services were developed well ahead of the rest of Tanzania. The region consists of six administrative districts: Rombo, Mwangi, Same, Hai, Moshi Rural and Moshi Municipality, which are further sub-divided into 26 divisions, 121 wards and 449 villages (KSEP, 2002). Following the lead of the Tanzania Development Vision 2025, the region has also formulated a Vision 2025 document to guide its development in the coming years.

The majority of residents in the region are Chagga and Pare, though no percentages are available, likely attributable to Nyerere's desire to downplay tribal identity and foster a sense of national unity. The largest segment of the population is represented by the 0-14 year's cohort, making up a staggering 46.4% of the region (ibid). This high number of dependants demonstrates the dire need for HIV/AIDS education at the earliest stage possible. As the Socio Economic Profile (2002) details, not only do women constitute the majority of the population, they also bear the brunt of the work load in families, averaging 16 hours a day of work, not to mention the hours spent caring for children. The KSEP (2002) recognizes that women remain a disadvantaged sex in many arenas despite governmental attempts to improve women's rights.

High levels of migration are a distinctive feature of the region, due to arable land shortages which push many into urban areas. Many go as far as Nairobi for work, leaving children and wives behind to tend to the homes and farm land (Talle, 1995). As will be discussed later, this increased mobility has impacted the trajectory of AIDS in the region, since many men take on sexual partners in their absence and bring home HIV to their wives. Despite land scarcity, it is believed that approximately 75% of the population reside in rural areas where they concentrate on agriculture and livestock which accounts for 69.2% of GDP earnings (KSEP, 2002).

In terms of HIV/AIDS, the Socio Economic Profile (2002) reports that, grouped together, AIDS and tuberculosis rank fourth as the regions leading cause of death. In comparison with the rest of mainland Tanzania, it is also notable that Kilimanjaro rose from number six in 1992 to number three in 1996 for the rate of AIDS per 100 000, based on cumulative cases (ibid).

In the education sector, Kilimanjaro boasts the highest numbers of primary and secondary schools, vocational training centres, nursery schools and literacy rates (ibid). The regions prosperity is further evident in the enrolment figures. In Standard I, the region had a 96.1% enrolment rate in 1998, one of the best in the nation. Despite this, opportunities for entry into secondary school remain an issue. In 1992 for instance, only 5% of primary school leavers gained

¹⁸ The National Bureau of Statistics and Kilimanjaro Regional Commissioner's Office compiled the Kilimanjaro Socio-Economic Profile, which will hereafter be referenced as KSEP (2002).

admission to the government secondary schools in the region (Talle, 1995). Although Kilimanjaro boasts a number of private secondary schools, the fees make it inaccessible to many.

2.7 Tanzania's Education System

2.7.1 The Pre-Colonial Period

Tanzania's education system is intimately linked to its past and thus cannot be understood in isolation.¹⁹ Throughout the course of history, various rulers, leaders and economic reforms have left their mark on the organization of education and its curriculum objectives and outcomes (Lindhe, 1999). Nyerere (cited in Brock-Utne, 2000:276) points out,

“The fact that pre-colonial Africa did not have “schools”—except for short periods of initiation in some tribes—did not mean that the children were not educated. They learned by living and doing. In the homes and on the farms they were taught the skills of the society and the behaviour expected by its members...Education was thus “informal”; every adult was a teacher to a greater or lesser degree. But this lack of formality did not mean that there was no education, nor did it affect its importance to the society. Indeed, it may have made the education more directly relevant to the society in which the child was growing up”.

Learning was by first-hand experience, through elders, parents, and peers, and the use of stories, riddles, proverbs and songs (Fuglesang, 1982). Ecology, spirituality, medicine, agriculture, meteorology, zoology, geography, handicrafts, cooking, and other relevant subjects were integrated in a holistic, comprehensive view. These informal methods of learning served the purposes sufficiently of passing on valuable knowledge from one generation to the next in order to survive and thrive in their communities.

2.7.2 Colonial Period (1885-1918, 1945-1961)

In the era of German rule, the formal system of education existed primarily to produce administrative personnel. When the British took over in 1919, their method of ‘indirect rule’ mirrored the German efforts at producing an educated central administration and incorporated a policy of adaptation or a blending of Western and local norms and values (Buchert, 1994). The earliest missionary activities in East Africa took place in Kilimanjaro: by the end of the 19th century, churches, schools and hospitals had been built (Talle, 1995). These early European influences resulted in comparatively high levels of literacy and economic development in the

¹⁹ Buchert's (1994) review of the nation's education system accounts for economic and social impacts and provides a comprehensive timeline of the changes the education system has undergone.

region, which can still be seen today.

2.7.3 Independence (1961)

Various reforms were undertaken to alter the education system so that Tanzania's socialist agenda could be pursued. Nyerere's paper on Education for Self Reliance (ESR), together with the subsequent Arusha Declaration on Socialism²⁰ provided the foundation for these educational reforms and the impetus for the nation's extensive campaign to eradicate illiteracy and pursue UPE²¹ (Brock-Utne, 2000). The ESR focused on practical preparation of the young for a productive life in the predominantly agricultural society, pursued through a 'learning by doing' approach. The philosophy was also characterized by the concept of *ujamaa* (literally: familyhood), on equality and mass participation in local and national developments (Buchert, 1994).

The socialist underpinnings of education in Tanzania have been strained considerably in light of the recent changes the country has been undergoing in several spheres, notably under the pressure of ESAPs as outlined earlier in this chapter.²² The challenges of having an education system that reflects the contemporary needs of its citizens, economically and socially are forcing the nation to reconsider and reassess its values and needs and how the education sector can best meet those needs. Teachers recently expressed confusion over the current state of education—do they continue to adhere to the socialist principles of Nyerere, or pursue more liberalist agendas in line with the country's changing economic policies? In the Arusha Times (accessed online, 11.04.04), the Arumeru Teachers Association issued a statement lamenting that,

“In the past it was easy, our country's policy was Socialism so the guidelines were clear and in schools, we prepared our students to be socialist and self-reliant...It is no longer a secret, all the deeds indicate that Tanzania has become a capitalist state, it only remains for our leaders to make it official, that's all! Socialism, self reliance as stipulated in the Arusha Declaration is just a fairy tale at the moment but teachers still need official guidelines and directions to follow in building pupils and students' foundation for the future”.

However, the shift in ideology can be clearly seen in the ESDPD (2000), in such statements as:

“The people must cultivate a community spirit; one which, however, is appropriately balanced with respect for individual initiative” (ESDPD, 2000:12)

²⁰ The declaration focused on the principles of equality, freedom and brotherhood (Buchert, 1994).

²¹ UPE was introduced in Tanzania in 1977. As a result of this and liberalization of secondary education, the age composition in schools has changed dramatically (Lugoe, 1996). In Form III for instance, ages may range from 14-21. The implications for this in terms of HIV/AIDS education will be mentioned later on.

²² Less than 10% of the national budget goes to the social sector, and early gains in literacy achievement have been eroded. In addition, the reintroduction of user fees in secondary schools has impacted access to education along the fault lines of gender and class (Brock-Utne, 2000).

“Curriculum reform shall be in line with current market demand and competencies required to compete in the global market” (ESDSD, 2000:22)

This acknowledgement of a new emphasis on individualism and a more outward oriented vision of the nation’s educational system and societal needs indicate that a shift in thinking has taken place.

Educational attainment is considered to be extremely important in Tanzania as a way to increase social and economic status. In recognition of the role that education plays in propelling the nation towards a more “developed” society, the Education Sector Development Programme Document (2001:3) asserts that:

“Education should be treated as a strategic agent for mind set transformation and the creation of a well educated nation, sufficiently equipped with the knowledge needed to completely and competitively solve the development challenges which face the nation. In this light, the education system should be restructured and transformed qualitatively with a focus on promoting creativity and problem solving”.

These important references to identity formation and critical thinking skills will positively impact HIV/AIDS educational programs if the statements are actualized and not simply rhetoric.

The current structure of the educational system, based on the British model, consists of 2 years pre-primary and 7 years primary, which is compulsory. There are a further 4 years junior secondary (“O” or ordinary level), and 2 years of senior secondary (“A” or advanced level), followed by 3 or more years at the tertiary level. In terms of language, Tanzania’s bilingual policy means that while Kiswahili is the language of instruction at the primary level, English is utilized at the secondary level. Many believe this is imperative in connecting Tanzanians to the world and keep them competitive in the realms of technology, communication, business, science and the economy. It has been claimed that Kiswahili lacks the sophistication of English to deal with advanced concepts. In response, scientists have produced a dictionary of terms in such fields as biology, physics and chemistry. The difference in quality and quantity of English and Kiswahili text books and materials in the secondary schools also fuelled the belief that Kiswahili is inferior (Brock-Utne, 2000).

In terms of gender parity, it is estimated that enrolment is roughly equal at the primary level, but figures show a “funnel effect” or pyramid whereby the gap in the ratio of boys to girls increases with each subsequent level (UNESCO, 2003/4; ESDPD, 2000). Class size is also an issue in the nation, with the accepted national standard ratio resting at 45:1 (KSEP, 2002). However, in the region this case study is situated in, Moshi Urban, the reality is that there are on average 65 students per classroom, resulting in a shortage of approximately 459 classrooms (KSEP, 2002).

Gender disparities in access and performance within the education system in Tanzania have

been noted (Bendera, 1999; Creighton & Omari, 2000). Girls have consistently lagged behind their male counterparts in Primary School Leaving Examinations (PSLE) (Mmbaga, 2002). Consequently, a gender coordinating unit (GCU) was established within the MoEC with the tasks of monitoring gender activities in schools and conducting research on the issue. Underscoring how deep seated gender issues remain however, the GCU has been criticized as being weak, lacking in authority and autonomy and doing nothing more than paying lip service to donors. Its shortcomings are reflected in the fact that there are very few women occupying influential positions at the MoEC, which has been characterized as being dominated by the “old boys network” (Bendera, 1999).²³

2.7.4 Current Educational Reforms and Challenges

While a 90% literacy rate was achieved in the 1970s, by 1997 it had decreased to 71%. Gross enrolment rates for primary school also decreased from 90% in the 1980s, to 77.9% in 1999 (ESDPD, 2000). In terms of the number of students rising from primary to secondary school, only 18% moved on in 1999, while advancement to tertiary education was 0.24% (ESDPD, 2000).

To address these concerns, the government initiated the Education Sector Development Programme (ESDP) in 1996, which was intended to reform the whole education sector and link it to the macro policies designed to pursue the goals articulated in the Tanzanian Development Vision 2025 (ESDPD, 2000). Medium and long term strategies stretching from 1999-2015 propose a decentralized, bottom-up holistic approach built on the principles of coordination, collaboration and synchronization in contrast to traditional top-down methods.²⁴

Attempting to quantitatively and qualitatively address pressing issues within Tanzania’s educational system such as access (UPE by 2015, 50% transition rate from primary to secondary education), literacy (eliminate illiteracy by 2010), equity (gender parity at all levels), educational facilities, teacher/student ratios, and minimum qualifications for teachers, the ESDP aims to make significant progress in the improvement of the education sector.

In terms of gender, goals being pursued at the secondary school level include extra support for girls from disadvantaged families, support for those opting for science subjects, as well as sensitizing the community in regards to gender balance in schools (ibid.). Also noted is the role

²³ NGOs have also played a significant role in drawing attention to gender inequalities in Tanzania. The Tanzania Gender Networking Programme (TGNP), the Forum for African Women Educationalists (FAWE) and the Tanzania Media Women’s Association (TAMWA) have been involved in raising awareness on issues affecting girls’ education.

²⁴ Ministries which contribute to the management of the education sector are primarily the domain of the Ministry of Education and Culture (MoEC) and Science, Technology and Higher Education (MSTHE), while the management and administration of the primary sector is the responsibility of the Ministry of Regional Administration and Local Government (MHALG). Numerous other ministries also have direct influence on the sector (ESDPD, 2000).

education has in controlling the spread of HIV/AIDS. It aims to establish a program in order to: sensitize in-school youth at all levels on the spread and prevention of HIV/AIDS/STI, train guidance and counselling personnel, involve parents in prevention efforts through the use of committees and meetings, promote HIV/AIDS education through extra curricular activities and provide youth friendly services through the training of peer educators on life skills (ibid.).

Promising recent reforms also include the 2002-2006 Primary Education Development Plan (PEDP), which includes an innovative program called Complementary Basic Education in Tanzania (COBET), stating that for those not enrolled by 10 years of age or who have dropped out, non-formal education will be provided, presenting an ideal opportunity to incorporate HIV/AIDS education and life skills in order to reach out to those not in the formal education system (ibid.).²⁵

In addition, the PEDP recognizes the importance of addressing gender and HIV/AIDS as a crucial cross-cutting theme in education. In regards to the PEDP, it was commented that:

“It is recognized that while girls and boys begin and complete primary school in roughly equal numbers in Tanzania, the school environment is much more hostile to girls.²⁶ Girls often do not get an equal chance to participate in classroom interaction, the curriculum reinforces negative stereotypes, girls lack critical facilities such as user friendly toilets and water, and they are more vulnerable to sexual harassment. HIV/AIDS is having a major impact on teachers’ health, and more than a million children have lost one or both parents from the disease. PEDP aims to address these issues directly, but the actual ways in which this will be done has not yet been spelled out”.
(www.hakielimu.org, accessed 10.02.05)

By reviewing pertinent background information surrounding HIV/AIDS and education more generally in Tanzania, this chapter has sought to create a backdrop for the study and set the stage for more in-depth analysis of relevant concepts. The following two chapters will review the literature in order to explore the interconnected concepts of gender and power in detail, with reference to the school as a site of gender and power relations. The concept of risk in connection with gender and power will then be discussed to highlight the implications of the linkage. The following chapter will build on this discussion by reviewing the literature in relation to school-based HIV/AIDS education and how gender issues have figured into planning thus far.

²⁵ In recognition of the financial costs these improvements will incur, the government has allocated one quarter of its budget to education, with approximately 62% of that going to primary education (ESDPD, 2000).

²⁶ Other research has also suggested that Tanzania’s schools provide a “girl-unfriendly learning environment” in that girls endure beatings, teasing and discrimination. A study of girls in Mwanza found that 50% reported that pregnancy was a major problem amongst them, while 37% reported harassment by boys. Strikingly, it was found that expulsion due to pregnancy could be as high as 39 000 a year, thirteen times the official record (Kuleana cited in Evans, 2002).

Chapter 3: Conceptualizing Gender and Power

The first section of this chapter aims to provide a synopsis on what has already been written on gender, with the discussion moving forward to discuss how it is inextricably linked to power, through the use of Robert Connell's theory of gender and power. At this point, the concept of risk will be introduced and discussed to highlight the linkages between the concepts.

3.1 Gender

Dualistic perceptions of males and females are not new. Indeed, this symbolic relationship can be traced back to Genesis where Eve was made from the rib of Adam. Western literature is also a source of binary characterizations of the sexes: Aristotle, for instance claimed that "The female is a female by virtue of a certain lack of qualities", while Aquinas proclaimed woman to be an "imperfect man", and an "incidental being" (De Beauvoir, 1997). From Darwin's biological determinism to Descartes, many have sought to demonstrate how deeply embedded binary thinking is in the construction of symbolic opposite images of males and females as: activity/passivity, sun/moon, culture/nature, day/night, father/mother, head/heart, intelligible/palpable, logos/pathos, high/low and master/slave (Lips, 1991). In these dichotomous relations, feminists may argue that one of the terms is invariably viewed more favorably, or dominant than the other and power relations are part of an implicit hierarchy.²⁷ In a manner comparable to the findings of this thesis, the differences rather than the similarities between the sexes have historically been focused on.

The biological differences between men and women define sex. Gender however, is a much more complex, multifaceted, culture-specific construct that dictates women's and men's roles, access to productive resources, decision making authority, power and ultimately vulnerability to infection (Gupta, Whelan & Allendorf, 2002). It "underpins the very organization and systems of daily life in ways that seem "natural" and are not always obvious to us" (Dowsett, 2003:21). Furthermore, as Chikovore (2004:19) elaborates, "Whilst the gender axis involves a power advantage of men over women in virtually all societies, gender manifests itself in multiple forms, including relations among groups of men and groups of women. This means that gender power is neither unproblematic, nor consistently uni-directional". This is a particularly critical point, as it points to the reality that there are in fact multiple or disaggregated masculinities and femininities,

²⁷ From a functionalist perspective, the differences expressed in this twofold typology are defined by the meaning attached to each variable by the individual in relation to its function or purpose (Wallace & Wolf, 1991).

which are contextually dependant, a point emphasized by Connell (1987, 1996).²⁸ To add another layer of complexity to the construct, it has been recognized that gender norms change over time, from culture to culture, and even within cultures. In addition, the age axis cannot be ignored, as age intersects with gender to make young girls the most vulnerable to HIV/AIDS of all. What is consistent is a significant difference between women's and men's roles, access to resources and decision making power (Gupta, 2000). In recognition of the role that the passage of time plays in reconstructing gender norms and roles, the next section will address the way in which tradition and modernity are inherently gendered concepts.

3.2 Tradition, Modernity and Gender

“To be modern is to find ourselves in an environment that promises us adventure, power, joy, growth, transformation of ourselves and the world—and, at the same time, that threatens to destroy everything we have, everything we know, everything we are. Modern environments and experiences cut across all boundaries of geography and ethnicity, of class and nationality, of religion and ideology: in this sense, modernity can be said to unite all mankind. But it is a paradoxical unity, a unity of disunity: it pours us all into a maelstrom of perpetual disintegration and renewal, of struggle and contradiction, of ambiguity and anguish. To be modern is part of a universe in which, as Marx said, “all that is solid melts into air”. (Marshall Berman, *All That is Solid Melts into Air*, cited in Hodgson, 2001a:1)

“But really, I don't want our culture to be changed, because if we change our culture we will all be stupid. But I also don't want development to be lost, because if it is lost we will all go to the bush”. (Elder Maasai man, 1992, cited in Hodgson, 2001a:1)

These reflections touch on the inherently contradictory nature of tradition and modernity and reveal the differing ways in which people grapple with the issue. Attempts to define the terms may produce ambiguous and contentious results. Linguistically, tradition is derived from the Latin *traditum*, meaning that which is handed down from the past. For many, tradition conjures up images of rural, agrarian, pre-scientific communities resistant to change and innovation. Arguing for a more sophisticated understanding of the term, Kwame Gyekye (1997), a scholar from Ghana suggests that tradition be viewed as that which is inherited, accepted and preserved from previous generations rather than that which is simply handed down or transmitted. His stance is more sophisticated in that he allows for the contestation, rejection or acceptance by subsequent generations and is therefore a less static approach to the term than other conceptualizations.

At the opposing end of the spectrum, modernity is perceived as being dynamic, innovative, scientific, rational, future oriented, industrial and urbanized. The Latin term *modernus* derived from *modo*, meaning “just now”, “recently”, or “present” highlights the origins of modernity. Gyekye

²⁸ This represents an attempt to move beyond essentialism, and universalistic views which fail to account for the ways in which women and men construct and transfer these identities from one context to another (Campbell, 2003).

(1997) points out that the dichotomy between tradition and modernity is simplistic and rooted in false assumptions which fail to acknowledge the fact that many aspects of tradition are inherited, cherished and maintained in modernity. Similarly, it has been pointed out that, “Local groups often reshape their local identities when they meet challenges related to globalization processes, but they do not abandon these identities to become entirely globally oriented” (Stromquist & Monkman, 2000:21). Thus, the view that modernity represents a rupture in tradition and that the two are antithetical does not account for the fact that every society in the modern world exhibits many traditional elements inherited and accepted from previous generations. According to Crewe & Harrison (1998), simplistic dichotomizing of tradition and modernity survives because it provides an uncomplicated framework useful for development planners by concealing social processes such as how phenomena are continuously re-created, contested, negotiated and altered. This thesis adopts a stance similar to Gyekye in that polarized views of tradition and modernity as discrete phenomenon fall short of adequately conceptualizing the continuity between the two.

Globalization, often equated with modernization²⁹ and Westernization, is an enduring feature of development discourse in Tanzania, engaged in by young and old alike.³⁰ Some view Western influence as resulting in the social dislocation they see around them, which some believe has left a void with young people lacking defined roles and values. As Setel (1999:3) elaborates:

“For the residents of Kilimanjaro, AIDS has been a plague of paradoxes. Paradox and irony are at the core of the social experience of the epidemic and at the center of modern life more generally. Indeed, modernity itself contains an internal contradiction for Chagga. On one hand, colonial and postcolonial institutions (such as the church and Western education) were seen as escape routes from increasingly crowded mountain slopes where, over time, fewer and fewer households could be successfully sustained by agriculture. On the other hand, these same “escape routes” came to be associated with vulnerability to AIDS”.

Indeed, when AIDS first arrived in Kilimanjaro in 1984, the Chagga characterised it as being a “disease of development” (Setel, 1996).³¹ But in challenging simplistic assumptions about the pervasive effects of modernity on sexual mores and values, Setel (1999:28) critically states that:

²⁹ Modernization theory within development discourse presupposes a linear path to development and typically places the West at the apex. In discussing the fact that modernization is often used synonymously with Westernization, Gyekye (1997) points out that it is possible for a nation or society to come Westernized without becoming modernized, just as it is possible for one to become modernized without becoming completely Westernized (Japan, for instance).

³⁰ As early as 1918, ethnographic accounts portray a generation of Chagga who were “charmed by innovation”, more concerned with material acquisition and full stomachs than upholding tradition (Gutmann, 1926, cited in Setel, 1995b).

³¹ In his doctoral dissertation entitled “Bo’n town life: youth, AIDS, and the changing character of adulthood in Kilimanjaro, Tanzania”, Setel (1995a) found that urbanites were blamed for the spread of HIV. Similarly, Stambach (2000) found that in Machame on the slopes of Kilimanjaro, a distinction was drawn between what was called “city sisters” and “women of the house” reflective of the polarized lenses through which modernity and tradition are viewed.

“...much of the literature on AIDS in Africa is based on the presumption that sexual values have only become “destabilized” in the encounter with external forces such as colonialism, capitalism, and modernity...In Kilimanjaro, various local authorities staked their claim to knowledge of what traditional sexual mores were supposed to have been. Naturally, a great deal of local discourse about AIDS has been configured around these imagined mores, how they have been abandoned and have replaced modern desires, and how this “loss of culture” has been explicitly connected to a crisis in sanctioned modes of reproduction. This kind of folk model has been echoed in a great deal of scholarship on AIDS in Africa, but has too seldom been examined critically; the dominant voices that put forth this narrative have too seldom been challenged. The parties who make this case are often major stakeholders in the political uses of particular forms of historical consciousness about sexuality and social reproduction. Thus their standpoints and the local histories upon which they base their claims must be critically examined”.

He maintains that, sexuality, as a culturally shaped aspect of life similar to religion, agriculture and politics has always been dynamic and shifting. He concedes that speed and scope of changes have dramatically increased, but a static view of the past does not do history justice. Interestingly, Hansjörg Dilger, in his work amongst the Luo in Tanzania (2003) finds that while the young lament the social disruption they attribute to modernization, they do not perceive themselves as being mere victims of external forces. He reports that they are self-reflexive agents, critically reflective on their behaviour and conscious of inconsistencies in what they know and what they do.

In her writings on gender and modernity, Dorothy Hodgson (2001) points out that in spite of the rapidly expanding literature base on globalization, little attention has been paid to the pivotal role that gender plays in terms of restructuring norms, ideals and relationships between women and men. Persuasively, she argues that one of the effects of dichotomizing tradition and modernity which simultaneously “valorizes and stigmatizes” certain masculinities and femininities, is that men and women experience modernity quantitatively and qualitatively different given their structural positions, which are further mediated by factors such as class, age, ethnicity and sexuality. Similarly, Bond & Gilliam (1994:5) explain that social constructions of the past and present are “...pliable, fluid and amenable to different interpretations and interests”. Indeed, representations of the past, its values and way of life are an expression and source of power, which contain ideological and hegemonic elements. To expand on this issue of power and hegemony, a look at the influence of gender will illuminate how intimately connected the concepts are.

3.3 The Intersection of Gender and Power

The literature addressing the multifaceted and ubiquitous nature of power is an extensive one.³² Robert Chambers' (1997; 2004) discussion on semantics and power identifies a multitude of meanings and contexts in which power is a useful analytical tool for understanding the interactions between individuals and wider society. It can be used to describe *power over*; control over something or somebody entailing negative acts such as lies and concealment, with consequences such as the destruction of trust and diversity. Or, it can have more positive connotations such as *power to* which deals with autonomy, *power with* in association with collectivity and solidarity and *power within* in relation to self-worth and confidence. He asserts that although power is often viewed as part of an inherent struggle where only one can surface as winner in a zero-sum game, in fact there are many instances of power relations where all win. *Power over*, he maintains, can be converted into *power to empower*. *Power with*, can be stimulated through decentralization, alliances, networks, social movements and communities of practice. He further identifies *power within* as associated with capacity building.

Foucault (1978) likewise held the view that power should not be perceived as being universally repressive; this ignores the fact that power also has the potential to be constructive and enabling. He maintains that through discourses people can alter existing power relations, which points to the fact that power is not fixed, but is fluid: individuals may contest, argue and challenge power relations. In relation to gender, deterministic assumptions that portray girls and women, for instance, as being mere pawns subject to the control of men fails to account for their agency and the numerous and complex ways in which they shape, negotiate and maneuver their realities. For instance, evidence of negotiation was found in this case study amongst boys and girls when initiating a relationship, and again in the manner in which girls use their sexuality to obtain material possessions. These examples demonstrate that girls can and do influence and control their sexual lives to some extent. Furthermore, power only exists when one exerts power and the other complies. Thus, in order for power relations to exist between man and woman, the woman must be complicit in maintaining the relation by her obedience.³³ An instance of this was observed within a courting ritual between boys and girls whereby girls knowingly engaged in a pattern which they knew would end in either having to give sex or money to the boy, or face violence. Thus, in this case where girls

³² Early theorists such as Durkheim and Marx viewed power as an inherent structural feature embedded in society. More recent attempts to conceptualize power from Foucault, Bourdieu and Giddens for example raised many more questions on the complex interplay of power relations and ultimately culminated in attempts by Bourdieu (1977) and Giddens (1979) to link agency and structure (Oldersma & Davis, 1991).

³³ Bourdieu (1990) used the term 'habitus' to demonstrate how some social and cultural practices are so engrained that not only do people accept them, they also uphold them in a process of perpetuation to their own detriment.

had a choice as to whether they were willing participants or coerced victims, the girls' choices made them complicit in perpetuating this pattern.

It has also been pointed out that men experience power in multifarious manners, not all of which are positive (Ählberg, Jylkas & Krantz, 2001). Both individual and social power can be a source of tremendous fear, frustration and isolation. Evidence from this case study supports this idea that boys feel that they must be able to provide for a girl in order to keep her. A number of boys reported working part-time so that they could afford to buy girls food and gifts, and expressed anxiety at losing a girl because they could not provide the material possessions she desired. In situations of unemployment, this frustration at not being able to live up to the masculine ideal as provider could potentially escalate into violence.

Asymmetrical power relations between the sexes underpin societal structures and have been a central topic within feminist discourse for the last two decades, which have sought to broaden understandings of how gender and power are intimately connected. Largely based on previous writings on sexual inequality and power structures, Connell's (1987) integrative theory of gender and power adopts a social structural approach to illuminating what he has identified as three major overlapping structures inherent in relations between men and women: the sexual division of labor, the structure of the sexual division of power, and the structure of cathexis.³⁴ The first two had previously been identified in the literature; Connell conceptualized the third structure of cathexis to expose the affective dimension of relationships. All three can be viewed as structures in that they reveal a pattern of constraint on social practice. Part of the appeal of Connell's theory lies in its attempt to move away from deterministic approaches implying completeness: although he still works within a framework of structure, he nevertheless recognizes that the structures he has identified are neither mutually exclusive, nor exhaustive but are rather overlapping.

The three intertwined, but distinct structures exist at two levels: the societal and the institutional. Viewed broadly, these structures are embedded in society through historical, and sociopolitical ways which serve to furnish power to some and determine social norms in accordance with accepted gender roles. At the institutional level, schools, families, religious institutions, the medical system and the media are examples of places which limit women's access to and control of resources, as well as their advancement and promotion, and reproduce inequalities through unequal pay structures, discrimination and harassment. This was evident in this study, which found a funnel

³⁴While Freud used the term cathexis in reference to a psychic charge of instinctual energy being attached to an idea or image, for instance, Connell generalizes the term to account for the construction of emotionally charged social relations (hostile or otherwise) between 'objects' or individuals. Thus, cathexis in a Connellian sense refers to the structure that organizes one person's emotional attachments to another.

effect in terms of girls' enrolment, where there were less and less females at higher levels, and also in the domination of boys and men in positions of power within the school.

The exploration of tradition and modernity, particularly in regards to the contradictions and tension between expectations and norms in the school and the home also enhances the examination of Connell's structures, by attempting to expose and identify the manner in which the structures are indeed fluid as opposed to rigid and static. The expectations and norms evidenced in the home for instance, served to constrain the movement and freedom of girls and restrict them to traditionally domestic roles, whereas at school they were treated on a more equal basis with their male counterparts. For boys, the home is a realm where they are overtly accorded higher status and greater freedom than girls in comparison to the school, where they are expected to perform the same chores and duties as girls and are superficially at least, treated the same as girls. This is not to say that schools are places that completely acknowledge the equality of girls: their participation in traditionally male dominated sports teams is restricted and comments by various students and key informants indicate that there still are firmly entrenched stereotypes about girls.

The sexual division of labor, which refers to the allocation of certain duties and occupations to males and females, relegates women to positions unequal (in pay and status, for instance) to those which men traditionally occupy and exacerbate the issue of dependency. This division is also manifested in the preference of males for further education and the herding of girls into courses most suited to their eventual future, such as home economics and cookery, while boys are encouraged to pursue more logic oriented subjects such as mathematics and the sciences. This is sometimes even prevalent when examining the subjects that male and female teachers instruct in, where male teachers often dominate subjects such as math and science, while females are found teaching "softer" subjects. At the case study school, there was one significant deviation from this norm: there was one female teacher of physics and chemistry.

The manner in which sexual division of labor in Tanzania is changing will be discussed in Chapter 6 in relation to how students experience this contradiction between the expectations in the home and at school. As mentioned above, at home the demarcation of gendered duties is readily apparent and supportive of traditional notions of girls' domesticity and the privileging of boys with extra freedom. In the school however, both students and parents commented that the gender lines are more blurry, and boys are expected to do their share of work there.

The gendered division of power is an entrenched, resilient structure prevalent in the school and wider society.³⁵ In this case study, the school's organizational composition proved to be a source of male power and dominance. Positions of leadership are predominantly the realm of boys and men, rarely impinged upon by girls and women who would constitute the exception rather than the rule. The space and *status quo* seemed to be guarded and defended by the boys and men in their language and explanations for their dominance, for instance when they maintained that girls and women were not courageous enough to seek out positions of leadership, why there was a funnel effect in enrolment patterns with fewer and fewer girls making it to higher levels, or in the case of female teachers who were perceived as being too shy to deal with sensitive topics. Through their language, they asserted their power through the implication that these positions are not explicitly restricted to males; rather, they were the only ones capable of fulfilling the duties and roles.

Intertwined with the structure of power is the Connellian notion of cathexis³⁶, which has strong moral connotations and plays a role in defining women's sexual behavior as either appropriate or inappropriate. These norms result in rigid gender roles and expectations, and generally constrain women's movements, behaviors and futures. The sexual double standard is one example which stigmatizes women while it praises men for having multiple relations as exemplified in this study. It was also manifested in the pervasive belief that while women engage in sexual relations for security and material gain, men do it for sexual pleasure.³⁷ Researchers who recognized the inherent limitations of conventional approaches in relation to gender, have begun to use Connell's theory as a starting point making sense of the numerous structural/power imbalances that heighten risk of HIV/AIDS (Wingood & DiClemente, 2000). The next section will elaborate on how these structures are pervasive within the school.

3.3.1 Gender and Power within the School

The school is one such institution discussed above which is laden with messages and undertones imbibed with both covert and overt signals designed to inform and regulate the

³⁵ At the micro-social level, Wingood & DiClemente (2000) found that relationships are pervaded by a distinct division of formal and informal power. Asymmetrical power relations can also be seen as behavioral risk factors which mean that females experience more adverse health effects than their male counterparts. Those risk factors include: sexual and physical abuse, a promiscuous partner, a partner who is averse to condoms, restricted access to education and treatment, a history of alcohol and drug use, poor negotiation skills, low self-efficacy and control in relationships.

³⁶ Referred to as the structure of affective attachments and social norms by Wingood & DiClemente (2000).

³⁷ Structurally, those who are in an environment not supportive of HIV prevention, those who have older partners, hold conservative cultural and gender norms and those who subscribe to a religion that views contraception unfavorably are more likely to be at risk. Personally, those who have a limited knowledge of HIV and hold negative attitudes towards condoms are also at heightened risk (Wingood & DiClemente, 2000).

behaviour of both students and teachers (Haywood & Mac an Ghail, 2003). Formal and informal power relations within the school exist at every level: between teachers, teachers and headmasters, teachers and students, between students themselves, and these struggles often implicitly and/or explicitly contain a gendered component. Encapsulated within issues of access and promotion to leadership positions, discipline patterns and styles of speech for instance, are subtly shaped by discourses of gender and power. The “hidden curriculum” found inside schools and classrooms has been found by several researchers to perpetuate gender stereotypes found in the family and wider society (Haywood & Mac an Ghail, 2003; Connell, 1995; Epstein, 1998; Dunne & Leach, 2005).

Expectations regarding masculinity and femininity permeate institutional structures such as schools. The daily practices, rules, regulations and expectations in schools have been found to be highly gendered by researchers both in the West and in developing countries (Mirembe & Davies, 2001; Anderson-Levitt, Bloch & Soumare, 1998; Stambach, 2000; Brenner, 1998; Connell, 1995; Epstein, 1998; Dunne & Leach, 2005). In a constant process of negotiation, acquiescence and resistance, sexual and gendered identities can be seen as fluid and changing according to context. Researchers have probed a variety of ways in which gendered spaces are constructed both in formal and informal ways including the way in which the classroom itself is a site of gendered interactions through segregated seating arrangements, interactions between teacher and students, girl and boy participation patterns, and gendered textbooks that reproduce stereotypes.

The construction and reconstruction of these gender norms, behaviours and expectations, or “gender regimes” as Connell (1995) refers to them, have been found to become so normalized they are no longer noticed and rarely challenged by teachers and administrators. In this study, this was evident on several occasions. For instance, when it was reported that there was a gang rape involving students at the school, the head teacher questioned whether or not she was a willing participant and did not follow the issue up, teachers discussed the fact that some girls at the school were working as prostitutes, yet did nothing to address the issue, and they also failed to intervene and report a case of a girl at the school being raped by 2 of her uncles.

In relation to HIV/AIDS education, who has the power to define what students learn about sex, condoms and HIV/AIDS, what age they learn it at, and the language used (open discussions of sexuality vs. scientific approach), are examples of how power is manifested. It was noted in Chapter 2 that there is a dearth of women in influential positions at the MoEC, which undoubtedly affects innumerable decisions in this regard.

Connell (1996), focusing his theory of gender and power more specifically on the school, has identified four components (very similar to those discussed above) in what he has termed “the gender regime of schools”:

1. Power relations, rooted in relations characterized by dominance and authority.
2. The division of labour, witnessed in differentiation in regards to duties and chores, subject specialization and sport.
3. Patterns of emotion, noting the rules of who is permitted to express different emotions.
4. Symbolization, manifested in songs, uniform and language.

These structures are associated with the notion of hegemonic³⁸ masculinity and the maintenance of the *status quo* which serves to benefit those in power (Mac an Ghail, 1994). Instances of those structures evident in this study will be further discussed in the results and discussion chapters. This interaction between gender and power has clear implications for heightening risk and vulnerability for both sexes. Following will be a discussion highlighting this.

3.4 Risk

Since the inception of the HIV/AIDS crisis, risk discourse, primarily drawing from psycho-social models of behaviour has been central to discussions of sexual behaviour (Lupton, 1995). Risk perception is a dynamic concept that is influenced by a myriad of factors (often unconscious), of which gender is one. It is a central concept in HIV/AIDS prevention that researchers still grapple with and understandings of its nature have not yet fully matured. In addressing the concept of risk, Haram (2004) explains that biomedical and epidemiological perspectives view risk primarily through statistical and probability reasoning, whereas holistic reasoning encompasses the personal and relational and frames the individual within a wider social context thus acknowledging constraints, as well as possibilities.³⁹ To address this issue, she advocates for a more balanced ‘risk in context’ approach, rather than the ‘at risk’ approach utilized by epidemiologists and others in the field. Similarly, Lupton (1995) criticizes epidemiological understandings of ‘at risk’ groups as being uni-dimensional and fixed, rather than fluid as they actually are. She also points out that risk definitions can be viewed as hegemonic conceptual tools used to maintain power structures.

Risk will likely mean something entirely different for a young person living in a region

³⁸ It was Gramsci (1971) who coined the term hegemony to describe the domination of one class, nation or group of people over others. Hegemony has to be won and maintained, and the theory acknowledges that this cannot take place without the complicity of the dominated themselves. This view sees power as a complex set of bargaining and compromise, where both parties, even if one dominates the other is involved.

³⁹ Prominent sociologists such as Beck (1992) and Giddens (1991) have leaned towards universally applicable theories of risk in modern societies which are based on equally universalistic notions of the effects of globalization (Bujra, 2000). Though there are some differences in the way they conceptualize risk, both purport society has entered a new, more individualistic phase characterized by heightened risk, which Beck terms ‘reflexive modernization’ and Giddens calls ‘late modernity’. Bujra (2000) adopts a critical stance towards Beck and Giddens’ evolutionist assumptions, on the basis that many societies have not entered modernity. Thus Giddens’ assumption of ‘late modernity’ is inapplicable in the context of Tanzania and many developing nations.

embroiled in civil war compared to one living in a vibrant capital city for instance, and it likely is different further within the urban-rural divide. Looking at risk from different perspectives such as at the governmental level versus the individual level also highlights the complexity of the concept. While risk reduction may be a governmental or MoEC priority for instance, young people may be more concerned with day to day survival, the threat of pregnancy or violence, and enjoyment. This was exemplified in this study, where the importance of *starehe* (luxury, pleasure, enjoyment) was stressed by a number of students and key informants. Living in the now may be prioritized over long term concerns about HIV. Some may even be drawn to and seek out risky situations.

Furthermore, in many societies, the concept of risk is non-existent (Haram, 2004). Indeed, as will be shown in this case study, the prevailing belief that one acquires AIDS by chance or accident predominates. In Kiswahili for instance, the word that comes closest to risk is *bahatisha*, which has several related interpretations: trust to luck, guess, speculate, or to make a venture (Johnson, 1989, cited in Haram, 2004). This word is not used in the context of AIDS though; rather the word *punguza*, which means: to reduce, diminish, or make less, is commonly used in discussions that speculate why some are more apt to become infected with HIV than others.

Most attempts to understand an individual's risk of infection from a gender perspective have tended to focus on women. Only recently have researchers begun to examine the link between traditional gender roles and societal pressures that put boy and men at risk (UNAIDS, 2001).⁴⁰ Socialization at an early age is central to understanding how ideas, attitudes and beliefs are formulated in boys and thus determine their behaviour. If boys see their fathers and other men being abusive or violent towards women, or having multiple partners, this kind of behaviour may appear acceptable and normal to them. Similarly, if boys are given more freedom, allowed to spend more time alone outside the home, and not expected to do household chores, this may be construed by both sexes to mean that they are inherently more privileged and powerful than girls.

Likewise, if the message is sent that academic performance is not important for girls because they are less intelligent than boys and that they will marry young and not require an education to fulfil their domestic duties, a self-fulfilling prophesy may lead to poor academic performance.⁴¹

⁴⁰ Programs that deal specifically with male responsibility and risky behaviour are few, but MAP (Men as Partners) in South Africa is one example (Tallis, 2002). Another is the film *Yellow Card*, which was filmed in Zimbabwe and has been translated into French, Portuguese, Pidgin, Kiswahili and several other African languages (World Bank, 2002). The website www.comminit.com stocks a large amount of information regarding work with boys and men.

⁴¹ The self-fulfilling prophesy or Pygmalion effect (which was drawn from Greek mythology) was conceptualized by sociologist Robert Merton. He postulated that this phenomenon occurs when a false definition is imposed and consequently produces a new behavior which makes the false definition come true (Merton, 1957). Hence, in regards to the belief that girls are less intelligent than boys, the self-fulfilling prophesy would find that individuals tend to act in ways which are consistent with this belief, which often ends up becoming true. For instance, teachers marking papers may consistently give boys better grades than girls, believing them to be more intelligent.

Proverbs or traditional sayings in Tanzania such as: *Usikae jikoni kama mke* (Do not stay in the kitchen like a woman), *Usilie kama mwanamke* (Do not cry like a woman), *Jikaze kiume* (Stand fast like a man) and *Usitembee usiku kama mtoto wa kiume* (Do not roam around at night like boys) are reflective of the way in which children are socialized into their ascribed gender roles (Omari & Mbilinyi, 2000). These sayings touch on a number of themes that emerged during the course of the field work, stressing women's domestic role, their emotional tendencies in comparison to stoic men, and the restrictions that are placed on girls while boys are granted more freedom.

Thus, the socially constructed nature of gender and risk is highly dependant on context: gender scripts may be enacted differently in different scenarios and situations. Girls may be more assertive and likely to challenge gender norms within the school than they would be at home, for example. In addition, not everyone has the same threshold or idea of what constitutes risk. This makes one-size fits all programming problematic, and the need for designing contextually appropriate interventions, of which gender is an inherent component, key to their success.

3.4.1 Social Aspects of Gender and Risk

Looking at individual risk of HIV, cognitive, attitudinal and behaviour factors can be identified as influential. What a person knows about HIV and sex, what their opinions are about situations, themselves and others, and the impact this has on their actions are all features of their vulnerability or risk of HIV (UNAIDS, 1999a). All of these factors are in turn influenced and inextricably linked with gendered societal norms in the realms of economics, social and cultural expectations and violence.

Societal structures, such as economic and socio-cultural factors underpin and affect the risk profile for both sexes. In terms of economics, not only are women at a disadvantage compared to men in their access to work in the formal and informal sector, they also suffer in terms of pay. Women typically work much longer hours than men per day, and receive approximately 30-40% less pay than men for the same work (UNAIDS, 2001). In addition, their dual role in reproduction and production in the home limits their access to resources such as education, land, income, credit and employment, which severely compromises their negotiating power when it comes to sex, which in some instances is the only "currency" they have available to them. Transactional sex is often a kind of coping mechanism used in exchange for food, transport, school fees and other material goods.⁴² Individuals engaging in transactional sex are likely to have more pressing, immediate

⁴² One study in rural Tanzania conducted by ICRW-PSI (cited in Garbus, 2004) found that 52% of female primary students and 10% of female secondary students reported having transactional sex for money or gifts.

concerns to deal with, and risk of HIV/AIDS might take a back seat to survival related issues. Often this type of transaction is viewed as a more socially acceptable alternative to prostitution.⁴³ It has also been shown that young girls are particularly at risk due to the “sugar daddy” phenomenon whereby older men seek out sex with young girls who are most likely uninfected.⁴⁴

Socio-culturally, certain expectations placed on women and men may place them at risk of HIV. Paradoxically, while women may be expected to be ignorant about sexual matters or they will be viewed as “experienced”, men are often expected to be knowledgeable: both set the stage for a situation in which neither will seek out accurate information that could protect them. Similarly, in societies where women are supposed to be passive participants in sex, the stereotype of male virility and aggression abounds, both which have the potential to influence risk (Gupta, 2000). Linked with this is the sexual double standard, the notion that it is acceptable and expected that boys and men have multiple partners, while girls are expected to remain virgins, a topic explored in Chapter 6.

Other cultural practices that are problematic in light of HIV/AIDS include circumcision, female genital mutilation (FGM)⁴⁵, blood sharing rituals, trans-generational relations, wife inheritance, polygamy⁴⁶, dry sex, and legal rights to inheritance and property. All of these traditions and customs constrain females economically and socially and thus heighten their dependency on men, and limit their ability to negotiate.

The basis of many African societies rest on patrilineal foundations⁴⁷, which furnish males with a higher status and greater decision making power compared to females. In regards to access to education, girls are disadvantaged in many respects. Cost is often a prohibitive factor, and when parents are forced to choose between sending their son or daughter, it is often the case that preference is given to the son since girls play a key role in household duties. Boys are also given preference on the basis it may be seen as a wiser investment to send a boy to school, since girls become the “property” of her husband’s family when she marries, and boys also are often seen to be more capable academically. Of course, there are many other mediating influences such as a family’s educational background, location, and religious orientation (Bendera, 1999).

The fact that women often cannot refuse the sexual advances of boyfriends or husbands also

⁴³ The term *umalaya* (prostitution), is a common descriptor that only applies to women (Haram, 1995).

⁴⁴ For example, one study in Tanzania found that a quarter of primary school girls reported having sex with adult men or *Mshefas* (those who provide), including teachers in order to receive money or presents (World Bank, 2002).

⁴⁵ In 1996 it was estimated that 18% of girls were circumcised in Tanzania, with 37% of those residing in the Kilimanjaro region (Garbus, 2004). See Klouman’s (2004) doctoral thesis entitled “Women at risk: population based research on HIV, sexually transmitted infections and female genital cutting in Northern Tanzania”.

⁴⁶ *Nyumba ndogo*, or the ‘small house’, which can be found in Tanzanian urban and rural areas is an extra-marital home where a married man keeps a concubine. Single mothers often prefer this arrangement that affords her independence but also economic support (Haram, 1995).

⁴⁷ As opposed to matrilineal: filiation or the status of sons and daughters can be determined through either the father’s or the mother’s side. In patrilineal societies, inheritance goes through the father (Liljeström *et al.*, 1994).

puts them at risk, particularly when their partners spend periods of time away from home. Migration and mobility⁴⁸ have influenced the spread of HIV/AIDS in the Kilimanjaro region. Mobility put women in a particularly vulnerable position, and when men returned home, the women would fear the “gifts” their men would bring with them, given their suspicions that in their absence their husbands had taken many partners and may be infected.⁴⁹

Violence manifested in the form of rape and sexual assault can also heighten HIV risk for both males and females by negating women’s capacity to negotiate safer sex (Gupta & Weiss, 1993; Wingood & DiClemente, 2000; Maman *et al.*, 2001). When sex is forced, condoms are not likely used and there is an increased chance of tearing the walls of the vagina and anus, facilitating the passage of HIV (UNAIDS, 2001).⁵⁰ One of the indirect effects associated with abuse directed at the young is that they may be more likely to engage in risky behaviour as a result of low self-esteem. Associated with violence is a pervasive silence or taboo on the subject, which is discussed below.

3.4.2 Silence as an Emerging Risk Factor

Themes that emerged from the field work in relation to gender and power in the context of HIV/AIDS relate to silence and violence. Silence is a feature symptomatic of asymmetrical power relations. For Foucault (1978), silence is an outcome of prohibition and policing which are deeply embedded in power relations. Those topics deemed inappropriate, such as sexuality, are suppressed in dominant discourses and considered taboo at the whim of those who are the gatekeepers that hold the power to determine which vocabularies and values are used. One example of this can be drawn from the terms utilized by female students and teachers in this study, who invariably referred to sex abstractly, as “that thing”. Boys and men, who generally experience fewer constraints on their behavior and language, were conversely able to discuss sex using correct terminology. Another example drawn from the findings demonstrates how parents may impart their gendered values to their sons and daughters non-verbally or indirectly. The restriction of movement and mixing with boys for girls compared to the freedom afforded to boys reflects the view that girls are to be protected and are not able to take care of themselves, while boys are more free and capable.

⁴⁸ Mobility is not a recent phenomenon in the region; since ancient times in Kilimanjaro, Cushitic, Nilotic and Bantu speaking peoples came from the north and north-east, and the south and west, respectively (Talle, 1995)

⁴⁹ Setel (1996:1175) makes the interesting observation that, “in the cultural story of AIDS in Kilimanjaro men were equally, if not more, vilified than women”. That is not to say women do not also suffer from stigma and discrimination however; many are blamed by their husbands’ family when he dies (Lie & Lothe, 2002). This highlights the fact that glossing over nuances inherent in socially constructed phenomenon often misrepresents the complexity of the situation.

⁵⁰ One study of partner violence in Dar es Salaam (Maman *et al.*, 2001) found that women’s HIV status is strongly associated with partner violence, and as a result many women also lack decision making autonomy when it comes to HIV testing and may face negative repercussions in reporting their serostatus.

Whether intended or not, this message could be construed to mean that premarital sex for girls is not acceptable, while it is ok for boys. One girl also reported that her mother silenced her questions about sex by repeatedly changing the subject, signaling that such discussion was unacceptable. Accordingly, as much attention should be paid to what is unsaid, as to what is explicitly stated, as it is also people's silences that are in themselves revealing (Crewe & Harrison, 1998).⁵¹

Given that silence on sexuality precludes the possibility of condom negotiation for instance, it is not surprising that many cases of violence, abuse and rape remain unreported. The pervasive belief that one should not speak of private matters enforces silence. Silence is also problematic as it breeds intolerance, misunderstanding and mistrust. The inherent connection between silence and violence means that greater attention should be paid to the underlying mechanisms sustaining these cycles, with less emphasis on the individual dimension that contributes. The insidious ways in which silence is intimately connected to violence was also evident in this study: the belief that no one would care or act if a girl had been abused or raped, that they would be demoralized and shamed demonstrate how violence is perpetuated because of silence.

Silence can also be viewed as the outcome of the aforementioned concept of hegemonic masculinity and also what Connell (1996) refers to as "emphasized femininity", one component of which maintains that socialization should produce boys who better able to control their emotions than girls. Suppression of emotions, which may later be manifested in violence is indicative of the power that males wield compared to females. Since breaking the silence surrounding sexuality and HIV/AIDS is a precursor to challenging and transforming gender norms, a school environment that encourages discussion is critical.

While this chapter has fleshed out the linkages between gender, power, risk, and the school, the next chapter will provide an overview of HIV/AIDS educational programs, and the theories underpinning them, with reference to the changing nature of sex education in Tanzania. In linking the discussion on silence and violence, Paulo Freire's theory of critical consciousness will be explored in order to examine the role, both practically and theoretically that education may play in constructing and reconstructing gender in such a way that may enable girls and boys to identify and develop life skills tools which may reduce their risk and vulnerability of HIV/AIDS and ultimately contribute to the dissolution of the cycle of silence and violence.

⁵¹ Underscoring this point, it has been written that:
The endless cycle of idea and action,
Endless invention, endless experiment,
Brings knowledge of motion, but not of stillness;
Knowledge of speech, but not of silence;
Where is the knowledge we have lost in information? (Eliot, 1940: 77, cited in Crewe & Harrison, 1998:26)

Chapter 4: The “Window of Hope”: HIV/AIDS and School-Based Programs

“It is easier to straighten a tree when it is still young than when it is old”.

(Tiendrebeogo, Meijer & Engeberg, 2003:6)

The World Bank (2002) has identified youth as being a “window of hope” since many are uninfected, presenting an opportunity for prevention in their vulnerable years. School-based education, which already has existing infrastructure and may reach a wide audience including students, teachers, administration, parents, relatives and the wider community, from an economic standpoint is seen to be one of the most cost-effective ways of preventing HIV (World Bank, 2002). The potential for bringing about positive changes in young people’s attitudes and behaviours before they are fully formed is high⁵² and thus makes schools effective sites for prevention programs. In addition, since socialization and gender roles are influenced there, schools are ideal places for introducing HIV/AIDS education programs.

4.1 Types of School-Based Programmes

Given that the majority of prevention programming has tended to focus largely on individual risk reduction, programs promoting abstinence, faithfulness or multiple partner reduction, non-penetrative sex or the use of the male condom have predominated (UNAIDS, 1999a). Typically referred to as the ABC approach, the limitations of this approach will be addressed later in this chapter. Other programs have sought to improve access to education and foster the acquisition of life skills (UNAIDS, 1999a).

There are various types of school-based HIV/AIDS prevention programs. The topic might be incorporated into existing programs such as family or life skills education, sex education, or school-based health services (Tiendrebeogo, Meijer & Engeberg, 2003; Boler *et al.*, 2003). There may also be stand-alone classes that deal exclusively with HIV/AIDS, or extra-curricular programs such as sport clubs may focus on the issue. Alternatively, the topic may be weaved into the science curriculum (such as in this case study), usually in countries with an over-loaded curriculum. This approach is criticized on the basis that it tends to adopt an almost exclusively scientific approach and ignores the human element of the virus, thus doing little to decrease stigma and also failing to deal with sexuality, emotions and challenges that young people face.

⁵² In a theme returned to again in Chapter 6, Setel (1999) refers to the Kiswahili concept of *tabia* (moral character, bad or good), and makes reference to why intervention programs targeting the young are most likely to succeed. Adolescence is a period when one’s *tabia* develops. It is very difficult to alter the *tabia* of the *wazee* (elderly).

Life Skills programs are one of the most popular since they aim not only to impart critical information, but also to equip students with the interpersonal and critical decision making skills necessary to communicate about sex and other issues. However, the term life-skills is amorphous and has come to include a whole host of generic skills such as communicating, listening carefully and being assertive, yet there is very little empirical support that such programs have a sustainable effect on behaviour, particularly sexual behaviour (Boler & Aggleton, 2004).⁵³ Life skills programs so far have largely been based on a rationalist framework, which as discussed later on, is premised on the “rational individual”, who if taught the appropriate life skills, would be able to apply them to various situations and ultimately reduce their risk of HIV/AIDS (Boler & Aggleton, 2004). Structuralists would point out that without the power to use such skills, they will be of no value.

When reality impinges on the theoretical, it also becomes evident that practicalities and constraints in the classroom and school environment pose significant problems for life skills programs. Selective teaching, whereby teachers filter the information they give students based on their own personal levels of comfort or beliefs and other outside factors such as fear of reprisal from parents and community is one example (Boler *et al.*, 2003; Rivers & Aggleton, 1999). This highlights the importance of adequate teacher training both pre-service and in-service to enable teachers to feel comfortable and confident in leading discussions on sensitive topics.

The prevalence of authoritarian teaching methodologies, emphasis on rote-learning and exams is particularly problematic for learner-centered, participatory skill-based programs. Furthermore, high teacher-student ratios and lack of pre-service and in-service teacher training preclude successful delivery of life skills programs. Physical aspects of the school environment itself may not be conducive to teaching life skills, such as poor condition of facilities, lack of sanitation and sufficient privacy in toilets, and harassment. All of these factors may compromise the school’s ability to serve as a health promoting environment (Boler *et al.*, 2003).

Life skills programs that make use of peer educators have been in use for quite some time and are advocated for on the basis that youth are more comfortable discussing sexuality with peers who are more likely to understand and relate to the pressures they face. Peer education is seen as instrumental in challenging normative beliefs and behaviour through constructive dialogue and interaction between the sexes. It is also often linked to wider community initiatives (Altman, 1994). However, it has also been referred to as “a method in search of a theory” (Turner & Shepherd, 1999) in recognition that multiple, often evasive processes underpin success of peer led approaches.

⁵³ The confusion as to what exactly constitutes life skills has likely skewed UNGASS data in country reports indicating whether or not their schools incorporate life skills. Thus, the term should be semantically and conceptually clarified to explicitly state precisely what life skills entail, which skills are most desirable, how gender is relevant, and the best method to go about developing these skills.

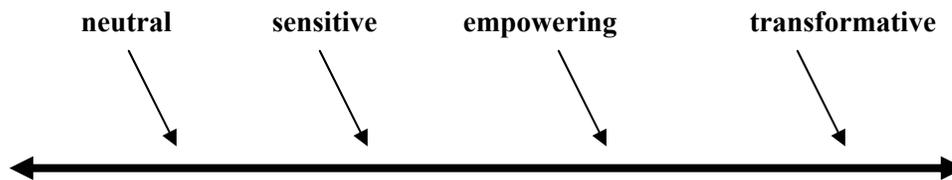
It is clear that in order for life skills education to work, a program must be linked to an explicit educational theory designed to bring about change. Freire’s theory of critical consciousness is an example of one such theory and is discussed later, which despite being designed primarily for adult education may have pedagogical value when dovetailed with a life skills approach.

4.2 Approaches on a Gendered Continuum

“The ABCs are not enough, we need a more complex discussion about sexuality and youth.” (Minou Fuglesang, “Femina” Magazine, cited in YouthNet, 2003:17)

Approaches to HIV/AIDS education in the context of gender can be broadly grouped into those that do no harm (gender-neutral) or are gender sensitive on one end of the spectrum, and approaches that transform and empower at the other, as in Figure 2 (Tallis, 2002; Gupta, 2000).

Figure 2: Types of Gender Programming



An example of the gender-neutral approach is the ABC campaign which stresses abstinence, faithfulness, or use of a condom. This approach has been criticized on the basis that it fails to acknowledge the fact that women and girls often do not have the negotiating power necessary to have a say in where or when they have sex, their partner’s fidelity, or whether or not a condom is used (Gupta, 2000).⁵⁴ It also does not recognize that many women and girls are dependent on selling sex in order to support themselves and their families.

Further along on the continuum are gender-sensitive approaches which take into account the differing needs of males and females. These programs tend to make use of single sex classes and may address issues such as abuse and harassment for girls, and alcohol and drug abuse for boys. This approach is common in current programming, with examples ranging from a focus on the female condom, microbicides⁵⁵, and increasing access to health services (Tallis, 2002; Gupta, 2000). Programmes specifically addressing the needs of men are also found in this approach, such as projects that deal with responsible parenthood. The limitation of this type of approach is that it

⁵⁴ An alternative was posed by participants in a workshop on gender and AIDS: “A” stands for aggressive masculinity, “B” is for biological vulnerability, and “C” is for coercive sex (Mitchell & Smith, 2002).

⁵⁵ Microbicides are a gel or foam inserted into the vagina prior to intercourse in order to kill viruses and bacteria. Barnett & Whiteside (2002) point out the paucity of research in this area is likely attributable to the fact that the market would consist primarily of poor women unable to negotiate condom use, and thus is not an attractive area of investment.

falls short of challenging the complex power and structural inequalities that exist in relationships.

The next two approaches show more promise in that they go beyond mere knowledge provision and move towards sustainable change that enables both sexes to better protect themselves, negotiate, and begin the process of challenging gender stereotypes. Approaches to HIV/AIDS education that seek to empower girls and women are contextual, taking into account the complex realities of their lives. Addressing lack of power in terms of access to economic resources and assets such as property and inheritance rights, equal pay for equal work, access to formal sector employment, and the right to be free from abuse and exploitation are also goals of such programming (Gupta, Whelan & Allendorf, 2002). Other components of empowerment include fostering a positive self-image and confidence, and developing critical thinking skills which lead to better decision making and ultimately action in one's life (Tallis, 2002).

It has been noted that declarations of empowerment are often simply rhetoric. Scepticism is often expressed based on the belief that empowering women means disempowering men, which is a direct challenge to the *status quo* and traditional male hegemony. Rivers & Aggleton (1999:12) support this view that, "It seems unlikely that men will be prepared to relinquish the power and privilege which patriarchy affords them, in the short term at least. Although greater equality between men and women must be the ultimate goal, this may take a long time to achieve". Gupta (2000:7) does not dispute that change is a long term process, but similar to Chambers (2004) stresses that, "Empowering women is not a zero-sum game. Power is not a finite concept. More power to one invariably, in the long-term, means more power to all. Empowering women empowers households, communities and entire nations".

One of the main findings of a UNAIDS report (2001) was that the views of young men need to be included in order to ensure interventions are appropriate and encourage young men take ownership of the AIDS problem and enlist them as partners in the response. This is crucial, since if they are not involved, programs may be seen as an unwelcome challenge to their power and control.

Transformative approaches are the most sophisticated type of programming in that they focus on changing the unequal power between men and women to create a balance whereby both sexes are less vulnerable (Tallis, 2002; Gupta, Whelan & Allendorf, 2002). Change is essential at all levels: personal, community and societal, while confronting the underlying structures, mechanisms, policies and practices that seek to retain the *status quo*.⁵⁶ Methods are highly participatory, and emphasize the acquisition of skills through group and individual work, drama and

⁵⁶ The Stepping Stones program is one example of a successful program that has been tested in Uganda and other African countries (Gupta, Whelan & Allendorf, 2002). Its community-wide focus on gender, HIV, communication and relationship skills has been used to challenge both gender and inter-generational inequalities for positive change.

role play that will enable women and men to make critical decisions under pressure.

While this framework may be useful for locating the gender sensitivity of a program on a continuum, more concrete indicators are needed and operationalizing the constructs of empowerment and transformation is necessary for measurement of these indicators. The fact that these concepts require long-term commitment and observation means that empirical evidence may be difficult to obtain. In reality, programs are likely to employ a combination of approaches.

4.3 Problems facing School-based Programs

Educating the young about such sensitive topics such as HIV/AIDS and sexuality can be controversial. The belief that early education on sexual matters will increase curiosity and sexual experimentation is widespread, and may result in resistance from parents, teachers, and the wider community.⁵⁷ In Tanzania's case, where 80% attend primary school, but relatively few go on to secondary school (between 10-20%), interventions are best implemented in the upper grades of primary school (Klepp & Lugoe, 1999; Ndeki *et al.*, 1995). Since many also become sexually active during primary school, it is an extremely important arena for sexual health programming. Though their numbers are lower, educating secondary school students is also important since they represent the educated base of future professionals in the nation (Klepp & Lugoe, 1999). More fundamentally, sex education may go against local cultural and religious norms. Thus, even if there is support at the national level, strong resistance at the local level may impede prevention messages.

The silence surrounding sexuality and HIV/AIDS is a significant barrier to school-based programs, where there may be mixed messages, no messages or resistance coming from religious figures, teachers, the community, and parents. In addition, schools themselves have been shown to be sites of firmly entrenched gendered practices, and may even constitute a risk factor.⁵⁸ Schools, as agents in shaping young peoples identities and forging power relations between the sexes can be just as detrimental as they can be beneficial. The complexity of gender relations means that even if the curriculum dictates discussion on gender relations, if there are no accompanying structural changes, no sustainable behaviour change will occur. The role of theory in addressing behaviour change will be outlined in the next section.

⁵⁷ This assertion that education at a young age results in a younger sexual debut has been investigated and in fact revealed that sexual debut is delayed, the number of sexual partners decreased, and greater chance of using contraceptives as a result of educational programs (Carr-Hill, Kataboro & Katahoire, 2000; Klepp *et al.*, 1997; Grunseit *et al.*; 1997; Kirby & Coyle, 1997).

⁵⁸ One study in Uganda found four patterns of power within the system: hegemonic masculinity, gendered discipline patterns, sexual harassment, and 'compulsory' heterosexuality, which served to make girls subordinate to boys through formal and informal control mechanisms and put boys at higher risk of engaging in risky behaviour due to constant pressure to perform and prove themselves (Mirembe & Davies, 2001).

4.4 Theories of Behaviour Change

Successful HIV/AIDS educational programmes are consistently underpinned by a theoretical framework that guides the design and evaluation (Gallant & Maticka-Tyndale, 2004). It is worth nothing that the vast majority of these theories have been conceived in the developed countries in the West, with very little input thus far from African researchers.

As was stated in the introductory chapter, initial responses to the HIV/AIDS epidemic were characterized by a proliferation of cognitive approaches or theories of individual behaviour change focusing on knowledge, attitudes, perceived vulnerability and access to information and services. These psychosocial and economic theories are predicated on the autonomous, rational individual, who in theory, would not engage in risk taking behaviours if they had the appropriate knowledge of the consequences of that behaviour. It was envisioned that people went through various stages, beginning in knowledge acquisition and attitudinal change and culminating in behaviour change. Such theories include the Health Belief Model (Rosenstock, Strecher & Becker, 1994), the Theory of Reasoned Action (Fishbein & Ajzen, 1975; Ajzen & Fishbein, 1980; Fishbein & Middlestadt, 1989), Social Cognitive Theory (Bandura, 1977), Stages of Change or Transtheoretical Model (TTM) (Prochaska, DiClemente & Norcross, 1992) the AIDS Risk Reduction Model (Catania, Kegeles & Coates, 1990), and others.⁵⁹ A brief description of the first four of these theories will be followed by a look at more holistic approaches to understanding behaviour change.

The Health Belief Model is predicated on the assumption that the likelihood a person will engage in specific health behaviours is dependant on their perceived susceptibility to the disease, how they perceive the severity of the disease, and cost-benefit analysis that leads the individual to believe that avoiding the behaviour is in their best interests. Although the original model did not account for self-efficacy, it was later suggested for inclusion.

Fishbein and Ajzen's (1975) Theory of Reasoned Action assumes that human beings are rational actors who make systematic use of the information they receive in order to make choices on whether or not to engage in a specific behaviour or not. Behavioural intention, they postulate, is determined by attitudes towards the specific behaviour and subjective norms (such as assumptions about what others think of the behaviour). In turn, attitudes towards a specific behaviour are based on perceived consequences and the likelihood of the consequences, together with the personal evaluation of the consequences. Later expanded to become the Theory of Planned Behavior by

⁵⁹ In recent years, the trend has been to integrate components from different models, such as in the AIDS Risk Reduction Model which contains elements of the Health Belief Model, Social Cognitive Theory and the Diffusion of Innovation Model. Additionally, Fishbein (2000) attempted to integrate the health belief model, theory of reasoned action, and self-efficacy theory.

Ajzen (1988), the addition of perceived control over the predicted behaviour was incorporated to address earlier criticisms.

The assumption that new behaviours are modelled on the behaviour of others or by personal experience forms the basis of Bandura's (1977) Social Cognitive Theory. Perceived self-efficacy or an individual's judgement of their capacity to exert control over their motivation, behaviour and social environment is an integral component of this approach (Bandura, 1989).

The Stages of Change Model, conceived in the early 1990s postulates that individual's pass through six stages (although not necessarily in a linear manner) when changing behaviour: pre-contemplation, contemplation, preparation, action, maintenance and relapse. This model emphasizes the interventions must target the appropriate stage of the individual or the group.

When it became apparent that knowledge is an important, but insufficient precursor to behaviour change, the paradigm shifted to account for the contextual influences that guide behaviour.⁶⁰ Structuralists maintain that behaviour is influenced by a myriad of underlying social, economic, political and cultural structures. At the macro-social level, economists and sociologists have contributed their understandings of how structural inequalities, poverty, gender and global capitalism have fuelled the spread of the virus (Campbell, 2003). At the micro-social level, the construction and reconstruction of social identities takes place within social contexts that either enable or constrain the degree of agency that people have in terms of behaviour and in shaping their identities. Power relations play an integral role in this process of production and reproduction.

These developments highlight the necessity of programs situated in and not divorced from their setting. The local context must be considered, including the target population's characteristics, the social pressures and constraints they face (economically, politically and socially) and the surrounding milieu. Examples of this type of approach include Diffusion of Innovations (Rogers, 1983) and Social Network theories (Morris, 1997; Auerbach, Wypijewska & Brodil, 1994).

Social Network Theory (1997) is rooted in the belief that behaviour is mediated through relationships and focuses on understanding social norms in the wider context of social networks. Thus, factors such as how partners are chosen, the length of the relationship and level of communication within the relationship, for instance, are considered in a risk profile.

The following sections will examine how sex education was traditionally passed on in Tanzania and how this has changed. Given that schools now play a role in educating the young

⁶⁰ Despite criticism that individualistic approaches to behaviour change are less relevant in societies such as Tanzania that stress the importance of the collective, Fishbein (2000) points out that individualistic theories are necessary in order to identify the determinants of behavior change that group based interventions seek to achieve. He also points out that the model clearly shifts in response to the behavior being addressed and the target population.

about sensitive issues that used to be the domain of the family, a brief review of the effectiveness of school-based programs will follow.

4.5 Sex and HIV/AIDS Education in Tanzania: From Past to Present

Traditionally, initiation rituals to signal passage into adulthood were the primary means of sex education throughout Tanzania, though the rituals themselves varied widely from tribe to tribe. Grandparents played a key role in the socialization of children, who learned largely through the process of imitation but also through songs, stories, parables and lessons designed to prepare them for their future roles. Games in which role play centered on marriage and the chief's courts, for instance, were encouraged (Setel, 1999).

With the passage of time however, many of these songs, stories and games fell into disuse and were no longer the dominant modes of socialization. Various symbols of modernity became the ideal that youth aspired to imitate. Setel (1996) describes how in the 1960s and 70s when societal changes in the way Tanzanians thought about sex and work-reproduction and production began to occur more rapidly in Kilimanjaro, boys learned about sexuality through peers, and from personal experience gained in towns, schools, factories and market places, while girls learned through a combination of personal experience and an apprentice system whereby older female schoolmates imparted their knowledge. It was sexual technique rather than marital responsibility which aunts used to teach, that was focused on.

Traditions were swept aside as reggae videos, photocopiers, and tabloids came to offer a new way of thinking about relationships and sexuality (Setel, 1996). These changes also marked shifts in generational relations. It used to be that elders were the decision makers on issues of land ownership, tools for production, and sexual relations and marriages between young people (Ndeki *et al.*, 1995). Traditional modes of sex education stressed collectivity and the role of society, rather than the individual. Changes brought on by the colonial period altered this system. With the introduction of formal education, young people were faced with new and competing values systems and cultures, which ensnared them in a conflict between tradition and modernity and left them in a "moral vacuum" (Dilger, 2003). It is at this point, with the diminishing of the elders influence and the breakdown of the traditional socialization system, that AIDS entered the picture (Setel, 1996). Consequently, these changes have meant that more and more, the school has come to shoulder part of the responsibility for education young people about sex and HIV/AIDS. The next section will examine contemporary school-based sex education in Tanzania in relation to how effective it has proven so far.

4.6 A Review of Effectiveness of School-Based Programs Focusing on Tanzania

While numerous studies have been carried out to determine the effects of school-based programs in terms of reducing risk taking behaviours and delaying sexual debut, the majority of these have focused on developed countries (Grunseit *et al.*, 1997; Jemmott, Jemmott & Fong, 1998; Kirby & Coyle, 1997; Kirby, 2001; Kirby *et al.*, 1991; Levy *et al.*, 1995; Main *et al.*, 1994; Walter & Vaughn, 1993). Fewer methodologically sound evaluations have been conducted in developing nations, though some have been done with comparison groups to strengthen results (Kaaya *et al.*, 2002; Shuey *et al.* 1999; Kinsman *et al.*, 1999; Caceres *et al.*, 1994; Klepp *et al.*, 1994; Pick de Weiss *et al.*, 1990). One of the most recent reviews of effectiveness by Gallant & Maticka-Tyndale (2004) compiled the evaluations from 11 school-based interventions in Africa with the conclusion that while knowledge and attitudes are easier to change, behaviours have proven to be more difficult and thus more research on which factors influence the success of school-based programs is needed.

The discussion here will be limited to evaluations that have been undertaken in Tanzania, where the most extensively evaluated work in the literature has been based on the outcome of MUTAN, a Tanzanian-Norwegian multidisciplinary AIDS project which was a collaboration with the Tanzanian Ministry of Health, the University of Bergen, the University of Dar es Salaam, and the Center for Educational Development in Health of Arusha.⁶¹

One component of the study represented the first controlled multiple community test of an HIV/AIDS prevention program which targeted primary school children in East Africa, and the first from a developing country to report long-term follow up results (12 months) (Klepp *et al.*, 1994; Klepp *et al.*, 1997). From 1991-1997, an HIV/AIDS education program called *Ngao*, a frequently used symbol in Tanzania particularly by the Maasai, which means “shield” in Kiswahili was devised and implemented in 18 primary schools in Arusha and Kilimanjaro regions (Klepp & Lugoe, 1999; Bergsjø, 1996). *Ngao* was to symbolize that through education, young people can learn to protect themselves from the virus. The intervention was translated into Kiswahili, and tested on sixth grade students.

Based on the theory of reasoned action and social learning theory, a life-skills based approach was utilized with the main goals of delaying sexual debut and reducing stigma related to HIV. The main findings indicate that there is significant value in educating sixth graders about HIV/AIDS, not only in terms of increasing their knowledge about the virus, but also in stimulating

⁶¹ Another project funded by the EU entitled *MEMA kwa Vijana* is a sexual health program targeting 15-19 year olds aiming to reduce HIV, STIs and pregnancies. It consists of four main components: community awareness, teacher-led peer assisted sex education, youth friendly health services and condom distribution (Wight, 2004).

discussion about AIDS both inside and outside the school setting with parents, relatives and religious figures (Klepp *et al.*, 1997). A KAPB survey issued randomly to 18 primary schools in the Arusha and Kilimanjaro regions revealed that students' overall level of knowledge was low.⁶² It also found that those who reported frequent exposure to AIDS information were more knowledgeable, more likely to perceive themselves as being at low risk, and less likely to hold negative, stigmatising attitudes than their counterparts who had been exposed less to the topic (Ndeki *et al.*, 1994). Another key finding of the program was the reduction of students' intention to engage in sexual activity in the near future (Klepp *et al.*, 1997). The *Ngao* program was revised based on recommendations from teachers, students, local health authorities, and researchers and pilot tested for use in secondary schools throughout Tanzania (Bergsjø, 1996).⁶³

The importance of a health promoting school environment is a pre-condition for a successful HIV/AIDS prevention. It has been documented that numerous problems in implementing the National School Health Program in Tanzania have resulted due to a number of factors such as:

- 1 No established school health policy existed
 - 2 Health education in school was deficient and disintegrated
 - 3 No syllabus for health education had been devised
 - 4 Provision of health services was inadequate
 - 5 Coordination of project activities by other agencies was inadequate
 - 6 Lack of funding
- (Klepp & Lugoe, 1999:273)

While some progress has been made, many of the same issues identified above are relevant today. Once they are in place, consideration of how best to approach the issue of educating and sensitizing students to issues concerning gender, sexuality and HIV/AIDS must be focused on. The next section explores how Freire's theory of critical consciousness can be useful for exploring how education can be a tool to enable empowering and transformative pedagogies.

4.7 Consciousness Raising Pedagogies

The entry of adult education, also referred to as critical or popular education into contemporary discourse on HIV/AIDS education has been noted (see Campbell & MacPhail, 2002). Freire, a Brazilian educator whose writings surfaced in response to the struggles of Latin Americans in the 1960s, has provided some useful conceptual tools for rethinking HIV/AIDS education particularly in terms of individual or collective empowerment.

⁶² At the secondary school level, one study reported that knowledge of sexual transmission of HIV was high, misconceptions of transmission low and knowledge of non-sexual modes of transmission low (Kapiga *et al.*, 1991).

⁶³ The program has likely fallen into disuse (personal communication, Klepp, 11.10.04)

In his classical work entitled “Pedagogy of the Oppressed”, Freire (1972) draws a distinction between the concept of “banking education”, and liberating or emancipatory education, also called for by Nyerere, on the other. Banking education presumes students to be empty vessels to be filled with knowledge that is determined by the teacher in an authoritarian manner, later to be extracted by examinations. Rote learning predominates and critical thinking skills are not fostered, leaving young people with weakened capacities for exerting change or challenging the *status quo*.

Liberating education alternatively views students as active, conscious beings engaging in a participatory and dialogical process. This constructivist approach suggests that teacher-student interactions be replaced with a dynamic where dialogue replaces one-way chalk and talk methods, and underscores the importance of a participatory approach.⁶⁴ Less emphasis is placed on knowledge reproduction; rather the upper echelons of Bloom’s Taxonomy are employed, and higher-order thinking skills such as analysis, synthesis and evaluation are encouraged. Critical thinking and communication skills are cornerstones in a system which encourages students to envision their own capacity to exert change. The very essence of a liberating education is that it consciously views education as a path to and practice of freedom, in contrast to the detached banking concept which sees education as the practice of domination.

Freire’s critical consciousness holds value still, particularly for HIV/AIDS educators. Education designed to enable learners to understand complex social processes underpinning societal structures, challenge dominant ideologies and pose alternative ones, can make valuable contributions to HIV/AIDS education. Without critical reflection on suppressive structures, students may internalize them and end up perpetuating them subconsciously. This ability to see through hegemonic ideologies and practices is central to Freire’s critical pedagogy, and this is highly dependant on the transformation of teacher-student relations. Changes of this magnitude cannot occur in authoritarian settings however; democratic ideals must supplant domineering approaches. Teachers must be trained in participatory methods and in sharing their power with their students in the classroom; enabling them to empowering *themselves*. As discussed in the results, abuses of power (corporal punishment, harassment and abuse) have no place in such a system and will undermine efforts at introducing programs built on ideals of trust, negotiation and equality.

When conceptually linked together, gender, empowerment (with the recognition of power as its root) and critical consciousness can be used as a platform for confronting a number of cross-cutting issues relevant to this thesis. Critical consciousness implies a collective awakening of how

⁶⁴ Similarly, Habermas (1984) maintains that for participatory action and emancipatory change to occur, there must be no dialogical domination or monopoly by one of the parties. He asserts that the “dialogical ideal” necessitates equal participatory grounds.

one is disadvantaged or oppressed at in societal, community and individual relationships. Seeing how power relations are manifested within one's society consequently may lead to heightened awareness of how risk of HIV/AIDS is exacerbated by these inequities. Intellectual awareness might acknowledge how gender and poverty intersect to create risk and vulnerability that prevents successful negotiation of condoms, for instance. Or it may focus on gendered expectations which place pressure on boys and men to fulfill their role as providers, and how poverty and unemployment frustration may result in violence (Campbell & MacPhail, 2002). The final stage, "critical transitivity", represents an integral link between thought and action and the transition between a passive, disempowered individual to an active, transformative shaper of reality. This development of skills such as confidence, assertiveness and negotiation, or "life skills" resonates strongly with Bandura's (1977) emphasis on self-efficacy.

This type of approach is only feasible within a context where all perspectives are considered. All too often programs have focused on how girls are at risk of HIV/AIDS, rendering them ineffective because they fail to incorporate the other half of the equation. In addition, "democratic inexperience" may disable the process and end up reproducing and reinforce power structures where authoritarian approaches to learning predominate (Campbell & MacPhail, 2002). Expectations that young people and teachers have the tools to spontaneously engage in consciousness raising pedagogies without guidance will not spawn the most effective programs. Hence, structured facilitation and training in the process will produce better results.

This brings another point to the fore which is discussed at the end of this thesis: the importance of an "enabling environment", not only supportive of changes, but also which provides a forum for young people to challenge and debate critical issues connected with gender and empowerment are critical. The recurring theme of adequate teacher training arises, and the involvement of the community and wider society in providing such a forum is an essential part of the process of any consciousness raising efforts.⁶⁵

The discussion in this chapter served as a review of relevant literature and theories in order to introduce the field and lay the foundation for in-depth discussion of this study and its findings. Examples from the findings were incorporated to provide illustrative instances and clarify meanings. Following, the research methodology that the study employed will be detailed by way of introduction to the findings.

⁶⁵ Indeed, the recent focus on community empowerment in the context of HIV/AIDS has acknowledged this (Altman, 1994; Campbell & MacPhail, 2002; Hogle, 2002; Campbell, 2003; Hagquist & Starrin, 1997; Beeker, Guenther-Grey & Raj, 1998; Campbell & Mzaidume, 2002).

Chapter 5: Methodology

Having set the stage for this study by contextualizing the issue through background information and a review of the literature, the rest of this thesis will focus on and present the findings of this study, beginning with a look at the research methodology that was used.

5.1 Philosophical Orientation

“Like others, I am trapped inside a skin, a separate, fallible, self-centered person. I see and construe things in a personal way, unable to escape being who I am...Others have other realities and see and construe things differently. And our different realities evolve” (Chambers, 1997)

As a researcher, one must be keenly aware of one’s position and how it influences not only how questions are framed, but also the methods chosen to answer those questions, and ultimately the interpretations of the data. I bring with me my own ideas, attitudes and perceptions; I cannot escape them, but in being cognizant of the way in which I might be influenced is one step towards minimizing the effects. My background as a Physical Education/Health and Social Science teacher and my longstanding interest in development issues played a role in choosing this topic for my thesis, and also mean that I come with prior experience and perspectives that may be influential.

The methodological framework and theoretical constructs a researcher chooses depends largely on their worldview, and the topic of study. On two opposing ends of the spectrum are positivistic and interpretative approaches. Positivism is characterized by and reliant on measurable outcomes, thus statistics and numerical values predominate in this paradigm, which is often also associated with the physical sciences. Conversely, the interpretive approach which favors a more qualitative basis is more receptive to subjectivity and reflexivity. Interpretive or social constructivism allows for a richer understanding of the subjects' or participants' meanings and world views (Cohen & Manion, 1989). In terms of gender, the interpretive framework asserts that identities are not static, but rather are fluid and dynamic, changing as cultural norms and individual perceptions evolve.

It is largely within the interpretive paradigm that my study is situated. As stated, the interpretive approach typically utilizes qualitative methods. However, the emphasis on triangulation in HIV/AIDS research soon to be discussed meant that quantitative methods were also employed to corroborate or negate findings from the qualitative data in order to yield a more comprehensive view. By employing the interpretive paradigm, the rich meanings of social interactions can illuminate the way in which individuals actively participate in the construction of the gender norms. Careful attention was paid not only to what participants said in interviews and

focus group discussions, but also *how* they said it, their gestures, reactions and emotions. Silence, as a distinct theme running through the study was also revealing. Given the sensitive nature of some of the questions, what was said was not immediately accepted at face value, thus the underlying motivations, causes and perspective that belied comments was considered as well.

5.2 The Fieldwork

The field work was conducted between the last week of September 2004 and the first week of December 2004 at an urban secondary school in Moshi, Tanzania. The school chosen for the case study was a mixed co-educational school founded in 1985 by a group of parents and subsequently handed over to the Catholic Diocese. At the time of research, it was a busy period for students and teachers given the upcoming examination period.

The school is located a 10 minute walk from the city center and a 40 minute walk from where I lived. While there were schools closer, 2 were single sex schools, and another had Swedish researchers conducting studies. Since a co-educational school was sought, and the other alternative already had researchers there, the case study school was chosen. In addition, a contact teacher at the school had been established.

5.2.1 The Pilot Phase

One of the limitations of this research relates to language. As was outlined in the contextual analysis, language of instruction in Tanzania is a hotly debated topic. Although the students were generally competent at expressing themselves in English, it would undoubtedly have been more desirable to use Kiswahili. However, given the study's limited resources, a translator was not feasible. Given the uncertainty of the students' oral, written and comprehension capabilities in English, a pilot test of the questionnaire⁶⁶ and the FGDs (focus group discussions) was completed prior to the study at another secondary school in Moshi. Prior to the pilot test, the instruments were reviewed by all supervisors and suggestions were incorporated. The pilot test with Form II students revealed that the level of English was too difficult for the students. The questionnaire consisted of 86 questions, primarily of closed-ended questions, mainly requiring comprehension skills and probed students' knowledge, attitudes, and behaviors. After amendments had been made, the questionnaire was again tested on a group of Form III students. The results from this pre-test

⁶⁶ A tool frequently used by epidemiologists is the KAPB (knowledge, attitudes, practices and beliefs) survey, which is used to collect standardized information from a large number of people. These surveys have consistently shown the acknowledged disparity between knowledge of HIV and transmission and risk taking behavior (UNAIDS, 1999b). A number of criticisms, such as that they lack validity and respondents will often give socially desired responses, have been aimed at these surveys, but used in conjunction with qualitative methods can provide useful data.

indicated that the instrument was ready to be used on the target group.

Next, the FGDs were piloted, again on a group of Form III students to ensure that they understood the questions being asked and that the language was appropriate. Through this process, a good deal of the questions were re-worded, deleted, or added, as was relevant. At this level, the students' English was sufficient that they were able to clearly and comfortably express themselves.

5.2.2 The Data Collection Phase

The data collection phase lasted approximately 5 weeks and data was collected from key informants (parents, teachers and a local educational representative) and students. Questionnaires were administered in the classrooms, while teachers left to ensure students felt comfortable writing. FGDs took place in empty classrooms so that the tape recorder would function optimally and the group would be undisturbed by outside noises and distractions. However, in reality there was a sufficient amount of noise coming from various sources to interfere with the recording and made transcribing difficult. A tape recorder was used to allow the researcher to more fully observe participants' nuances, expressions, mannerisms and speech, and notes were also taken to record significant observations. The tape recorder did not seem to influence participants or make them feel uncomfortable in any way.

5.2.3 The Researcher Impact

Every researcher, given their appearance, personality and demeanor invariably has an impact on the participants in some way. I didn't know how I would be received by key informants and the students. Being young, female, and from Canada had varying effects depending on whom I was speaking with. Students' and key informants alike responded to me very positively overall and were much more open with me than I had anticipated they would be. They were also likely more forgiving of my perhaps naïve or seemingly stupid questions given my status as an outsider unfamiliar with their customs and traditions, and the fact that I would not be a permanent fixture at the school.

In the case of the students', I think they saw me as not being very far removed from their peer group, and thus likely to understand and sympathize with them. I also think curiosity worked to my advantage, as they were eager to know more about me and why I was there, what HIV/AIDS was like in my country and so on. Teachers wanted my opinion on teaching methods and conflicting information about condoms and HIV/AIDS. They also were curious to know about me and my background as a teacher, and how things were in my country.

Discussions with boys and men were generally more productive, as they seemed to have more confidence and comfort with the topics. This could be related to the fact that I am a foreign female, or it could simply be due to their comfort levels. The girls exhibited greater levels of inhibition and discomfort, particularly in mixed FGDs. Even the single sex FGD was not as productive as hoped, and richer information was gleaned from one on one informal discussion outside the classroom.

One somewhat negative experience I had was with the Acting District Zonal Educational Officer. I had the feeling from the outset that my presence was not appreciated and that help in my research would not be forthcoming. I could not comment on whether he resented the fact that I was young, female, and from the West, or that he had previously been inundated by questions from other researchers in the area, or did not want to be accountable in general, but I certainly got the impression that he did not like answering my questions for whatever reason.

5.3 The Case Study Approach

The case study approach was decided upon for reasons of time constraints, but also since it is well suited to exposing details of the participants' views through multiple paths and methods to construct a richer, more nuanced picture of their reality. In this study, students' viewpoints and experiences form the core of the inquiry, but are also supplemented by views of other key informants such as teachers, parents and a district official. Yin (1989), describes a case study as an empirical inquiry that: a) investigates a contemporary phenomenon within its real-life context; when b) the boundaries between phenomenon and context are not clearly evident; and in which c) multiple sources of evidence are used. Various types of case studies have been identified, including exploratory, explanatory and descriptive (Yin, 1989). The boundaries between each type are not rigid; there are significant areas of overlap between them. This study lies within the explanatory and exploratory typologies, seeking not only to record and describe behavior and phenomena surrounding gender relations, power and HIV/AIDS, but also to explore and speculate about the wider processes influencing the phenomena. Further, there can be single-case, or multiple-case applications. The use of a single-case study, such as this one, can be used to confirm or challenge an existing theory or alternatively, to highlight or expose a unique or extreme case (Yin, 1989).

Case studies usually demarcate a unit of analysis within a system, rather than focusing on an individual or group of individuals. This study focuses on the school as a unit of analysis, with the primary focus on the students' viewpoint, but also integrating other important actors such as teachers, parents and officials to provide a more holistic picture of the way in which a school and

society interact to produce gender scripts and roles. According to Tellis (1997, accessed online 11.10.04), “Case studies are multi-perspectival analyses. This means that the researcher considers not just the voice and perspectives of the actors, but also of the relevant groups of actors and the interaction between them. This one aspect is a salient point in the characteristic that case studies possess. They give a voice to the powerless and voiceless”. Further, in defining the parameters or unit of analysis within a study, internal validity is provided since the theories are developed, with subsequent data collection and analysis testing the theories (Tellis, 1997).

The case study methodology has long been criticized as a “weak sibling among social science methods” (Yin, 1989:10). While it does have disadvantages, rigorous attention and adherence to certain principles make it a sound method for certain types of questions, such as “how” or “why” questions when the researcher has little control over events, and when the central focus lies on the investigation of a contemporary phenomenon within some real-life context. He further points out that, “Case study research is remarkably hard, even though case studies have traditionally been considered to be “soft” research. Paradoxically, the “softer” a research technique, the harder it is to do, since great rigour is necessary to overcome the traditional criticisms of case study research” (Yin, 1989:26).

5.4 Triangulation and Validity

“Seafarer explorers, like Christopher Columbus, steered their course by looking up into the sky to survey the stars. They used triangulation, the technique of determining position by finding three points, to navigate their way. Similarly, to address the challenges of HIV/AIDS research, multiple methods must be used. Qualitative, quantitative and participatory methods each have strengths, but each by itself will provide only partial understanding. But many partial understandings assembled together can be used to make a more holistic picture. There are many forms of triangulation—data, investigator, theoretical, methodological—that can be used to measure behaviour change”. (Singhal, 2003:41)

Case studies invariably employ triangulation as their research strategy, which is one way to enhance the construct validity and external validity. Construct validity, which refers to the extent to which the constructs being investigated are successfully operationalized, is extremely important in a quality research design (Hoyle, Harris & Judd, 2002). However, in reality variables never exclusively measure the construct of the researcher’s interest; other irrelevant characteristics are measured as well, referred to as constructs of disinterest. This is why triangulation, which is essentially examining a situation or construct in a number of ways is so important: it increases the probability that the desired constructs are indeed being measured through the use of a variety of sources of data to corroborate each other (Warwick & Aggleton, 2001).

The use of multiple research methods, such as questionnaire, interviews, focus groups,

observation and document analysis, allow for a more detailed picture to emerge and thus a deeper understanding. Contradictory responses highlight the advantage of employing a variety of methods to ensure consistency, such as the interview where respondents can clarify their meaning. In the case study, triangulation allowed flexibility and fluidity in pursuing new directions and leads as they arose. For instance, the harassment of girls by *dala dala* drivers en route to school was mentioned in an informal discussion, and later added to the FGD guide to consult a larger audience on the issue. In addition, girls in the single sex FGD explained a common “game” or trick called “Chick ‘n Chips” that young people engage in. In order to understand a boys’ perspective on this, it emerged as a topic in the boys’ single sex FGD.

Criticisms of the case study approach are not new and often assert that since case studies are inherently idiographic, results are not widely generalizable and thus the external validity suffers (Tellis, 1997). However, case studies are not representative of an entire population, and do not claim to be. The criticism that has been directed at case studies has been disputed by some researchers who maintain that external validity can also be maximized through the examination of theoretical relationships, and generalizations can be further drawn from this (Yin, 1989). Yin (1989:43) further states that, “This analogy to samples and universes is incorrect when dealing with case studies. This is because survey research relies on *statistical* generalization, whereas case studies (as with experiments) rely on *analytical* generalization”. If the researcher diligently and carefully makes use of protocol designed to maximize reliability and validity in a case study, the tool can be a valuable one in any researchers' repertoire.

5.5 Qualitative Methods

Since the study deals with the attitudes of boys and girls in relation to gender, sexuality and HIV/AIDS, gaining as deep as possible an understanding of their perspectives and attitudes is essential. To observe their interactions with their peers is to gain indirect insight into how peer influence plays a role in shaping young peoples ideas. Thus focus group discussions played a central role in the study. Both mixed and single sex groups were used, to see how boys and girls interact and also how comfort level and opinions change in a single sex group, respectively. For a more complete picture and diverse perspective on gender norms and roles, the opinions, attitudes and experiences of teachers and parents were sought, together with consultation with a district official. Thematically coded focus group and interview guides were prepared in advance, and were semi-structured to allow for flexibility.

5.5.1 Classroom observation

The use of open classroom observation for one week was used since it allowed interaction with the students to gain familiarity and a level of comfort before the interviews. It was also useful in that it provided an opportunity for observing the students' level of English in order to know what to expect from the focus group discussions. Observing teaching methodology and other informal practices was also useful in providing a broader view of how the school environment operates. While sitting in the back of the classroom to avoid interfering, yet desensitize students to the researcher, enabled observation of interactions and behaviors between peers and between teacher and students. A checklist contained pre-determined categories of analysis, but also included an open-ended section where spontaneous or unexpected written descriptions of behavior and comments could be recorded. Observations on teacher-student and peer interactions were the primary focus, with particular attention being paid to gendered interactions.

Employing observation as a research tool can prove to be time consuming and is likely to influence the behavior of the participants if they are aware that they are being watched. For instance, in this study teachers may have paid careful attention to how they interact with boys and girls because they knew there was an observer in the classroom. Thus, a true picture of teacher-student relations may not have emerged. After a longer period of time, it is more likely that typical, normative behavioral patterns from teachers' and students' will be observed, but in studies such as this one which are under time constraints, the reliability of observations must be regarded with some level of skepticism. In studies with more time, the use of multiple observers is ideal.

5.5.2 Focus Group Discussions

Focus group discussions are essentially structured group interviews, and in this study were designed to provoke and stimulate discussion amongst the participants. It is a particularly valuable research tool for probing issues such as gender and power, central to this thesis, in that interactions between students, often unspoken ones designed to silence, express disagreement, or anger reveals power structures. This was evident in the girls FGD for instance, when discussing virginity. One girl challenged the assumption that most girls nowadays have sex before marriage, while two other girls expressed their disapproval of her comment, by laughing at her and saying that her boyfriend must spend a great deal of time masturbating. There was also disagreement amongst the girls in discussing the prevalence of girls having multiple partners.

A typical focus group consists of 6 to 10 people to ensure a diversity of opinions and views

(Hoyle, Harris & Judd, 2002). In my study, each focus group consisted of 6 participants. It has been suggested that it is advantageous if the focus group members do not know each other so that they feel freer to express their ideas than they would in the company of acquaintances or friends. This proved problematic however, since the intimate nature of the small school setting means that most students are familiar with each other. As pointed out by Hoyle, Harris & Judd (2002), focus group discussions are generally more homogeneous than a random sample would be, and therefore the generalizability of the findings is limited.

The theoretical underpinnings of focus group discussions rest on the premise that young people's sexuality is to a large extent shaped by interactions with their peers. Despite the variation in individual reactions that will undoubtedly occur (such as conforming, rejecting, ignoring), focus group discussions can be invaluable for identifying prevailing discourses within a group (Warwick & Aggleton, 2001). The aim of a focus group is to grasp the language used by the participants, the values, messages and meanings attached to that language, and pinpoint areas of agreement and disagreement within a group (Warwick & Aggleton, 2001). In this case study, a number of Kiswahili terms came up in FGDs that provided insight into the way in which young people communicate and perceive sexuality. The fact that participants referred to girls who were known to have several boyfriends as *mlupo* ("player"), but they did not know a similar word to describe such boys is revealing of the way in which language is used to paint girls negatively, while boys are often viewed favorably if they have multiple partners.

In the field of health education research, focus group discussions have become a prime research method in uncovering and exploring people's knowledge, attitudes and behaviors. The premise is that through discussion and group processing, views and attitudes are clarified in a way that may not be possible in a one-on-one interview. By initiating discussion about a topic such as HIV/AIDS, it allows students to explore issues that are important to them, using their own language and ultimately posing their own questions. In addition, the students' style and choice of speech, jokes and anecdotes, teasing and arguing all are telling in ways that a simple paper and pencil questionnaire cannot tap into. Gaining access to this world of interpersonal communication is particularly effective and revealing for highlighting cultural values and group norms, which is why it is so commonly used in cross-cultural studies (Kitzinger & Barbour, 1999). The use of focus groups in this study sought to unravel the prevailing narratives about sexuality and HIV/AIDS amongst secondary school students.

Having led a focus group discussion in Uganda in previous weeks, I learned that in order for students to understand me, I had to speak slowly, clearly and simply. My first experiences in leading focus group discussions were a positive learning experience. Students were receptive to my

way of questioning them and expressed their appreciation afterwards at having been given the opportunity to speak about issues that they normally cannot. Further, by treating them as experts on their own sexuality, they stated that they felt that what they had to say to me was important and valued. I did however have to be cautious to remain within the bounds of my scope as a researcher, and not a therapist, given the sensitive nature of my questions. Hoyle, Harris & Judd (2002:402) liken the research process to that of psychotherapy, "One can tell another person about one's personal problems, but real therapeutic progress is only likely to take place when the other person is a skilled clinician who is trained to bring about insight and behavior change". Care was taken not to ask for specifics when a student told a story about a sensitive topic such as rape, abuse or violence, and to bear in mind the cultural context of the situation. Intergenerational relationships, for instance are often deemed acceptable and even desirable in many societies and cultures for economic and social reasons.

Topics were coded thematically and ranged from discussing masculine and feminine traits to relationships, condoms, and HIV/AIDS. In some instances potentially inflammatory or controversial statements were placed on the board as a means of ascertaining students' perceptions concerning gender and sexuality and to observe students arguing, concurring or sharing related experiences.

Focus group discussions are not without their disadvantages however. Frequently, dominant group norms may overpower and silence voices that disagree but do not dare speak out. This was evidenced in the mixed FGD, where boys monopolized the discussion, despite repeated attempts to engage girls who were reluctant to contribute. In addition, confidentiality is compromised due to the presence of other participants. Particularly with young people or adolescents such as secondary school students, many may choose not to speak their mind for fear of being laughed at, teased, or giving the wrong or undesired response. This may be another reason why girls were so hesitant to contribute in mixed FGDs. Group dynamics can greatly influence the direction and tone of a focus group. On the other hand, taboo subjects such as sexuality and HIV/AIDS dealt with in a focus group may embolden shyer participants if the more outspoken break the ice first (Kitzinger & Barbour 1999). In fact, focus groups can end up providing support and reinforcement when dealing with sensitive topics, as participants share their experiences. In one instance a boy shared a story about his uncle who had died of AIDS which was met with supportive and sympathetic gestures (shaking the head sadly, tongue clucking, heads hung down) from his fellow students, rather than words to convey an understanding. Since empowerment is a cornerstone of any HIV/AIDS educational program, giving participants (students) a voice and forum to share their ideas and experiences makes them active agents in the analysis of their own position. New ideas or opinions

may emerge as a result of a well orchestrated focus group discussion, with participants gaining strength and ideas from each other.

As stated previously, the single sex FGDs were most effective, engaging and active. Effectiveness might be an interaction of the researchers' gender, and the comfort level of boys and girls in discussing sensitive issues in the presence of each other. In the mixed FGDs, both boys and girls were more hesitant to answer questions and more likely to display signs of discomfort, shyness and embarrassment. However, the mixed and single sex groups were extremely valuable in that they provided insight into how young people construct their identities in different settings and with different people. It was interesting that in the mixed FGD, boys claimed that of course they knew how to use a condom, but preferred *nyama kwa nyama* (meat on meat). However, in the single sex FGD confessed that they didn't know how to use a condom and had never seen a demonstration. Perhaps the boys did not want to indicate their lack of knowledge with the girls present and so asserted that they didn't use condoms for alternative reasons. Another interesting finding is that almost uniformly, females participating in the study did not use the word "sex". Rather, they would wrinkle their noses in apparent distaste and call it "that thing". The males in the study however, had no problems using correct terminology, which may suggest that females experience higher levels of discomfort when talking about sex.

5.5.3 Selection of Focus Group Participants

Focus group participants were culled from Form III students by purposive sampling methods. Participants were volunteers who were confident in their English speaking skills and were not afraid to speak out about sensitive topics such as sex and HIV/AIDS.

5.5.4 Individual interviews

In-depth interviews with key informants can be used to probe the meanings, identities and contexts under which sexual behavior takes place. They can uncover people's opinions, motivations, behavior patterns, justifications and reactions (Warwick & Aggleton, 2001). While not meant to be representative of a population, interviews can shed light on the multiple interpretations and discourses surrounding issues of interest (Warwick & Aggleton, 2001). Since the first research question examines how messages in the school may conflict with messages from parents, elders, and wider society, one set of parents was interviewed, along with one male teacher and one female teacher in the school. To gain a broader perspective and get insight into educational policy and gender, a local ministry of education representative was also interviewed. All interviews were

semi-structured, with a thematic guide to plot the course of the discussion, but with enough flexibility to accommodate the pursuit of emerging themes.

Among the limitations inherent in the interview process, poorly designed or leading questions may have an effect on the data obtained and how that data is interpreted. Interview subjects may give what they believe to be the desired response, rather than what they believe, think or actually do. In addition, their recall of events might be inaccurate or incomplete.

5.5.5 Selection of Interview Participants

Since it was not possible to observe any lessons taught on HIV/AIDS, one of the biology teachers, who was male, was interviewed. The female teacher was selected at random. As the Zonal Education Officer was unavailable, the Acting Zonal Education Officer was interviewed. Accessing parents who were willing to be interviewed proved to be a challenge, though an interview with two parents-one female and one male, from separate households was conducted.

5.6 Quantitative Method: The Questionnaire

Given the sensitive nature of the topic, it was decided that a self-administered questionnaire may elicit responses from a wider cross-section of students than may be utilized in focus groups or interviews, many of whom may not feel comfortable speaking English, or speaking about gender and sexuality. Themes explored in the questionnaire included basic demographic information, personal background details, students' attitudes and views on gender norms, valued characteristics of femininity and masculinity, relationships and risk perception. The questionnaire consisted primarily of closed-ended questions on a Likert 5-point scale, with only one multi-part question requiring a written response.

Analyses of the quantitative data in this study utilized SPSS version 11.5. Simple descriptive statistics were calculated (frequency distributions, means and standard deviations) to summarize the findings, and inferential statistics to identify differences in the sexes (independent t-tests and one way ANOVA) were also utilized with the confidence interval set at 95%. In constructing the gender scales, which probed gender differences in perceptions and attitudes, Cronbach alpha reliability coefficients (>0.70) were used to determine the internal consistency of the scale and the items comprising it. Missing values were identified, with the criteria that at least 50% required in order for a scale to have a valid value. The small sample size ($n=160$) means that the data should be viewed cautiously.

Questionnaires also have their critics and their limitations cannot be ignored, given that they

way in which questions are worded can be highly influential or leading. The fact that most questions were closed-ended also restricted participants' responses. This questionnaire was designed as an exploratory mechanism, and attempted to probe and map students' attitudes on gender norms, and also explored concepts of power based on what they see and experience at home, in the school and in wider society. However, it is difficult to measure such abstract concepts through the use of a questionnaire, where meanings cannot be expanded or clarified. The reliability and validity of the questions, or how clearly they measure gender norms could always be questioned, but underwent a process of peer review.

5.6.1 Sampling Methods

The sample used for the questionnaire only included those students which had not participated in the FGDs. Given the study's focus on gender issues, it was determined that stratified random sampling would be most appropriate for attempting to create homogeneity of each stratum. Thus, 40 females and 40 males in each form (n=160) were selected randomly to complete the questionnaire. The written answers, which may have phrased the same concept in a different way (ex. rape and forced sex) were coded into the most common responses. It is not necessary for the sample to accurately reflect the actual composition of the population, and in this case it did not (Yin, 1989).

5.6.2 The Sample

This section will provide a brief look at some of the salient characteristics of the sample population. The gender stratified sample consisted of 40 girls and 40 boys in Form III and 40 girls and 40 boys in Form IV, with a response rate and utilization of 100% of the questionnaires. The median age of girls was 17 and boys 18 (range 15-21). The representation of tribes in the sample reflected the high proportion of Chagga⁶⁷ (77.5%) in the region, with Pare making up 11.3% of the sample and other minority groups making up the remainder.

In terms of current relationship status, 51% of girls reported that they had a boyfriend at present, whereas 48% of boys reported having a girlfriend. Of those currently in a relationship, 48% stated that they have been together longer than a year. Age differential in relationships showed that of those girls who had boyfriends, the median age of their partners was 20, while it was 16 for boys who had girlfriends. The age range for girls' boyfriends was 17-29, while for boys' girlfriends

⁶⁷ The Germans collectively labeled the various chiefdoms living on the mountain Chagga, despite their linguistic and cultural differences. The term is still widely used by writers, researchers and even residents of the region (Setel, 1999).

it was 12-24. This supports the notion that girls generally seek out and date older boys or men, who may be viewed as more mature and experienced and who may also be better positioned to meet their needs and desires financially and furnish them with greater status amongst their peers, while boys pursue younger ones who are more easily accessible to them.

Of all respondents, 62% indicated that they had had sex before, with the median age for girls at 12 and boys at 14. Of those, 25% of boys reported having their first sex before the age of 12, while 15% of girls stated the same. These figures are not supported by national figures, but the small sample size means the population is not representative.⁶⁸ Of those who have had sex, a total of 49% report having experienced unprotected sex at least once. A surprisingly large number of students (78%) indicated that they frequent discos with a further 45% reporting that they go to bars/nightclubs. In terms of alcohol consumption, 32.5% of girls and 58.8% of boys reported drinking on weekends, while only 14% in total report smoking during the week or on weekends.

Parental education figures indicate that the student body likely come from more prosperous families than the average. Girls reported that 36% of their mothers had studied at the college/university level, with a further 41% having at least completed secondary. They also reported that while 61% of their fathers had completed tertiary education, 26% had completed secondary school. Boys similarly reported that their parents are well educated, with 38% of moms having completed college/university studies and 41% having finished secondary school. In terms of fathers, 54% had received college/university education, and 31% had at least completed secondary school. These figures would appear to show that the students are in a privileged position given their parents' level of education. However, given the high levels of unemployment in Tanzania, this cannot be a reliable indicator of family income. In terms of equality and shared decision making in their parents' relationships (from the students' point of view) 84% of the sample reported that decisions concerning the house, money and children are shared between their parents. Growing up seeing their parents negotiate and share the decision making power is likely to have had a positive impact on the students' views concerning equality. The following section will highlight some of the limitations of this study, which may compromise the external validity of the findings.

⁶⁸ The Tanzanian national figures for age at first sex in 1999 indicate that the median age for girls was just under 17 years, while it was around 18 for boys. According to the study, the median age was slightly higher among urban girls than rural ones, though there did not appear to be an urban-rural pattern amongst boys (Garbus, 2004). However, Ndeki, Klepp & Mliga (1994) found that a significant number of children in grades six and seven are sexually active.

5.7 Limitations of the Study

The ability of this study to make generalizable statements is compromised by a number of factors. The language barrier, addressed earlier, may hinder the reliability of the study but was largely unproblematic given that the participants were able to express themselves adequately in English. Further limiting the external validity is the school's profile in comparison with other schools in terms of the student's backgrounds (ie. parents' education level and socioeconomic status), and the location of the school itself; the rural-urban disparity cannot be overlooked. Lastly, limited access to up to date Tanzanian documents and statistics may also render some parts of this thesis out of date or inaccurate.

5.8 Ethical Issues

Dealing with sensitive topics presents a number of ethical issues for the researcher to resolve prior to commencing the study. Although it was unexpected that key informants and students would be as open as they were given the short period of the field work, the importance of not overstepping boundaries and soliciting personal stories was guarded against. Deciding how much information to divulge to participants was also a factor that was considered. With this study's focus on gender relations, it would have been counter-productive to indicate what was being observed and so the project was described in more general terms.

The ethics of undertaking the study at all, given its potential for adverse effects, may be defended in terms of cost-benefit analysis. Given the severity of the HIV/AIDS epidemic and the importance of education in the fight against it, designing successful prevention programs based on solid research findings is of the utmost importance.

Signed evidence of informed consent was not necessary in this study. The approval of the headmaster was sufficient, and since the proposal was cleared by the Ministry of Health no written consent forms were required. However, oral consent was essential, and participants were instructed on their right to withdraw or decline to answer a question prior to the questionnaire, FGDs or interviews. The decision to guarantee anonymity was made in this study. Given the sensitive nature of the information received and the fact that this is a case study, it is important that the schools identity be protected so certain individuals are not identifiable.

Stimulating discussion on such a topic may have a number of repercussions and when possible, provisions should be made for counselling or other support services. This did not exist at the school, so students were made aware of relevant local organizations that can assist them further

at the conclusion of the FGDs and interviews.

Now that the methodology and other relevant concerns related to initiating and completing this study have been addressed, the discussion in the following chapters will focus primarily on the results, discussion, conclusions and recommendations that emerged from the study.

Chapter 6: Polarized Perceptions: Exploring the Production and Reproduction of Young People's Identities

Having reviewed the methodology used in this study, the findings will now be presented in a way that fuses the quantitative and the qualitative data, while incorporating references to the literature which either correspond or contradict the findings. In this manner, it is easier to see discrepancies in the data, and also to allow the two methods to complement and corroborate each other in a mutually reinforcing manner where possible. Each research question has been allocated one chapter in which the principal questions, along with associated sub-questions are explored.

In this chapter, the following question and sub-questions will be addressed:

1. To what extent do students in the Kilimanjaro region perceive that there is a contradiction between the gendered expectations and messages about sex and gender roles in the school as opposed to messages they receive from parents and wider society?

a) How are perceptions of tradition and modernity conceptualized through gendered lenses, and what implications does this have for gender relations and expectations?

b) What ideas do girls and boys have regarding gender roles and sexuality and how is this manifested in their relationships with each other?

c) Where do students get their information and attitudes regarding sexuality, and HIV/AIDS from?

The beginning of this chapter will present three gender scales that emerged from the findings both qualitatively and quantitatively. Accordingly, these themes will be discussed in greater detail below and in the following chapters.

6.1 Gender Scales

Although the questionnaire was designed as an exploratory mechanism to map out and probe gender roles and norms, and were not derived from other studies which have sought to tap a variety of theoretical concepts, three gender scales emerged from the results which demonstrated significant differences between boys and girls regarding gender norms, attitudes and perceptions. In this instance, the relatively low alphas are likely attributable to the small sample, low number of items comprising the construct and the previously mentioned fact that the scales were not originally designed for this purpose. Accordingly, the results indicate that the questionnaire should be revised by mapping out the different underlying constructs influencing gender norms and identities. Nevertheless, the three scales detailed below in Figure 3 did indicate significant levels of gender differentiation and have relevance for the findings of this study.

Figure 3: Description of Gender Scales (number of items in scale, Cronbach alpha reliability, mean values, standard deviation, F-values and P-values)

	No. Items	Alpha α	Mean (female/male)	SD	F	P
Innate Characteristics	2	.62	1.40/1.80	0.41	53.78	.000
Beliefs about Girls in Sexual Relationships	4	.49	1.48/1.69	0.29	22.23	.000
Power/Control in Relationships	3	.43	1.23/1.55	0.31	53.78	.000

These themes and the diverging opinions of boys and girls in regards to them emerged at different points during the course of the field work. Overall, boys were more likely than girls to see themselves as being more intelligent and capable in several areas than girls and as being more powerful in relationships. Boys also demonstrated a tendency to hold negative views towards girls such as that they are materialistic, likely to have sex before marriage and lie about their sexual history and send mixed signals in relationships, while girls were less likely to support these assertions. Innate characteristics, such as the perception that males are inherently more intelligent than girls, particularly when it comes to math and science is discussed in greater detail in Chapter 7. Beliefs about girls' behaviour in relationships, for instance surrounding their motivations for having sex, honesty in reporting sexual behaviour, mixed messages that may be sent, and the value placed on virginity is dealt with in Chapter 6 in regards to conceptions of masculinity and femininity and is also dealt with in a discussion of gendered expectations in contemporary relationships. Lastly, issues of power and control are a recurring theme in this thesis, but dealt with in detail in Chapter 6 in reference primarily to the sexual double standard and abusive relationships.

This chapter will proceed by thematically exploring dualisms; how the key informants in this study conceptualize tradition and how it has been impacted by modernity in relation to gendered identities and relationships in the region. Their perceptions largely focus on differences and negatives, rather than similarities and more positive aspects. Oppositional constructs such as this are not surprising given that one concept is built on the other: modernity would have no meaning without the existence of the traditional, for instance. Yet the increasingly blurry nature of gender norms and roles, as well as the intermingling of tradition and modernity surface, despite attempts to dichotomize the concepts.

6.2 The Traditional vs. Modern Dichotomy

In this study, participants in the FGDs constructed polarized images of what constitutes the traditional compared to what they equate with modernity, with the following having “traditional” connotations: the *kihamba* (family farm), being uneducated, wearing a kanga (wrap worn by women), witchcraft, circumcision and life in the village.⁶⁹ This was juxtaposed against modernity



Mobile phones: improving quality of life?

as being associated with cell phones, trendy clothes patterned after Western dress, the city, disco, Internet, being educated, and having other material possessions.⁷⁰ It is interesting that these conceptions focus primarily on tangible characteristics: they refer more to the observable and do not recognize for instance, how a certain mindset or attitude might figure in. This was more explicitly stated in their perceptions of masculinity and femininity, discussed below.

The manner in which these dichotomous relationships is viewed is paradoxical, as the young often covet modern possessions and seek to emulate their Western counterparts, while at the same time lay blame squarely on Western shoulders for the decay, decline and erosion of their culture and traditions.⁷¹ In Tanzania, Setel (1999:18) cautions against naive assumptions of stable village life by explaining, “In short, the history of sexuality and AIDS in Kilimanjaro should temper glib characterizations of change in patterns of sexuality and nuptiality in Africa as indicative of increasing entropy, of social decline, and of AIDS as the taken-for-granted outcome of urbanization and consequent cultural loss”.

There did however, seem to be awareness that some traditional practices such as circumcision are dangerous and can spread HIV and in this way, the FGD participants did not always romanticize their traditions. All agreed that changes have been underway, when one boy spoke up, saying:

“These ways that our parents and grandparents did with circumcision, these traditional beliefs are bad. Now they can hurt you and...we don’t need that anymore. It was different back then, now in Moshi you don’t see this happening so much. It (the knife) could be dirty with another’s blood and then...you get sick and die. Why would we do this?”

⁶⁹ The dichotomy between “good” and “bad” places, in association with the mountain/lowland, rural/urban emerged in the 1940s when young Chagga men increasingly left in pursuit city work (Setel, 1995b). More recently, the Kiswahili term *mhuni* (pl. *wahuni*) is used in derision towards those who dwell in the city and deemed to be morally loose.

⁷⁰ Stambach (2000) also found the following as being associated with tradition and modernity in Machame: banana beer vs. Coca Cola, fast cars, VCRs and gas stoves vs. women who cook over a fire.

⁷¹ One multi-country study by UNICEF (2003) found that this relationship was often further broken down by gender: boys were seen as being upholders of tradition, while girls were viewed as being more responsible for the moray decay of society as a result of their desire for modern possessions. Though it was not framed in this way by the participants in FGDs and other key informants in this study, it was clear that girls were negatively seen as being materialistic.



mtindo bomba-short is sexy

This comment signifies a desire for change and reflects the view some young people may hold that their ancestor's traditions are now outdated and irrelevant. It may be indicative of an attempt to move away from traditions and towards modernity, or it may simply be a comment on one aspect of tradition that he believed should be changed since it is no longer relevant.

Perceptions of Western abhorrence for Africans and their burgeoning population also figured largely in discussions which touched on various conspiracy theories. One frequent question students asked in the open forum question and answer sessions was: "Isn't it true that AIDS was made in your country and sent to Africa to kill us all?"⁷² The view that the only reason they should use condoms is because Westerners want to control the population in Africa was common and students wondered why some countries required those Africans seeking visits abroad to have HIV tests beforehand. Did we have the cure and didn't want to share it, they wondered?

Another topic that emerged in the post-FGD question and answer session focused on pornography from Western countries and how easy it is to get in Moshi. The majority of students stated that they had seen at least one piece of pornography before, whether it was a movie, a magazine or Internet site supposedly from the "West". They were full of all kinds of questions ranging from a multitude of topics such as masturbation, to French kissing and even the prevalence of animal sex in the West. Some questions revealed major gaps in their knowledge, such as:

Can you get AIDS from masturbating?

Can I get AIDS if I eat food given to me by someone with AIDS?

What about mosquitoes, I heard that if you get three bites in one day you'll get AIDS.

One tangible marker students listed that identifies a boy or girl as being hip and modern or traditional and outdated was style of dress. Particularly contentious was the subject of how girls dress outside of school (uniforms are worn at all schools in Tanzania, skirts and blouses for girls, slacks and shirts for boys, a manifestation of one of Connell's "gender regimes" discussed in Chapter 3 called "symbolization") and what kinds of messages are sent.⁷³ In the mixed FGD, all 3 girls agreed with boys that what they choose to wear sends a message, which is generally of a

⁷² The belief that AIDS was created in a US laboratory and exported to Zaire where the CIA had a base in the 1970s is dealt with by Chirimuuta & Chirimuuta (1987).

⁷³ Stambach (2000) provides an interesting account of how some girls didn't wear socks with their uniform, sending ambiguous messages that some thought were designed to entice teachers to slip them tests in advance in exchange for sexual favors, while others saw it as representing an analogy between their legs and men's penis's, whereby they were exerting control over their socks in a way that a man controls whether or not to use a condom.

sexual nature. Both sexes agreed that wearing a short skirt or tight clothes means a girl is ready for sex. Boys admitted that they viewed such girls as being easy, yet despite this liked the provocation. One boy said that, “Ohhh, when I see that girl I want to have her for a short time. But that kind is no good really. Still it makes me smile to see her”. Girls contradictorily claimed that while dressing provocatively entices boys, they enjoy doing it but get annoyed when boys approach or leer at them. This was not corroborated by the questionnaire however, which found that only 25% agreed that dressing sexy means a girl wants sex. This may be due to confusion; in the FGDs students were silent at first until the question was further explained. Linked with this is the common belief of uncontrollable male sexual drive and that once a boy is aroused, he must have sex or will experience pain or sickness (48% of girls weren’t sure/didn’t know, 51% of boys disagreed).⁷⁴ The majority (69%) did indicate though that they believed that boys always want to have sex. This perception may be linked to violence and abuse in relationships, as boys and men rationalize that their girlfriend or wife has a duty to fulfil their desires. However, on a positive note respondents indicated that girls and boys alike did not support this idea. Findings indicate that 73% of the entire sample felt that it is unacceptable for a boy force his girlfriend into sex.

6.3 Conceptions of Masculinity and Femininity

Masculinity and femininity, similar to notions of tradition and modernity are often portrayed as being symbolically opposed constructs. The mixed FGD allocated the following characteristics as being innate to girls and boys:

Girls	Boys
Good	Dangerous & disrespectful
Helpful	Lazy
Weak	Strong & Sporty
Domestic	Smart
Quiet	Outspoken
Mature	Independent (free)
Materialistic (want nice things)	Controlling

This exercise did not provoke a lively debate, as was anticipated. Girls did not challenge boys’ assertions that they were weak or materialistic, and likewise, boys did not seem to take offence when girls suggested that they were dangerous and disrespectful. Boys smiled and seemed

⁷⁴ Heguye (1995) found that men and women in Kahe (village in Kilimanjaro region) believed that lack of sex could result in physical disorders leading to mental break down and insanity. This was also confirmed by Lie & Lothe (2002) in Kilimanjaro. Setel (1999) likewise found that masculinity and femininity were comprised of one’s *maumbili* (physical shape, male or female sex) and one’s *jinsia* (gender relations or matters of gender). It is *maumbili* that is seen to provide males with a greater sex drive than females. Although *maumbili* is fixed and unchangeable, *jinsia* can be altered, and thus socialization to change *jinsia* is seen as the best point of entry for AIDS interventions.

to take pride in being seen to possess these characteristics. One girl agreed with boys in the FGD and claimed that girls were definitely weaker, since, “A very young boy can rape a girl many years older than him because girls are not strong. That is why you see, we girls get more AIDS”. Her way of accounting for the increased risk of girls centers on one of the pervasive stereotypical beliefs predicated on male strength and female weakness both physically and symbolically. She touched on two important issues here: not only do boys’ possess greater physical strength than girls, they also wield power and control in realizing their sexual interests and desires.

In the single sex FGD, girls conceded that while material gain isn’t their sole motivation for seeking out boyfriends, they enjoy getting gifts and sweets and this is likely why the girls in the mixed FGD didn’t challenge being labelled materialistic. They also stated they didn’t mind being responsible for domestic chores and felt good about themselves and the work they do at home, showing that they are not passive agents relegated to domestic duties as females are sometimes portrayed. Boys, the girls laughed, are irresponsible and don’t do the job right anyways. As for the boys, one stated that when girls call them controlling, it may not be far from the truth, because, “The boy he got to know where his girlfriend is and who she sees and what she is doing with her time when she is not with him. It is his right to know, to make sure she is behaving correctly”.

However, generally speaking certain tasks and jobs *are* “feminized” and thus considered to be the domain of girls and women in what Connell refers to as the gendered division of labor in Chapter 3. At the school, home and in the workplace these gendered divisions of labour can be seen. According to students in the FGDs, this division of labour can most clearly be seen in the home. Parental double standards when it comes to expectations from their daughters and sons often translate into more duties for girls and more freedom for boys. Indeed, 75% of the sample agreed with the statement: Boys are given more freedom at home than girls.⁷⁵ Further, the majority of girls (56%) indicated that they feel they get more freedom at school compared to at home. This points to how students, particularly female ones, perceive a difference in how they are treated in their home compared to how they are treated in the school. Whereas their parents are more apt to hold traditionally restrictive views, which laws have by and large reinforced, the school is more likely to encourage modern assumptions of equality.

The questionnaire also probed the issue of whether girls are better than boys at taking care of younger children and babies, with 90% of all in support of this, suggesting that the role of nurturer is seen to be a highly feminine instinct by both sexes. There was strong consensus that it is

⁷⁵ Omari & Mbilinyi (2000) explain that females are regarded as custodians of traditional culture and thus not to be corrupted by the outside world of modernity, while boys can withstand it. Yet the opposite has also been asserted: males are gatekeepers of tradition, the powerful decision makers in the village, passing down what they choose.

the girls' responsibility to do household chores such as cleaning, washing and cooking, with 72% of boys and girls agreeing with this statement.

Findings indicated that 89% of girls felt that their parents valued their education and thought it was important that they do well in school (which might be reflective of the importance placed on education in the Kilimanjaro region, or the parents' socio-economic and educational background). Interestingly, this was contradicted by the response to the statement: My parents think I should quit school so I can work. A striking 44% of girls and boys equally agreed with this. Explanations for this contradiction could be indicative of the tension between education and the labour market. While most know that having an education opens doors and increases economic opportunities, the high unemployment rate in Tanzania may discourage some from seeking further education. Perhaps in their mindset, focusing on the present dictates that earnings foregone while attending school are not worth it in the short-term.

In school, boys and girls alike are expected to clean and most duties are shared. There are some instances however, where boys have one defined role while girls have another, for example boys are expected to chop firewood and the girls are expected to carry it, suggesting that girls are not capable of handling an axe. There was some evidence of negotiation amongst the students. The boys stated that they preferred to be responsible for washing the blackboards rather than mop the floors, so that when possible they would trade duties with girls who didn't seem to mind the arrangement. It didn't appear to work the other way though; girls and boys alike reported that negotiations were only initiated by boys indicating that in terms of power, boys have the upper hand in certain areas such as duties and chores. This exemplifies Connell's structures of the division of labour and power identified in Chapter 3, and highlights the way in which boys are typically more privileged and have more negotiating power than girls. In comparison with the home, this may signal a gradual shift from more traditionally defined roles to more a more balanced approach where small concessions afford girls more privilege and freedom and less constraint.

As mentioned, at home the lines are more clearly demarcated. Both unanimously conceded that while girls must spend most of their evenings doing household chores such as cleaning, cooking, washing, boys are free to do as they please. Parental expectations likely stem from their own upbringings and represent a perpetuation of traditional roles. According to the female parent interviewed,

“Well I can say that when I was growing up, always the boys...they don't work. They don't help their mother with the chores because they learn from their fathers how are they treating their mothers. These African fathers they don't help the mothers with the kids after the breakfast. It's not the tradition for the boy or the father to help so they (the boys) learn through their father. But for the girls, they are seeing their mothers who are working and cooking. In Africa men are not used to do domestic work”.

She also indicated however, that:

“It is changing because we learn how to make the gender better.... The gender is getting really better because in the secondary school now all the girls and boys they are working to get the grades. They both have to learn to prepare food and do math. They have to learn to clean the house”.

The male parent concurred, noting that:

“At school things are changing yes. Because now the boy must wash the dishes. They take their meals, they have to wash their dishes. They have to help with the cleaning and it never used to be this way when I went to school”.

These statements in which parents observe the changes that have occurred in schools reinforce the idea that while at home young people are more restricted to narrowly conceived gender roles, schools are more modern institutions which place girls and boys on more equal footing.

The consequences of dividing duties along gendered lines may reinforce existing stereotypes that paint boys as being strong and free with future options, while girls are domesticated, weak and more likely to be relegated to the domestic realm like the generations before. This might limit and constrain the ability of young people to negotiate their identities and roles and power structures are ultimately reinforced which may heighten both boys and girls vulnerability and risk of HIV/AIDS. The next section deals with how gender norms are manifested in relationships.

6.4 Gendered Expectations in Contemporary Relationships: The “Dating” Game, Partner Characteristics, Virginity and Control

The way in which boys and girls interact is one way in which gender and power relations are constructed and reconstructed. By looking at factors such as who takes initiative in starting relationships, how the relationship proceeds in general and the underlying motivation behind choosing a partner, insight into how gender norms and expectations in terms of sexual relationships are formed may be made clearer. Paying attention to how these norms shift is a useful entry point for considering how these changes may result in more equitable gender and power relations.

While boys stated that they are most often the initiators of relationships through sending love letters, offering to help with homework or giving girls’ sweets, both sexes admitted that sometimes a girl would send discreet signals to a boy that she was interested. Girls explained the various ways in which they might try to get a boy to notice them, such as asking him to help her with her homework, dressing a certain way or giving him “eyes”. Meeting sometimes take place in empty classrooms, or behind a building at the school. Both confirmed that generally, the girl must consider his “offer” before agreeing to a meeting or relationship. This waiting period usually lasts

anywhere from a few days to a week and is an integral part of the ritual.⁷⁶ When asked if it was acceptable for a girl to directly take the initiative in asking a boy out, both sexes agreed that this was changing and that girls were getting bolder. In the questionnaire only 32% of the sample indicated that they thought it was OK for girls to initiate first contact. Reactions from boys in FGDs were mixed on whether or not they approved of this or enjoyed it when a girl made the first move. One expressed the view that, “It’s good you know, that she shows she likes you. But when you start off like that...who knows what she’ll be like as a girlfriend later. She might be like a Palestinian you know (laughing), trying to control everything”.⁷⁷

Girls merely laughed at this, accusing the boy as being afraid of a “real woman”, suggesting that while some boys might prefer a traditionally shy, docile girl, a more modern or “real woman” is capable of being assertive in initiating a relationship. Again, this highlights the dichotomous notions of traditional versus modern conceptions of femininity and masculinity and raises the question: if indeed a more modern ideal of a girl and a boy is emerging, where is the impetus for its emergence (the school or mass media, for instance), what characteristics will then be valued and can such changes be translated into increased equity between the sexes?

The ways in which girls and boys interact with each other and come to select partners is often manifested in certain localized rituals, or “games”. One game, repeatedly described by young people in Moshi is called “Chick ‘n Chips” (referring to the much coveted meal, chicken and chips). In this “game”, a boy first offers to buy a girl “Chick ‘n Chips”, which she gladly accepts. A few days or weeks later, the boy tells the girl she must pay him back for the meal. If she doesn’t have the money to do that, he tells her she must have sex with him. If she refuses that, he beats her up. Both girls and boys know the pattern of the game, yet girls still fall prey to it.⁷⁸ This is not a situation where girls are unable to negotiate and decline, in contrast to other more forceful situations which will be discussed soon hereafter. When asked why girls agree, one boy laughingly claimed it is because “Girls are not clever to see how this game will end”. Another boy claimed it is because girls want luxury and nice things (*starehe*).⁷⁹ Boys know they will succumb to the temptation of a

⁷⁶ Amongst the Meru in Tanzania, Haram (1995) found that girls try to “trap a man’s mind” by how she negotiates her sexuality. For instance, the waiting game whereby the girl considers his offer is crucial to negotiations and is reflective of her respectability. If she agrees too soon she will be considered “loose” and not worthy of marriage. On the other hand, the items she desires such as soap, lotion and so on will only come once she agrees to sex. This emphasis on the transactional aspect of relationships is critical to understanding how relations are initiated and maintained.

⁷⁷ He was referring to the fact that assertive, self-confident Chagga women are characterized as being “Palestinian”.

⁷⁸ Nnko and Pool (1997) reported similar findings in Magu district, in what one boy called the typical “the conversation of lies” in which a boy promises something he never intends to deliver. He does this because often, he has nothing to offer the girl; no money, sweets or presents. The study found that boys used deception or a “discourse of deceit” to win girls over, but girls too lied by often making appointments they never intend to keep.

⁷⁹ *Starehe* is a Kiswahili term which has numerous meanings depending on context. Generally, it means luxury or pleasure. It will be discussed in greater detail below, as a recurring theme in discussions.

good meal, so they exploit the situation. One girl hesitated, but surmised that it might be because girls want to believe that the boy cares for her and that they are not playing “the game”. Notions of romantic love might inform the girls’ decision here, and reflect their hope that the boy is not merely playing with her in order to get sex. While poverty certainly is the underlying cause why many engage in transactional sex, it did not seem to be the case in this instance. This theme of abusive relations will be returned to in the next section.

When asked whether they wanted their girlfriend to either possess traditional characteristics or modern ones in FGDs, boys found themselves wanting to pick and choose from both.⁸⁰ For instance, one boy stated that he wanted a girl that was beautiful, dressed nice, in a Western style like in the Coca-Cola advertisement below, who was educated, but capable of taking care of him and the



**Coca-Cola ad raha kamili
complete hapiness**

family by staying home and cooking a good meal for when he arrived home from work. Nowadays however, both sexes conceded at 86% that it is more common for both husband and wife to have jobs/careers. However, in terms of wages, 68% of boys thought that they should earn more money than their girlfriends/wives while girls were split on this issue with 46% agreeing and 43% disagreeing, reflecting that although girls and women are making ground in some areas, aspects of gender equality have yet to be fully realized and that power differentials still remain embedded. This highlights the state of flux confounding gender norms, roles and expectations yet marks a

subtle but distinct shift in mindset.

All placed high value on having a faithful partner, yet admitted that many have multiple partners. The girls for their part wanted to be taken care of, but wanted the freedom to pursue work if they so desired. In general, they wanted nearly the same thing as the boys: an educated, faithful partner who could provide in the sense that each sex *traditionally* provides: men in financial security, women in managing household affairs. That their desires contain elements reflective of both tradition and modernity points to the state of flux young people find themselves in today.

⁸⁰ Lewinson (2000) found that in Dar es Salaam, couples merged elements of tradition and modernity in marriage and gender relations. The importance placed on the concept of love, the acceptance that females will work outside the home and be partners in financial matters in the household constitute the modern elements, while the traditional division of domestic labour remains part of the structure. By combining old and new and creating new traditions, tensions about the trappings of modernity are diffused. In Zimbabwe, Chikovore (2004) found that “hybridity”, whereby new practices co-exist with old customs and beliefs, ultimately morphed into something else altogether. He says that, “Whilst some people may still cherish what used to be...material conditions have changed and new identities and relationships are being created and recreated” (Chikovore, 2004:45).

The value placed on a girls' virginity is something that students and key informants indicated has changed. In the context of HIV/AIDS it may be expected that waiting until marriage would be highly valued, as it would increase the chances of getting a STD and HIV-free bride. It used to be expected that a girl would be a virgin when "acquired" by a man. Nowadays, it appears that less importance is placed on this, at least by the younger generation who seem to view this requirement as outdated. Questionnaire results found that 77% of the sample believed that most girls have sex nowadays before marriage yet 62% reported that a girl would not be respected if she had pre-marital sex. In this way, girls may be caught because they know that boys want sex, yet many boys contradictorily desire and expect to marry a virgin despite the fact that these conflictual desires inherently mean a shrinking pool of virgins.

This should not be taken to mean however, that all young people are engaging in pre-marital sex. In one example of counter-normative behaviour, a boy in the mixed FGD spoke up about how his uncle's death as a result of HIV/AIDS two years ago had prompted his family to begin talking openly to him about sex. This is interesting, because the stigma associated with HIV often prevents people from speaking openly when they are personally affected. He indicated that he volunteered for the FGD because he wanted to tell others how they must be careful. He maintained that the only way for young people to protect themselves is to practice abstinence until marriage, which is what he was doing, because "you just can't trust any one now...there is no way to tell". Participants took in this information solemnly, respectfully and sympathetically but also silently. This points to the potential impact that trained peer educators could make, particularly ones whose lives have been affected is particularly relevant.⁸¹

The way in which times have changed was further highlighted by a boy, who explained that, "I can hope I get a good wife, she hasn't been sexing with someone. But today this is hard to find. I may take a girl who is not a virgin, but she must be very very good to take care of me". The way in which times have changed in this respect was met with conflictual opinions by girls. When the issue of virginity today was raised in the girls' single sex FGD, a rather lively debate was provoked when one girl waved her hand dismissively and said, "That used to be the way here, but not now. No girl or boy stays virgin for long". She was interrupted however, by another girl who vehemently disagreed, saying "You cannot say this. I will wait and I know of other girls who will too. My parents and church think it is important and so do I". Two of the girls started laughing and switched to Kiswahili, and when asked to explain what they had been discussing, one grudgingly explained

⁸¹ Setel (1999:91) asserts that personal experience will have the greatest impact on behavior, since in Kilimanjaro, "The AIDS educator's cookie-cutter abstractions of sex, sexual contact, and risk were virtually meaningless without being related to the context of some sort of story about people. In these stories, the actors were recognizable as possessing certain kinds of *tabia* and different kinds of *tamaa*, and as being in varying positions of risk".

that she had joked that the girl's boyfriend would have to masturbate hard and long to get satisfied if he stayed with her. The comparative openness and joking manner was surprising in the single sex FGD, in comparison with the mixed FGD. Notably, she did not address the issue of the desire of the girl in question; the focus was on the boys' pleasure.

It is often asserted that girls do not enjoy sex, and even if they did, their pleasure would be secondary to the satisfaction of their partners. However, at the conclusion of the FGD, the girls raised some unexpected questions related to masturbation. One girl boldly asked, "What do you suggest for us girls to get pleasure? It doesn't work to masturbate and if we are supposed to wait to have sex, what can we do?" This was striking, as it demonstrated the girls have as much interest in sexual pleasure as boys, though this is largely neglected, pointing to the need for sexuality to be addressed rather than addressing sex purely scientifically.

In terms of control of condom use, the data indicates that negotiating a condom is extremely difficult for girls for many reasons. For instance, 52% of boys and girls similarly agreed that boys should be responsible for wearing a condom, while 70% of all rejected the statement that it is the girls' responsibility. The issue of trust in negotiating condom usage seems to be an issue, which may explain why condoms seem to be male controlled. A majority (57%) of girls and boys indicated that if a girl asks her boyfriend to use a condom it means she doesn't trust him. Boys stated in the FGD that having *nyama kwa nyama* (meat on meat) is important, which also presents problems for negotiating the use of condoms.

6.5 Abusive Relationships

The following vignette is demonstrative of the need for programs to address abuse and to foster more healthy relations amongst young people, built on mutual respect. It also points to the need to heighten awareness and sensitivity to adults, especially teachers to these issues and situations young people face.

Vignette 1: Gang Rape (*Mtungo/Kubaka*)

One disturbing story emerged after administering the questionnaire. A boy in a wheelchair approached and asked if we could speak privately. He said solemnly, “Madam, if you want to know how AIDS is spread here, I’ll tell you a story. He then relayed an incident that had occurred some weeks before. An acquaintance was going to visit his girlfriend, with the intention of having sex with her in a “shack”. But he did not go alone—he brought 6 of his friends with him. When he finished having sex with her, he took her clothes and left the shack. Then, one by one the boys took turns having sex with her. When I asked the boy in the wheelchair if the girl told anyone about it, any teachers or authorities, he said “No. These girls, they do not know their rights. What would happen if they told? They would be shamed and embarrassed and maybe no one would believe or care. If the girl, she says something, their lives will be over and the boy knows this”

In critically considering the motivations behind this boy relaying the story, it was obvious he wasn’t trying to get anyone in trouble: he didn’t give any names for instance. No such stories were solicited and the topic wasn’t even raised in the questionnaire. It could be that he told it for the purposes of shock value. Alternatively, it could be a result of his situation; he is uniquely positioned because he is in a wheelchair, and has a special relationship with girls, he explained. They don’t see him as being after sex or having any ulterior motives, so they share their problems. He reported that he hears such stories from both boys and girls and said he didn’t really know why such things happen, but that one of the motivations a boy might have for doing this was to get revenge.⁸² He did not tell the story with emotion, but rather described it in a matter of fact manner, seemingly to educate an outsider on what, why and how things happen in the students’ world.

There would be more such stories to emerge during the course of the field work. Another boy laughingly told a story about a friend who attends a nearby boarding school. One night, after he became exhausted from having sex with his girlfriend, he got on his mobile phone and called up a friend living in a nearby dorm to take his turn with her. When I spoke to one of the teachers at the school about these stories, he did not express surprise, but rather one male reacted with:

“Ah, yes. *Mande* we call it in Kiswahili. It is translated as “many boys do sex with one girl”. It is happening yes. I remember when I was a student in the dormitories, sometimes the boys you know, they would hide underneath the bed while a boy and a girl had sex. If they got impatient (laughing), if the boy was taking too long, they would reach up from under the bed and give him a signal like grabbing his foot to finish quickly so they could take a turn with her. Sometimes, these boys you know, they make an agreement with their friends. They are not honest to the girl and they invite their friends along. The girl, she doesn’t expect it but then there are many boys taking turns sexing with her. Or its dark and she doesn’t even know. She might tell her friends but not authorities because she is ashamed and shy. I have a friend who works at the hospital in Mawenzi. He tells me that us teachers, we must talk to the students. They get so many girls coming there from the school for abortions”.

⁸² Other concepts related to *tamaa* (desire) are *nyege* (sexual excitement and uncontrolled lust associated with the bodily strength of youth) and *wivu* (jealously towards another person). Rape is often thought to be a result of these factors.

His nonchalant attitude in relaying the story was somewhat surprising. In addition, he shared a story that had taken place three weeks previous about a girl in Form 6 who had missed some important tests and was about to be kicked out if she couldn't account for her whereabouts. Eventually she confessed that 2 of her uncle's had been taking turns raping her. The school did not get involved because the family requested that they be able to handle the situation themselves. As this instance demonstrates, teachers preferred to revert to traditional modes of settling disputes and issues rather than rely on more modern approaches to dealing with abuse such as reporting to authorities and taking action through the courts. This point will be returned to again, but the above narratives clearly demonstrate that both teachers and the school have an instrumental role to play in condemning violence or abuse and protecting its students from harm whenever possible.

One further discussion with 2 male teachers who were curious about the research took a disturbing twist when they both doubled over with laughter upon hearing the some of the stories. One had the audacity to inquire whether or not I had ever "tried an African before" and if I was interested in it. The other queried whether or not I had a boyfriend, and seemed incredulous that we would be faithful after being so long apart during the course of the field work. Female teachers were unwilling to admit that such instances of abuse and rape take place. One commented that, "No please. This is not happening". This could be reflective of a woman not wanting to discuss such a topic, or related to the fact that she had never heard of it before. Most likely, she understandably did not want to discuss this with a foreigner.

In a short interview with the Acting Zonal Education Officer regarding policy and procedure for dealing with cases of harassment, abuse or rape, he flatly stated and signalled that the discussion was over with, "Girls nowadays are sensitized to speak about such things. If it happens we will find out and any illegal behaviour will be punished. It is 30 years in jail or more". It is possible and indeed likely, that he too did not appreciate such questions coming from this young, female foreigner. Openness has its bounds and limits.

Sexual harassment is a general term which encompasses any verbal or non-verbal unwanted behaviour causing discomfort or fear, for instance jokes, gestures, pinching and touching (Leach *et al.*, 2003). Abuse is a similar term which refers to any unwanted behaviour in which power relations are asymmetrical and can be either physical or psychological. While directly asking if either boys or girls had personally experienced either harassment or abuse was avoided and no personal experiences were shared (the third person was often used), the topic was covered in

general terms.⁸³ Though most studies that have been undertaken have dealt with harassment and abuse of girls, it is important to stress that this does not mean that boys do not have similar experiences.

Girls emphatically stated that if they were abused, they would not tell teachers at the school or even their parents. If they told anyone, it would be a close friend. When asked why, one girl reported that, “If you tell, no one will believe. If they believe, nothing will happen. I will be ashamed and embarrassed so why tell?” This emphasis on maintaining traditional silence around issues such as abuse may be impacted by increasing levels of acceptance and encouragement to discussing such issues, in line with what may be perceived as more “modern” style openness. The following vignette sheds further light on the reasons girls may have for not telling.⁸⁴

Vignette 2: Willing Participant or Coerced Victim?

This story was recounted by a German worker at a local AIDS awareness NGO. When passing through a nearby field close to the school grounds in the evening he stumbled upon a shocking scene. It appeared that 7 boys were taking turns having sex with one girl, while about 20 male onlookers stood observing. He chased the boys off in quick order. When he told the head teacher (who was male) the next day, the teacher questioned whether or not the girl was struggling, and implied that if not, she was likely a willing participant and dismissed it at that. Whether the girl was willing or not gravely misses the point, yet this lack of caring and concern for students’ wellbeing is demonstrative of the walls girls might come up against in reporting such incidents.

The point here is not to comment on prevalence of such incidents, rather the focus rests on some of the barriers to girls’ participation and completion of school as was mentioned in the introductory chapter. If safety and protection from abuse are not priorities at the school, how can it be regarded as a positive learning environment conducive to fostering behaviour change and challenging gender norms? One of many negative consequences of girls dropping out of school as a result of harassment or abuse is that they will have difficulty finding stable work and likely end up in the informal sector or possibly even engaging in transactional sex in order to make ends meet.

⁸³ The “sugar daddy” phenomenon (*awara* or *hawara*) has been a growing topic of interest in academia (Human Rights Watch, 2001; Leach & Machakanja, 2000; Leach *et al.*, 2003; Bledsoe & Cohen, 1993; Shumba, 2001; Silberschmidt & Rasch, 2001; Haram, 1995; Machel, 2001; Mgalla, Schapink & Boerma, 1998). This form of transactional sex seems to be most common amongst young women struggling to make ends meet, and is a form of coping strategy (Machel, 2001). Often these relationships which may be between a younger girl and an older man, even a teacher, exist for economic reasons—to have school fees paid, to get food and candy, clothes and shelter. In some cases, it was revealed that such relationships were even encouraged by parents who reasoned that the relation provided economic security.

⁸⁴ In a review of gender studies in sub-Saharan Africa, the difficulty surrounding the reporting gender-based violence is discussed. Reported cases are rarely followed up because they are viewed as belonging to the domestic and private realms of people’s lives. In the case of rape, stigma and fear of repercussions prevent the victim from reporting since in most cases the victim and perpetrator know each other (Adomako Ampofo *et al.*, 2004).

The inability of girls to openly express themselves and report such incidents highlights the need for HIV/AIDS educational programs to address this issue. The need for a more open, supportive environment is crucial to fostering greater communication between peers and between teachers and students.⁸⁵ One of the components of this calls for less rigid, authoritarian teaching styles which serve to erect and maintain a barrier between the teacher and students and fail to instil feelings of trust. In addition, although there does need to be repercussions for such behaviour, it has been suggested that it is counterproductive to simply punish boys who have harassed girls (UNICEF, 2003). This may only serve to heighten their hostility and anger. Rather, one of the goals of HIV/AIDS or life skills programming should focus on the benefits to be had by both sexes in developing more equitable relations.

6.6 Exploring the Sexual Double Standard

The sexual double standard, whereby it is acceptable and even desirable in terms of status for a man or boy to have more than one partner has been explored by a number of authors (Baylies & Bujra, 2000; Bledsoe & Cohen, 1993; Boler *et al.*, 2003; Gupta & Weiss, 1993; Liljeström *et al.*, 1994; Mzinga, 2002). However, the trend may not be as clear cut as has been suggested by some. Many key informants, including one female teacher as well as male and female students in FGDs conceded that it is not uncommon for girls or women to enjoy multiple partnerships as well, albeit in a more discrete manner. According to the teacher,

“Girls too have many boyfriends. A boy might have a girl at the school, in the city and at home in the village, but so might a girl. They are just more quiet about it. If they want to have some nice things they might ask one boyfriend for some necklace or something, another for some cake and another for whatever else they might want”.

In FGDs, reactions were varied. In the single sex FGD, the girls agreed that boys definitely have multiple girlfriends, but had mixed reactions when asked whether it was also common for girls. Two girls claimed that this never happened and that girls were always faithful to one partner, while the others admitted that multiple partnerships with boys are not uncommon. In the questionnaire, 81% of girls vehemently disagreed that it is ok for boys to have more than one girlfriend, but they should only have one, while a striking 73% of boys agreed that they should have the privilege of many girlfriends, but girls should not. The Kiswahili term *mlupo* or “player” was used by the students to describe such girls, though interestingly no similar name was given for such boys. The girls’ denial may reflect the desire to project and maintain the image of girls as being

⁸⁵ Although the reasons for its declining prevalence rates have been debated, it is clear that one of the cornerstones to the Ugandan success rests on the open environment that emerged as a result of high levels of political and societal support (Hogle, 2002).

good, pure and faithful.⁸⁶ Or, it might simply be attributable to the fact that not all girls hold the same values. FGDs with boys however, revealed that boys are much more open when it comes to admitting having several girlfriends and also assert that girls engage in it too. They claimed that girls often were just as bad as boys and that it is often assumed that your girlfriend is “sexing” with another boy and this is why boys must be aggressive and controlling. Their readiness to admit to having several girlfriends might be factual, or could be indicative of their desire to paint themselves as desirable to the opposite sex and uphold stereotypical notions of masculinity.⁸⁷

What was striking was how the informants suggested that the reasons for the multiple partnerships have changed over time. All agreed that men engage in sexual relationships for gratification and sexual enjoyment, whereas women’s reasons are more mixed and not necessarily related to sexual pleasure. Several key informants including teachers and local NGO workers indicated that in the past and still today, there is the group of girls and women that engage in sexual relations for economic reasons. Whether it is for money for school fees or other support needs, free transport, food and shelter, females generally have less economic and social power that is needed for them to provide for themselves and family. The questionnaire revealed that 54% of girls and 73% of boys agreed with the statement: girls often have sex just to get money or gifts, again reinforcing the stereotype that girls are materialistic and shallow. Thus, notions of “romantic love” from a Western viewpoint are often viewed as a prerequisite to a long-term relationship, but still seem to be tempered in many instances by a more pragmatic approach which takes into account a wider array of factors such as desire for financial stability.

However, one of the male teachers at the school made an interesting observation, which linked together with some comments by another female teacher to identify another group of girls and women whose motivation rests on different reasons. In confirming speculation that some of the Form III girls at the school were working as prostitutes in the evenings and on weekends at a local pub, the teacher offered this very interesting explanation which sheds light not only on Tanzanian culture, but also the mentality of some:

“It’s not about money for school fees or anything like that with these girls. I know that because I know their parents and their background. And our headmaster you know, he is very good about making special arrangement for those who can’t pay the school fee. In the last year I’ve observed that there’s a group of maybe 20 girls, no more, at the school and mainly in Form III that are working as luxury prostitutes sometimes. They go to places that may cost about 2000Tsh to get in so

⁸⁶ Haram (1995) found that moral space is more constricted for girls than boys, who are more easily labeled loose. Indeed, while it is considered adultery for a woman to engage in extra-marital affairs, it is more widely accepted behavior for men, who are considered to be naturally polygynous.

⁸⁷ Measure (2001) have compiled results from various studies on the topic of multiple partnerships, which indicate that they are common in both rural and urban areas. They recognize the inherent difficulty in measuring the trend and obtaining reliable estimates. It has also been suggested that it is difficult to accurately determine prevalence of multiple partnerships due to the fact that girls and women often underreport such behavior, while boys and men may overstate it.

they will get rich men. They charge 10 000 Tsh and do it for *starehe*⁸⁸. These girls care about having nice things, clothes, cakes, snack foods, cell phones and so on. (*Looking over his attendance records*) It's that same reason, this *starehe* that we have such a problem with students not coming to school and dropping out. Our country is not like yours, our people we don't take care of ourselves and think about the future as you do. *Ujamaa* has failed us in this way. It has taught us to be lazy and that we shouldn't worry because someone will feed us or take care of us if we can't or don't. Kids would rather sit at the bus station and hang around all day hoping someone will give them a few shillings than go to school. We just don't think about the future. Take for instance teachers' pensions. You can see this kind of mentality even in that. Teachers' are fighting because they don't want money taken off their salaries now. They don't think about the future. They only think that they want to enjoy the money and have some luxury now".

Setel (1999:98) likewise heard informants claim that, "Girl's today look for wealth (*utajiri*); they don't look for goodness or beauty. They do this in order to buy nice clothes and to feed their children well". In the discourse of *tamaa*, discussed earlier, girls and women are often portrayed as being more easily influenced by money and desire and lacking dignity (*heshima*) (Dilger, 2003). Furthermore, these urges grow the closer one gets to the city, perpetuating the idea that the trappings of modernity result in moral looseness, increased desire, and subsequently, more sex.

6.7 Coping with the Challenges of Youth

It is not always the case that sex is sold for money, however. As was mentioned previously, it can also be traded for certain commodities, such as sugar and free transport. Girls in the FGDs reported that their prime concern or challenge as girls was the *dala dala* (mini bus) operators and taxi drivers who are notorious for approaching them with offers while on their way to school (46% of girls indicated that they take the *dala dala* to school). All the girls laughed about the *dala dala* drivers and all of them claimed to have been propositioned at one time or another.⁸⁹ In explaining how a typical situation would unfold, one girl reported: "They say, there are 3 of us, do you accept? And the girl does. They go to the guest house and they each have sex with her over and over. For this sex thing, she gets free rides to school". No girl was asked or offered personal information on whether or not they had participated in such a transaction, but their awareness of the phenomenon and statements of concern about it may indicate that such offers are not uncommon.

⁸⁸ *Starehe*, as discussed in footnote 79 is a term used in various contexts. He also explained it can be about being idle and resting. *Starehe* is the title of a song currently popular in Tanzania, which is about how the pursuit of luxury and multiple partnerships results in one man being infected with HIV (see translation in Appendix 5). In a similar vein, Setel's (1996) findings support that locals in Kilimanjaro view AIDS as a disease of laziness brought on by development, marked by the shift from work on the farm to less physical, business oriented pursuits in the city that lead to an excess of desire, or *tamaa*. Haram (2004) also reports that women are often said to have excessive *tamaa ya starehe* (desire and demand for modern luxurious goods and commodities).

⁸⁹ One study in Tanzania by Wamahiu and Chege (1996) investigated risky sexual relationships young girls had with "bus conductors" in exchange for free rides.

Boys reported that amongst their greatest challenges and concerns, some found it difficult to “satisfy a girl so she won’t go looking”. The complained that girls nowadays want “this and that and everything, you know?” One boy jokingly claimed that in order to get a good girl to stay with you, you need three things: money, money and more money. Another explained that, “It’s kind of a race or a competition. Everybody wants the best girl so you have to get money somehow, work or do something”. Half of the boys in the FGD reported doing some kind of work in the informal sector such as husking corn, slicing pineapple or selling popcorn at the bus stand after school and on weekends in order to have pocket money to surf the internet or buy a girl gifts or food.⁹⁰

More short-term, immediate concerns were expressed by young people. Grasping the long-term consequences of HIV/AIDS may not be a prime concern when there are seemingly more pressing issues at hand. Pregnancy for instance, may be perceived as a more realistic, life altering concern for young girls than acquiring HIV/AIDS. Particularly at the poverty level with women engaging in commercial or transactional sex, issues such as daily subsistence and shelter may take precedence over abstract, distant dangers such as HIV/AIDS which may take their lives in 5 to 10 years. The next section will discuss how students’ perceive their susceptibility of HIV/AIDS.

6.8 AIDS as a Source of Concern for Young People

Strikingly, when asked about the challenges and concerns facing them today, it was not fear of contracting HIV/AIDS that was focused on or even mentioned for that matter, as was discussed above. As discussed in Chapter 3, risk is a highly contextual concept, and the risk perception of young people may influenced by innumerable factors. For instance, other more immediate concerns may take precedence, such as pregnancy. Thus, despite concerted efforts by prevention programs, other more pressing concerns may be prioritized. Indeed, some young people may even be drawn to risky situations and enjoy the idea of courting risk and what they view as being chance.

One boy made reference to the popular song *Starehe* that could be heard blaring from the roadside vendors selling cassettes. One section of the chorus *Ninao, ninao, ninao* (I’m positive, I’m positive, I’m positive” was sung and hummed over and over by people on the streets. He indicated that AIDS is just like Ferooz (the singer) laments: it is like getting zapped by electricity or lightning (*umeme*). According to him, “If it hits me, what can I do but wait to die slowly? I cannot worry about...what I don’t control. I just have to hope that, God let’s me live a long and happy life”.

⁹⁰ Amongst the Meru in Tanzania, Haram (1999) reported the significance of gift giving and the reciprocal nature of sexual relationships expressed as *nipe nikupe* (give me so that I give you). Indeed anthropologists and exchange theorists have long focused on the central role of gift giving maintaining cohesion in social life (Wallace & Wolf, 1991).

This mindset in Kilimanjaro that AIDS is like an accident and therefore not something that one can control was also found by other researchers (Setel, 1995b; Haram, 1999; Moland, 2002, Bujra, 2000), where it was claimed that AIDS is like a road accident (*kupata ukimwi ni ajali kazini*)⁹¹-it arbitrarily strikes and you die. This boy's attitude is also likely related to the view that AIDS is someone else's problem, is out of one's control, or be attributed to the fact that only one person in the FGDs reported knowing someone infected with or who had died of HIV/AIDS. It might also be linked to notions of invincibility often held young people.

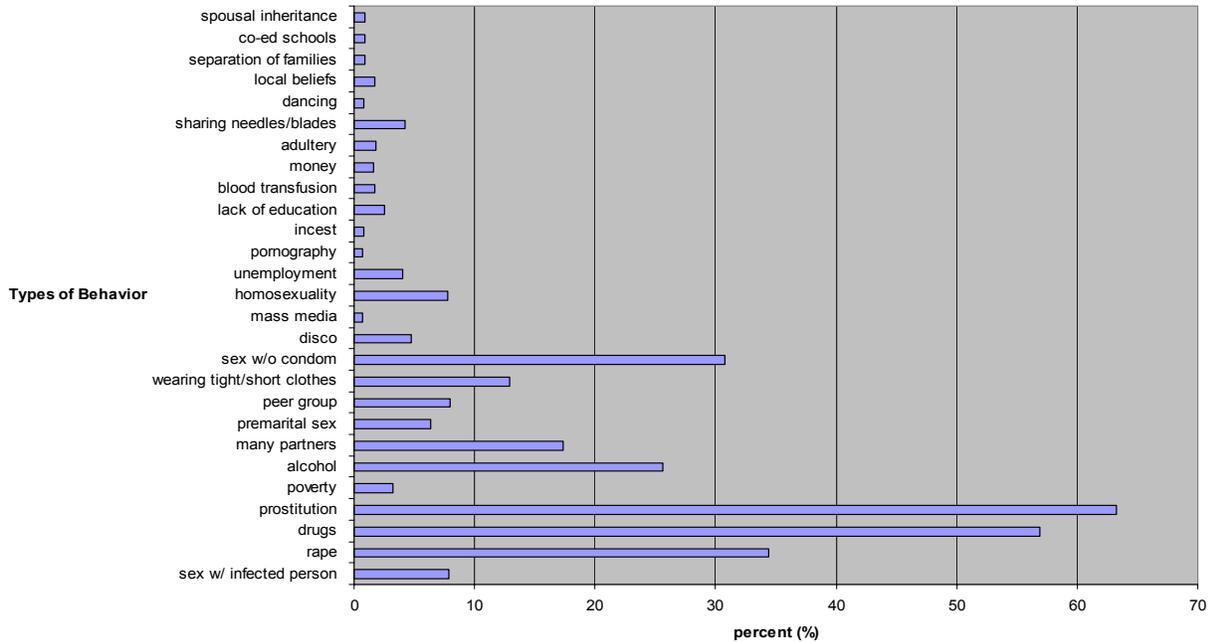
Results on students' risk perception were mixed. Both the quantitative and qualitative data indicates that students see HIV as someone else's problem. In terms of a gender stratified breakdown, 58% of girls saw themselves as either being at no risk or very low risk of contracting HIV, while 54% of boys perceived themselves to be either at no or very low risk of HIV.⁹² Similarly, they did not see their fellow classmates as being particularly at risk either, with 30% of girls reporting no or low risk and 29% of boys reporting the same. The sexes each seemed to view the "other" as being more at risk than themselves with 56% of girls stated that they thought boys were at greater risk of HIV than them, while 84% of males thought girls were at greater risk. There was however uncertainty in regards to the statement: There are more girls in Tanzania with HIV/AIDS than boys. A large percentage (44% and 39% for girls and boys respectively) indicated that they weren't sure or didn't know and 34% of girls agreeing, and 49% of boys agreeing with the statement. Generally, in FGDs students seemed to be aware that girls are more at risk of HIV/AIDS than boys, though they were not able to articulate their reasoning based on biological, social and economic reasoning. One boy explained that, "Madam, one boy can service many hundreds of girls in a short period of time, so girls are at greater risk". This comment is one exemplification of the idea that boys have many girlfriends and are free to have sex with whomever they please.

When asked to list 3 risky sexual behaviours that could lead to HIV/AIDS, Figure 4 shows that an incredible array of responses (grouped into 27) was recorded.

⁹¹ Or it is often likened to El Nino, which wreaked havoc in Africa and Tanzania in 1997 (Haram, 2004).

⁹² In Tanzania, one study has shown that only 5% of young Tanzanian's see themselves as being at risk (USAID, 2004).

Figure 4: Risky Behavior in the Context of AIDS



Although the question asked for examples of risky *sexual* behaviour, it was interesting to note that the question elicited some rather unexpected responses, including: poverty, peer group, unemployment, incest, lack of education, blood transfusion, money, dancing, local beliefs, separation of families, co-ed schools, and spousal inheritance. Figuring in most prominently were prostitution (mentioned by 63% of respondents), drugs (57%), rape (34%) and sex without a condom (31%). Receiving lower scores, students listed having many partners as being risky (17%), curiously wearing tight/short clothes was listed by 13% of respondents, and homosexuality was cited as constituting a risk factor by 8% of respondents.

6.9 Sources of Information about Sex, Condoms and HIV/AIDS

Young people today live in a confusing world of mixed messages, contradictory messages and even no messages in regards to sex, condoms and HIV/AIDS, which does not make it easy to make wise, informed decisions. Given the statement “What I have learned about sex from my parents is different from what I learn at school”, 53% agreed. In terms of their prime source of information about sex, 52% of girls reported the school to be their prime source, but only 21% of boys reported this. When this discrepancy was probed in the single sex FGD, boys indicated that mass media and their friends were the most sought after for information. In the case of girls, it may be that their questions at home are met with silence. Indeed, only 21% of the entire sample indicated that they could talk openly about sex at home. When asked who they wouldn’t trust as a source of information, boys agreed that they had contradicted themselves: despite the fact that they

would not trust their peers to give them correct information, they seek them out for their opinion and information, most likely due to peer pressure to openly discuss their relationships with girls. When girls indicated that they trusted everyone but boys, one girl explained that “They lie so much. They’ll tell you anything to get to do that thing with you”.

It seems likely that the more educated the parents, the more apt they are to be more open to discussion on such important topics. Given that these students are the offspring of relatively well educated parents, the implication that the lines of communication are not open does not bode well for the majority of children whose parents haven’t had the benefit of education.

In discussing how sex education has changed, one male teacher explained:

“We used to have informal education special for youth, both boys and girls. In Kiswahili it is called *jando* and *unyago* (initiation and circumcision). This sex education does not exist so much anymore. The parents and families don’t talk to their children. They are too embarrassed and shy. But they don’t learn about it either in the school so much. These young people today are lost. How do they learn about sex? They experiment, that’s how”.

His opinion echoes the sentiment cited in the beginning of the chapter: social dislocation brought on by modernity mean that young people are no longer connected to their roots and traditions and are consequently left on their own to figure things out. This is debatable of course; many would argue that the void has been filled by other influences coming from mass media, schools, and parents in some cases, peers, the religious community and other community health services. And perhaps not all would lament the loss of customs, traditional rites and ceremonies. Indeed, some may accept the notion that some aspects of the past are undesirable and dangerous in the context of HIV/AIDS.

When asked if young people believe in witchcraft⁹³ for example, one boy had this to say: “This still exists today, true...but people now we go to the dispensary, the doctor and that is what makes us better. People today know... it is just superstition”. But according to another boy,

“Well some you know, they try it and it works. A doctor told a friend that he had syphilis so my friend, the first thing he do is go to the witchdoctor to get better. A few weeks later he did. But then he got really sick and the thing the witchdoctor did, it didn’t help, so then the doctor, he made it better. Some people will try anything, but it does not mean they...believe in it really”.

⁹³ There is often confusion about definition and function of “traditional healers” (Erdtsieck, 2001). The term witch doctor is sometimes synonymous and interchangeable with traditional healer, shaman, diviner, medicine man, spirit healer and herbalist. In Kiswahili the term used is *waganga* (singular: *mganga*), from the verb *kuganga* which means to heal or cure (Erdtsieck, 2001). Those who combine a number of methods are called *waganga wa pepo* (meaning healers who are inspired by spiritual or unseen forces) and may use amulets, charms or medicine to guard against spirits.



Roadside pharmacy in Moshi

One girl similarly suggested that when a person really wants to get better and is desperate, it is first the doctor one goes to, but if that doesn't work, the person will try anything. In any case, along the road sides in Moshi it is not hard to find a small table sporting a wide array of curious looking jars filled with concoctions designed to cure what ails you. In relation to HIV/AIDS, one Tanzania also explained that many people believe that if you get AIDS, you've been "bewitched". The extent to which people consult "witchdoctors" or other forms of traditional medicine is not entirely certain, but it is clear that traditional and modern medical practices coexist in Tanzania.⁹⁴

6.9.1 Mass Media

One study by Masatu, Kvåle & Klepp (2003) of young people in Arusha found that while the media ranked first as a source of information on reproductive health matters, followed by teachers and health workers, it scored low in terms of perceived credibility in the eyes of the adolescents who viewed teachers and health workers as being more credible. In Tanzania, there are a number of educational TV (*Ukimwi ni Huu* or "This is AIDS" is one example). and radio programs (*Mazungumzo Kuhusu Ukimwi* or "Talk about AIDS" on radio one and Mama Teri's program providing nutritional advice and so on) that deal with issues such as condoms, premarital sex, HIV, stigma and gender violence.⁹⁵ *Femina* is one Tanzanian magazine and television talk show that deals with these topics as well.⁹⁶

Issues surrounding access to various forms of mass media highlight the strong urban-rural disparity in Tanzania. While those living in relatively urban areas such as Moshi are exposed to messages on billboards, have cheap access to internet (800-1000Tsh/hour, 80 cents-1 dollar), and have items such as television, their rural counterparts do not. Even if they did, it is unlikely that they could relate to the images far removed from their daily reality largely presented by the media

⁹⁴ Masatu, Klepp & Kvåle (2001) published a paper detailing the utilization of health services among primary school students in Arusha, Tanzania that confirmed that adolescents are satisfied with and utilize modern health services, while a smaller percentage seek out traditional health services.

⁹⁵ Studies on "Entertainment Education" for instance, have explored methods of reaching out to communities' via media. In Tanzania, Vaughn *et al.* (2000) have conducted longitudinal studies on a radio soap opera called *Twende na Wakati* (Let's Move with the Times) and found positive results: a reported decline in number of sexual partners for both sexes, and increased condom use with exposure to the soap opera. Paradoxically, the strength of the mass media is also its Achilles heel: surveillance of a mass audience is not unproblematic (Wellings & Macdowall, 2000). Increasingly, the complexity of the interaction between the mass media and the audience is being understood as being more than purely linear and the difficulty of measuring the effect has been noted (Lupton, 1995).

⁹⁶ See the website www.chezasalama.com.



Ishi condom ad: “Usione Soo!” Don’t be shy!

which often use photographs of Tanzanians dressed in Western attire, for instance. The Internet is fast becoming one of the most sought after sources of information about HIV/AIDS and sex. Students, particularly males stated that much of the information they get about sex comes from the Internet, often from pornography sites. In recognition of this, nearly all Internet cafes in Moshi have posted signs declaring them to be porn-free zones and that users accessing such sites will be asked to leave. Pornographic magazines are also readily available, if one knows where to ask, one boy explained.

The intersection of tradition and modernity is particularly prominent when considering the open, blatant sexuality which often emanates from the mass media. Despite the positive contributions of the media to HIV prevention and other important social issues, the media was often used as a scapegoat by students and key informants and linked to damaging Western influence on traditional culture; increasing promiscuity through the prevalence of music videos parading scantily dressed young women (J-Lo for example), songs about violence against women (such as Eminem) and casual sex, the advent of the Internet and proliferation of pornographic material both on the net and in print, are seen to have marked an increase in the desire for material possessions affecting ones *tabia* (moral character, bad or good) and *tamaa* (desire) (Setel, 1996).⁹⁷ The example is given that you can’t desire a ‘Benz unless you’ve seen one before. Thus, in contrast to the traditionally taboo nature of sexuality, young people now see it open displayed, heavily laden with implicit and explicit messages regarding female and male sexuality.

The *Ishi* condom campaign is one example of a positive contribution. *Ishi*, which means “live” in Kiswahili was created by TACAIDS and receives support from a number of organizations (USAID, 2004). Through the use of billboards, TV airtime, advertisements in print, community drama and musical happenings, the campaign utilizes the typical ABC approach and stresses the messages *Usione Soo! Sema Naye*, meaning, “Don’t be shy, talk to your partner”, *Subiri au tumia kondom kila wakati*, “Wait or use a condom every time”.⁹⁸ The ads feature a healthy looking young man and woman, likely hoping to challenge the notion that you can tell whether or not a person has

⁹⁷ Hence, the media are often simultaneously “denounced as channels of propaganda” and “praised for their potential to persuade people on a mass scale” (Lupton, 1995).

⁹⁸ Haram (2004) points out that campaigns should not be based on the assumption of the autonomous individual. Slogans such as ‘zero-grazing’ and ‘stick to one partner’ might appear to make logical sense, but in fact do more harm than good, particularly for women, given that they largely ignore the socio-economic factors that drive the epidemic.

AIDS by looking at them. One of the strengths of the campaign is that it is spearheaded by a group of youth who receive input from NGOs, the government and other stakeholders.

6.9.2 Schools⁹⁹

According to the Education Sector Development Program, developing a HIV/AIDS educational program at the primary and secondary school level is underway as was stated in Chapter 2. At the secondary school level, the current syllabus for Biology indicates that students are to learn about HIV/AIDS in Form II and again in Form IV. However, the messages that are sent are likely to be highly dependant on a number of factors, such as: teachers' knowledge, comfort level and beliefs, the schools' religious orientation, the parental community, resources and time.

Within the case study school, which is Catholic, there was tension amongst the biology teachers as to what students should learn and the level of openness in which they should discuss sensitive issues with students such as HIV/AIDS and sexuality. The two male biology teachers represented opposite ends of the spectrum: one was young with a nurse for a wife, which may have influenced his belief that schools should play an active role in educating students about sex and HIV/AIDS. The other was older and more authoritarian, often seen herding students around with a decidedly large stick. According to him, it is not the role of the school to teach about "this sex business". Another teacher explained that because parents are too shy to talk about taboo issues like sex, the school is best placed to do it. But he says, "This is a poor country you know. We just don't have the resources. Teachers don't know what to teach about AIDS or how to go about teaching it. When it comes to implementation we run into problems. We need teachers with special training".

Another teacher said he didn't think female teachers could do the job and commented that, "Female teachers are cowards when it comes to such things. They are less likely to feel comfortable in talking about sex with students. They are more shy than male teachers". The belief that females are cowardly came up several times during the course of the field work. When asked how she felt about being labeled in this manner, one female teacher laughed and said, "Someone really said that? (laughing). Well then, let's put him in the classroom and have him teach about that thing (sex). I think you'll find he cannot do the job either. It is not our culture, it is not our way. Men are just as shy, maybe more than women".

⁹⁹ Although the central focus of this thesis is on school-based education, the importance of various forms of informal and non-formal education cannot be overstated. There are currently over 44 million young people out of school in sub-Saharan Africa alone, 53% of which are girls (Jellema & Philips, 2004). Since many drop out of school and may be illiterate, they may not receive crucial information about HIV or how to protect themselves, which is why the COBET program described in Chapter 2 is a welcome initiative.

Students resoundingly indicated that they believe it is important that the school teaches about HIV/AIDS, with 94% of the sample in support. They stated however, that one problem with school-based education about sex is that while teachers *might* tell you about condoms they never show how to use them. In mixed FGDs, one girl said a boy may carry a condom with him but when he gets excited he forgets to use it (or only uses it the first time). According to another girl, “Boys only want *nyama kwa nyama* (meat on meat). A condom, it takes away pleasure”. Boys laughed and agreed, stating that sure, they knew how to use a condom, who didn’t? But they indicated that *nyama kwa nyama* was much nicer. In the single sex FGDs however, boys confessed that they didn’t know how to use a condom and had never seen a demonstration. Their unwillingness to admit to not knowing how to use a condom in the mixed FGDs highlights the fact that many do not want to show their lack of knowledge when it comes to sex. Therefore, they may come up with alternative reasons why not to use them, such as that it diminishes their pleasure.¹⁰⁰

6.9.3 Parents

Discussions between parents and their children about sexuality, HIV/AIDS and condoms are difficult in many societies. With the exception of one boy, mentioned earlier in relation to abstinence, and one girl, students indicated that they do not communicate with their parents about sex, condoms, and HIV/AIDS. The girl explained that her mom was a doctor and told her all about sex and her body, but that her dad who was also a doctor steered clear of such discussions. One boy explained that, “It is not our tradition, our way to talk about this. You just don’t. You keep it to yourself and this is how our culture works”. When asked if they wished they were able to have a more open relationship with their parents, again all students agreed, with one girl sighing and stating that:

“One day I came to my mom in the kitchen you know, and I started to ask her something about that thing...and she pretended not to hear me and told me to start helping her with the dinner and stop talking so much. I tried again but the same happened and I just know I shouldn’t ask anymore. When something comes on the TV that she don’t like, something about that thing (waving her hand), she just changes and does not say a thing about it”.

Judging from her use of the phrase “that thing” instead of saying sex (which was very common amongst both female students and teachers), it may be that her mother’s discomfort in talking about sex has impacted her comfort levels. She stated that her aunt was easier to talk to and that instead of talking to her mom she would now go to her aunt if she had a question about her period or sex, which indicates that in some families the role of the aunt as sex educator may still be in place.

¹⁰⁰ As Lupton (1995) explains, if the dominant modes of understanding sexual desire focus on the uncontrollable nature of passion, stopping to use a condom introduces a self-consciousness and rationality to the activity.

From a parents' perspective, the female parent indicated that, "From 10 years she is my friend. If he is the boy he is still my friend. If I can tell them that which will help them I must. You can teach them about other ways than sexing. You can teach them if they just go out and do other things to keep busy they don't have to sex". More work in this area could yield positive results on many fronts: fostering better dialogue between parents and their children would likely be a mutually beneficial exchange of knowledge.¹⁰¹ It may also serve as an impetus for structural change within the family unit regarding gender roles and break the silence surrounding difficult issues.

6.9.4 Peers

Students' all agreed in FGDs that one of their prime sources of information about sex, condoms, and HIV/AIDS is each other. Girls indicated that they trusted their close friends with information and questions about their relationships and fears. When asked if boys talked to each other about sex the boys squirmed uncomfortably while looking at each other. One spoke up, saying that, "Of course you tell your friends if you've got a girl. You have to watch out for each other that you only get the good ones and you...count on your friends".¹⁰² Suggesting that boys compare notes on girls and judge or label them as being either "good" or "bad" prompted one girl to fold her arms across her chest and indignantly say "well we do the same about you boys you know".

Discussing condoms and AIDS seemed not to be on the agenda when consulting peers. When asked why not, one boy shrugged and explained that:

"It's not my problem so why would I concern to talk about it with a friend? My girlfriend and I are together more than 8 months so it...isn't something we think about really. I did have one friend though, he asked if I had a condom so he could sex with this girl, but I told him I don't need it. But it's more like...you can ask a friend if you have a question, but they might laugh or think you are stupid or something. Or he might tell you something totally wrong".

Peer influence is a compelling force in young people's lives and while it can be dangerous when levels of ignorance and confusion are high, the persuasive influence of the peer group can also be harnessed to play a positive role in conveying accurate information about sex, condoms and HIV/AIDS. As discussed previously, peer educators have been identified as having potential for HIV/AIDS education. Holding up peers engaging in counter-normative behaviour as positive role models may also serve as a catalyst for change in fostering more equitable gender roles and norms.

¹⁰¹ One local NGO in Moshi working hard to open a dialogue with parents is White-Orange Youth. The organization tries to get parents to participate in evening education sessions. One of the founders stated that, "At one of our evening sessions a number of parents walked out when we began the condom demonstration. There is a lot of distrust about condoms here. But mostly, they want to learn and have many questions".

¹⁰² Dilger (2003) likewise reported that the Luo boys carried out "investigations" (*kuchunguza*: to look carefully; to spy) and consulted with each other concerning their perception of the moral character of a girl.

Peer influence when it comes in the form of pressure however, can present serious challenges that may undermine the successfulness of HIV/AIDS educational program. An unanticipated response listed “peer group” as constituting a risk factor in contracting HIV/AIDS. Pressure to conform to masculine stereotypes is one example that may lead to risky behaviours such as smoking, drinking, drugs and unprotected sex. Indeed, in response to the statement “Boys are more likely to drink alcohol and do drugs than girls are”, both boys and girls (90%) agreed. Perhaps this is reflective of the masculine stereotype as being reckless, free and wild, or indicative that boys suffer more from peer pressure than girls do.

6.9.5 Religious Community

“An uproar about condoms is good, because it gets people talking, where before there was silence.” (Rev. Jacob Kahemele, Anglican Church of Tanzania, cited in YouthNet, 2003:9)

The religious community is highly influential in Moshi, and has the potential to play a positive role in stimulating a more open dialogue about traditionally taboo topics, as well as fostering care and de-stigmatizing those infected with HIV. However, the community also has been known to have a damaging impact. It was puzzling at first to hear so many students and NGO workers cite almost verbatim the view that condoms are ineffective given that they are transported in containers and undergo extreme heat fluctuations en route from Europe, and that the HIV virus is small enough to pass through them.¹⁰³ According to one male student,

“It is scientifically proven you know. Any material that can stretch has pores. The HIV virus is much smaller than these pores. It is so small, no condom can stop it. If used properly, a condom may prevent a girl from getting pregnant...it might. But AIDS? No way a condom can save you from that. Some even believe the condom has AIDS on it”.

When the root of these convictions became clear, it was not surprising. Each year in Moshi, the Catholic Church holds a seminar for teachers, who then disseminate the information to colleagues and students. Having obtained a publication from one of the seminars, it became obvious the incredible influence the church wields in the community. According to the publication (1993:62), “The bottom line to the failure rate is that condoms are oven-baked, french-fried and frozen stiff”. They further contend that,

“The HIV virus is very small in size. This virus is three times smaller than Herpers (sic), 60 times smaller than the spirochete that causes Syphilis, and 450 times smaller than Sperm. Small particles such as virus can pass through the “pore tears” of a good condom as well as a “cracked and dried out” one. Why are teenagers and young adults who are urged to carry a condom in their wallet for “safe sex” not made aware of the size of the HIV virus?” (1993:63)

¹⁰³ Serodiscordant couples are those in which one partner is HIV positive and the other remains uninfected while they continue to have protected sex over a period of time. Trials using these couples have demonstrated the efficacy of the condom when used properly can prevent the spread of HIV (Davis & Weller, 1999)

In addressing the issue of contraceptives, they maintain that,

“Since the market for contraceptives in the Western countries is dying, therefore the factories are looking for new market in the developing countries, to make (biashara) business (sic)...Their motto is “Create a disease, then cure it, then repeat it”. Money is made in creating the problems, money is made in curing it” (1993:63).

The “West” is also highly criticized for importing value laden sex education programs:

“Another wrong step usually proposed by the Western Countries is Sex-education or family life education in the modern style of the Western World...Their plane for the youth (your children) is oral and anal sex, group sex, even sex with animals ect...These sex-educationists come from the Western Countries with a team and a lot of money paying for the whole sex education program without informing the local people about the content of the syllabus, with little or no respect to UTAMADUNI and MILA (Tradition and customs) of the host nation” (sic) (1993:64-65).

This publication in 1993 was still being quoted during the field work in 2004, highlighting that the long lasting influence of the church cannot be underestimated, and HIV/AIDS programs must find common ground with religious leaders who enjoy the trust and respect of the people.

6.9.6 Making Sense of It All

It is clear that students perceive substantial differences in the gendered messages and information about sex and gender roles they receive at home, at school and in the wider community. This is particularly evident in their understandings of masculinity and femininity which are played out in their relationships with each other and their desire to merge elements of tradition and modernity. How views and norms are evaluated, which are adopted, and which are discarded impacts their risk profile. For instance, if they agree with the view of the church that condoms are ineffective or contain the AIDS virus, they are more likely to become infected through unprotected sex than if they believed the *Ishi* condom campaign. Similarly, if their parents value abstinence, yet their peers do not, they face a set of contradictions from which they must choose. Program planners need to be cognizant of the “moral regimes” as Ählberg (1994, cited in Dilger, 2003) puts it which compete to impact values, attitudes and behaviours. Ensuring that a coordinated, consistent, correct and perhaps appealing¹⁰⁴ message is sent to young people is crucial, and will be dealt with in detail in Chapter 8. The next chapter will deal explicitly with the school as a site of production and reproduction of gender norms.

¹⁰⁴ When the peer group is highly influential, campaigns have sought to make the message more palatable to youth, such as in South Africa where it is stressed that condoms are cool, coming in different colors and flavors to encourage their use. Programs making use of peer educators are stressed as being important for this reason, since if young people can see peers engaging in healthy sexual, often counter-normative behavior they are more likely to “follow the herd”. Sociologist Peter Blau asserts that collective values may emerge as a consequence of peoples dislike for social or cognitive dissonance as described in the introductory chapter (Wallace & Wolf, 1991).

Chapter 7: Schools as Microcosms or Catalysts of Change?

“It is not until one looks at some signposts from the wider social world beyond classrooms that one begins to see the gendered relations embedded in classroom lessons”. (Stambach, 2000:124)

Having discussed gender and power relations in the school in Chapter 3, and the conflictual nature of young people’s experience and treatment in the home compared to the school in the last chapter, this chapter aims to look more closely at the school in order to ascertain what kind of environment it is for both girls and boys, and how teachers, students and structures found within the school sustain or challenge gender norms.

Schools are sites where it is possible, through micro lenses to glimpse the similar macro structures found in wider society. As such, schools can be considered to be microcosms, which depending on the school exhibit to a certain degree, similar structures and characteristics found in wider society. Therefore, investigating the procedures, practices and rules within an educational institution may yield findings that mirror patterns found in the surrounding community and society.

In relation to gender, Connell (1987) asserts that schools can be viewed as one example of a compact institution with clear “gender regimes”. According to Amy Stambach (2000:3), “...schools are often pivotal social institutions around which the configuration of society as a whole is imagined, contested, and transformed, and that schooling provides one of the clearest institutions for observing debates about culture, generation, gender and history”.

In discussing the school as a social system which has historically been charged with socializing students so that they internalize and adopt the standards and customs of the majority of the society they live in, Darnell & Hoëm (1996:265) conclude that “On the macro-level the school can be understood as a social system which constitutes a subsystem of the total society. When so composed, it is the degree of integration between the sub- and total system that determines the way and extent to which the subsystem will function”. From colonial times onwards in Tanzania, schools have taken on this function of preparing students for life as productive members of society. The analytical framework can be as broad as to view the subsystem as the educational system and the total system as wider society. Alternatively, the framework can be narrowed to view the subsystem as comprising a single school and the total system as being the educational system of a region, district or nation. What is central to the analysis they assert, is that the school must be conceptualized as being part of a larger system (Darnell & Hoëm, 1996).

Though it was argued in the methodology chapter that the case study school cannot be viewed as representative of all Tanzanian schools, it nevertheless contains elements found in wider society. In general, though the school seemed to be superficially equitable in some respects, there

was some evidence of latent power structures and inequality that lie beneath. The lack of explicitly gendered messages is undoubtedly attributable to the short time frame of the field work, and it is likely that in an extended period of time, more instances of gendered treatment would emerge.

This chapter seeks to examine ways in which the school environment imparts gendered messages, for better or worse, to its students. Both the formal and informal (or “hidden”) curriculum and practices will be scrutinized, and the second research question designed to probe this topic is:

To what extent does the school environment send implicit and explicitly gendered messages to students that might be harmful and limit the success of HIV/AIDS educational programmes?

The sub-question was:

How are gender issues incorporated into HIV/AIDS education classes in terms of content and teaching methodology?

As discussed below, it was not possible to observe classes directly, thus the main sources were the teachers and syllabus. Although it would have been ideal to triangulate the data with observations, the presence of a researcher in the classroom may have influenced the interactions and influenced the outcome.

Supplementary information that contextualizes the case study school will be followed by a look at how HIV/AIDS has (or hasn't) been integrated into the curriculum. The next sections will look at how gendered messages, both explicit and implicit were found in the school. The issue of corporal punishment and the implications of it for fostering an open and caring environment will be discussed followed by a summary of the chapter.

7.1 The School Environment



The link between English and success.

The school environment has a clear focus on academic excellence and prides itself on its performance in the national examinations. An integral part of that excellence is dependant on students' English language capabilities. As a result, students are bombarded with messages imploring them to speak English. Signs painted with the following messages can be found nailed to numerous trees and buildings: *Good English =*

Good Performance, Our language here is English, and No English No Service.

The library and student text books are impressive and up-to-date, with most coming from the headmaster's personal contacts in England. Although there were no glaring gendered depictions or references in the book, the models featured in the book were entirely white (not even representative of Britain's own ethnic composition). However, according to Omari & Mbilinyi (2000), there are aspects of the curriculum in Tanzania that perpetuate gender inequity, such as the selective choices of heroes and historical figures almost exclusively focusing on men's contributions. In addition, illustrations in science and math texts often contain only images of boys and men. Where females do appear, it is in their traditional domesticated realm, thus reinforcing stereotypes. In addition, there is a computer room with approximately 40 computers and in general the facilities are very good. The school is extremely fortunate to have enough desks and chairs given that elsewhere in the region and nation, there is a shortage so students must share.¹⁰⁵

Though disciplinary problems are mostly of a minor nature (truancy and tardiness), one disciplinary problem a male teacher confessed that the school has recently been experiencing that a number of students had been skipping school and going to have sex in cheap hotels or guest houses in Moshi. This again points to the fact that the students in this case study may not be representative of their counterparts across the country, as most are unlikely to be able to afford to take a girl to a guesthouse. The teacher explained that this was probably the reason so many girls dropped out of school nowadays, because they got pregnant. When asked if a pregnant girl would be allowed to remain in school to finish her education if she wished or if she would be kicked out, he admitted that she would because, "...well, what kind of message would that send our other students? She will choose to go anyways".¹⁰⁶ In regards to boys, he explained that, "If we found out about the boy we might expel him too, we have got a few boys that have been going to the hotels. But when a girl just turns up pregnant...it never works that way, the girl don't talk and he won't either".

This kind of attitude demonstrates how it is usually girls who are stigmatized and bear the consequences of sexual relations. Their reputation is more likely to suffer, while boys' reputations might actually get a boost in the eyes of their peers and other girls who admire that they can afford a hotel or guest house. In addition, girls may get pregnant and be forced to quit their studies, thus limiting their future employment prospects, while at the same time having to care for a baby, quite often alone. The girl must endure all the consequences, while the boy is typically left to pursue his studies without any social or economic repercussions.

¹⁰⁵ Although some districts experience a shortage, others have a surplus. In Moshi Urban, there was a 13.5% shortage of desks in primary schools in 2000 (KSEP, 2002).

¹⁰⁶ A 1996 law in theory permits returning to another school after a maternity absence. No law thus far has been passed to prevent the expulsion of girls from school, though the MoEC recognizes that it is not proper to do so (Garbus, 2004)

7.2 HIV/AIDS in the Curriculum

The first teacher at the school with whom this study was discussed, looked embarrassed and ashamed when asked about how the school teaches HIV/AIDS. He stated that he was aware that various NGOs had visited schools in and around Moshi, but in the 10 years he had taught at this school, no one had come to his knowledge. Despite the fact that this school is located within Moshi urban district and not Moshi rural, they hadn't been targeted for intervention for some reason. This is likely not atypical, and highlights the importance of coordination amongst NGOs and donors to ensure wider coverage.

It was the headmaster who explained that students are first taught about HIV/AIDS in Form II biology class and again in Form IV. As stated previously, a discussion with the two male biology teachers revealed that unfortunately, HIV/AIDS was not going to be covered in the curriculum until next term when the field work would already be completed. The syllabus and textbooks, apart from discussions with teachers and students were the only sources of information available. The latest curriculum guide was issued in 1996 and teachers were unaware of when the next one would be issued, but suspected it would be in 2006. When asked if they knew whether or not the Ministry was planning to introduce a formal HIV/AIDS class into the curriculum and mandate appropriate teacher training into the colleges, nobody had any answers.

This lack of awareness of what is going on in the MoEC might indicate a lack of coordination and a break down in the hierarchy or might be attributable to high levels of decentralization. Such linkages, between the ministry, the district and regional officers, the headmasters and the teachers themselves, are extremely important not only to keep teachers up to date on developments, but also to include them in the process.¹⁰⁷ Lack of resources may prevent this however, and this lack of awareness may only be reflective of the case study school.

In Sub-Topic 4.2.1 which addresses the concept of good health, one of the teaching/learning strategies suggests that teachers lead students to brainstorm on common reproductive health practices in their localities (female genital mutilation, circumcision, spousal inheritance and spouse beating), with the teacher to prepare a case-study on one of the practices contradicting values. Teachers are supposed to elaborate that reproductive health practices are socio-culturally constructed and that some are beneficial while others are harmful to the individual, family and community. Also to be emphasized is the positive role that male involvement plays in the reproductive health of mother and child.

¹⁰⁷ Establishing a bottom up rather than top down process could yield positive results. Indeed, not only teachers should be involved, but the students and youth themselves should constitute more than token participants. This will be discussed at greater length in the conclusions (Campbell, 2003; UNICEF, 2003; Boler *et al.*, 2003).

The most notable objectives in the syllabus in relation to HIV/AIDS state that students should be able to:

1. state the long forms of the acronyms HIV and AIDS;
2. differentiate between AIDS and HIV;
3. explain the effects of HIV on human body immunity;
4. explain mode of transmission of HIV and its prevalence;
5. explain ways of preventing of HIV;
6. describe effects of HIV and AIDS on infected and affected people;
7. explain care and support for people living with HIV/AIDS.

The next sub-topic, which is lifestyles choices, emphasizes the impact of peer pressure on risk behaviour, utilizing community resources and responsible decision making. Assertive behaviour and role plays demonstrating it are suggested, as well as dealing with sexual harassment, abuse and rape. The next sub-topics address the advantages of delaying sex and if sexually active, having protected sex. The issue of sexual harassment and abuse is touched upon and how to recognize, prevent and cope with it are to be discussed. Lastly, care and support for people living with HIV/AIDS is dealt with in regards to discrimination and compassion.

The syllabus resembles a generic template that could have been imported from Britain or any other country, given its lack of attention to local and contextual details. It does not for instance mention the gendered nature of the pandemic in sub-Saharan Africa and Tanzania. It also takes a largely scientific view and fails to explore the sexualities, desires, fears and concerns of young people and the pressures they face. While the topic is situated within the biology syllabus and hence naturally adopts a scientific standpoint, this highlights the fact that it is problematic to deal with it in biology class alone. Indeed, one of the biology teachers stated that while in reality each of the objectives should be addressed, the fact is that time constraints mean that certain objectives are invariably glossed over or omitted entirely. When asked about some of the objectives, he further asserted that, "Teaching the students about how to be assertive for example is not a priority. This is not biology, it is not my area. And they won't be tested on it. It is so difficult to meet all the objectives during the term and some things just don't get done".

The appropriateness of teaching life skills in biology class may be debatable, but it is clear that it has to be done somewhere in the curriculum. The merits of whether or not to adopt a curriculum in which life skills and HIV/AIDS education are infused or whether it should be introduced as a stand alone subject have been explored (see Boler *et al.*, 2003), but the decision to adequately address the issue certainly calls for curriculum reform and appropriate teacher training in order to properly deliver the course. The importance of adequate teacher training will be an issue further drawn out in the next chapter.

In discussions with teachers in other disciplines such as English, Bible Study, History, Geography and Civics, only the Civics teacher indicated that at least some references to HIV/AIDS and sexuality had been included in their lesson plans. One teacher lamented, “Where do I have time in the schedule to talk about such things? And how? What would the parents say? No, there is already too much to be done in a short time”. In regards to parental support for HIV/AIDS education at the school, it was difficult to ascertain beyond the interviews with the male and female parents. The biology teachers indicated that as far as they knew, parents hadn’t complained about their lessons, one laughing that “...these parents are working a lot. They don’t have time to concern themselves with such things”.

According to students in the mixed FGD, all indicated that they had received at least some information about sex, condoms and HIV/AIDS at either primary or secondary school. When asked what kinds of messages teachers sent¹⁰⁸, one boy shook his head smiling and said, “They say...no sex no sex no sex! But what can you do? When the girl she excites you, do you just walk away with your pants up? It is not possible for us boys”. This reference to the uncontrollable sexual urges boys suffer from has been discussed in the previous chapter.

Most agreed that teachers unequivocally stress abstinence when they spoke about sex at all. One boy who explained that he was doing Form III over again said that his previous biology teacher told them last year about condoms and even the female condom, but didn’t show them how to use it. In terms of how the class reacted or participated in the lessons, the question was met with silence. Do boys and girls openly discuss in these classes? More silence. Then one girl explained that, “If you ask a question it means you don’t know, right? And then people, they can say you are stupid. It is not really a class where you can ask questions anyways, it’s like...this is what AIDS is, so....”.

During the post FGDs, students were always asked how they felt about speaking about such sensitive issues. The response was overwhelmingly positive and there were even encouraging comments from teachers who had heard students talking amongst themselves about the discussions. This indicates that students have a strong desire and need to have a forum where they can voice their questions, thoughts and opinions. A group of boys, days after the FGD came to express their appreciation and enthusiasm for the session, with one commenting that, “Talking like that...I’ve never done that before and it felt really good. It is important work you are doing now. Will you come back to our class to talk more?” It is both significant and promising that boys expressed this need and desire in front of each other. One of the biology teachers expressed similar sentiments and

¹⁰⁸ Stambach (2000) reports how one male teacher in Machame warned boys to “preserve their bullets”, while girls should “lock their boxes”, referring to the locked trunks that girls bring to boarding school. The metaphor paints boys as being in control of their sexuality, while girls’ sexuality must be highly guarded and protected.

requested that he could observe how a “Westerner” taught some lessons on HIV/AIDS. Unfortunately, time constraints did not permit this. Given these comments, and the perceived need to encourage, enable and demonstrate to teachers how they could infuse the topic of HIV/AIDS in their lessons, a feeling was left that an action research approach would have been a rewarding and valuable contribution.

7.3 Explicitly Gendered Messages

Overall, the school seemed to work hard at encouraging girls’ and ensuring that they were treated equally. During the short period of observation there were no obvious disparities in terms of participation and no particularly negative or demeaning comments were heard by teachers. This may be due to teachers’ awareness of a visitor in the classroom and that their performance is being monitored. Outside the classroom, assemblies did not seem to be based on any sort of gendered configuration or segregation either. As mentioned at the beginning of the chapter, given a longer period of time, instances of gendered treatment would be more likely to emerge.

In FGDs, girls unanimously indicated that they did not feel disadvantaged or treated differently because of their sex at school, and stated that it was more likely at home that they would be treated differently than boys, as was discussed earlier. It was also not the case that teachers were teaching in traditionally defined male and female subjects. For instance, there was a female chemistry and physics teacher which goes against the norm. In addition, the female teacher interviewed and the others that were spoken to informally, indicated that they felt they were on equal footing with their male counterparts. This may be based on reality, or connected to other reasons, such as not wanting to draw attention to themselves or not wanting to share feelings that they were not as equally valued as their male colleagues. If these assertions of equality are true, these are positive indications that change has been happening.

Some comments however, demonstrate that deeply entrenched beliefs about girls remain. Firstly, however some background information contained in Figure 5 presents a gender stratified look at the schools enrolment:

Figure 5: Enrolment Figures

O “Ordinary” Level Students

Form I	Boys	130	54.6%
	Girls	108	45.4%
Total		238	100%
Form II	Boys	178	48.9%
	Girls	186	51.1%
Total		364	100%
Form III	Boys	171	60.9%
	Girls	110	39.1%
Total		281	100%
Form IV	Boys	62	55.9%
	Girls	49	44.1%
Total		111	100%

A “Advanced” Level Students

Form V	Boys	130	78.3%
	Girls	36	21.7%
Total		166	100%
Form VI	Boys	127	77.0%
	Girls	38	23.0%
Total		165	100%
Grand Totals	Boys	805	59.0%
	Girls	559	41.0%
Total		1364	100%

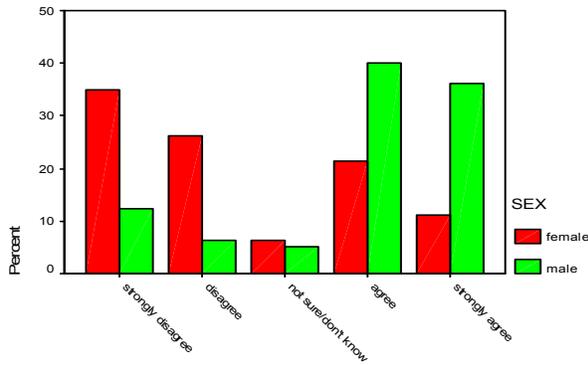
According to the male headmaster, the reason for the funnel effect in girls’ enrolment¹⁰⁹ is that, “Girls care about other things like having nice clothes and looking good. They don’t study. They get distracted easily by boys and don’t complete their work, and that’s why they don’t make it to forms V and VI”. One of the male chemistry echoed nearly the same opinion when enrolment figures and gender disparity were discussed and dismissed the notion that school fees were a barrier:

“In “O” level, it’s about a 50/50 split, boy to girl ratio. However, when it come to “A” level, there is about a 70/30 split, boy to girl ratio. Girls are more concerned with other things, such as clothes, and going to the disco. The reason for low enrolment is purely academic; fees have nothing to do with it. Girls just don’t work hard”.

Although neither expressed the belief that girls inherently were the less intelligent of the sexes, they furthered the stereotype that girls are materialistic. As was discussed in the previous chapter, the girls did not challenge the boys on this assumption in the mixed FGD and admitted that they did enjoy getting gifts and sweets. As for the assumption that girls care less about graduating from high school and having a career than boys, 46% of girls disagreed with this statement, while 31% of boys felt the same way. When it comes to intelligence, the differences of opinion are more marked. As shown in Figure 6, while 61% of girls disagreed with the statement: Boys are smarter and do better at school than girls, 76% of boys agreed with it. Similarly, it seems that when it comes to science and math, the stereotypical notion that girls are not capable prevails, at least from

¹⁰⁹ This is also representative at the national level (ESDPD, 2001; Omari & Mbilinyi, 2000; MoEC, 2003).

Figure 6: Boys are smarter and do better than girls.



a boy's point of view: 85% of boys agreed or strongly agreed with this and even 49% of girls believed it as well.¹¹⁰ The consequences of internalizing such views of female inferiority and the feeling that parents and teachers don't expect them to succeed anyway are that girls are less likely to enroll in subjects such as math, science and technology because they do not see

themselves as capable. Instead, they may gravitate to other disciplines such as the arts. In terms of access to courses, girls were not restricted from taking any courses and boys, albeit in very small numbers were present in courses that traditionally fell into the domain of girls, such as cookery.

In one surprising incident, an invitation was extended by a Form VI teacher to observe a class discussion that was about to take place. The teacher proudly explained that occasionally they take time out to have a volunteer lead a class discussion on a contemporary topic of interest. The topic today was the changing role of women in Tanzanian society, which sounded interesting. It was a small class of 15 boys and 3 girls. It was surprising to see the discussion about women's changing role in Tanzania being led by an outspoken boy. It was curious that a girl hadn't volunteered to lead the discussion, since being female they clearly have a more intimate knowledge of what it's like to be a contemporary Tanzanian woman. At the conclusion of the discussion when this question was raised, the girls squirmed in their chairs and one said that they weren't comfortable leading discussions because the class would get too noisy and nobody would listen to them. The teacher indicated that although the girls were quite clever and had made it this far to Form VI, they had never taken the initiative to lead a discussion. Furthermore, according to him, "You would expect that if a girl makes it to Form VI she would have a level of confidence in her and speak out more. In my experience though, this is not the case. They get shy". Perhaps this is because the male to female ratio widens and they feel alone in the class and don't have the same sort of "safety net" or level of support from fellow girls as in the lower forms where enrolment ratios are more balanced.

A common feature of schools in developing countries is that their athletic teams are very clearly gender stratified. Girls, for instance are not supposed to (or can't) play football. At the case study school, there was a football team for boys and a netball team for girls, effectively feminizing

¹¹⁰ Creighton & Omari (2000) assert that the educational system in Tanzania does not do an adequate job of breaking down gendered socialization patterns. They report that subject selection is highly differentiated by gender, with few girls taking courses in math and science and even less enrolled in technical schools. The majority engage in service oriented jobs such as nursing, teaching and secretarial work.

netball and making it a girls' domain, while football was restricted to boys with neither being able to cross over into the other sport. The questionnaire confirmed that a majority of 71% hold the stereotypical notion that boys are stronger and sportier than girls. When asked, the girls weren't sure if they wanted to play football even if they were allowed to, one girl said she had never given it any thought, she just knew she wasn't permitted. Boys laughed when I told them that I had both played and coached soccer and rugby, two aggressive sports they argued were only for boys. One boy, laughing hysterically sat down on a tree stump, rubbed his head and eyes and stated, "Once you get a girl to play football, it's all over. There's no control over her then, she will be like us". Once again, this points to the symbolically oppositional construction of "them" and "us", the feminine and the masculine, and the need to maintain the distinction in order to protect gendered identities.¹¹¹

7.4 Implicitly Gendered Messages

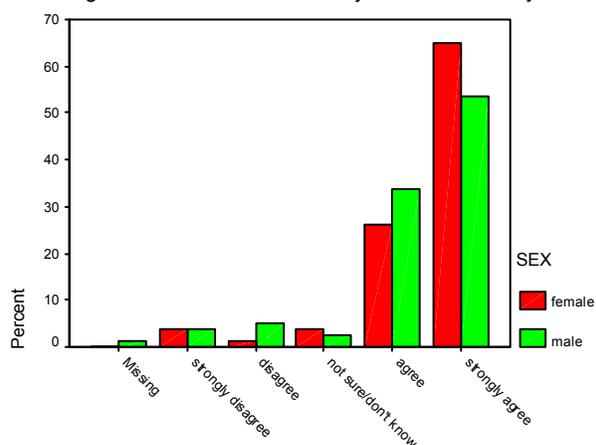
The focus in this section on implicitly gendered messages is on the school's organizational structure, which is one example of male hegemony. The headmaster is male, and in looking at the male to female ratio of teachers, which is 18:5, it is clear that the school is a male dominated world. Mirembe & Davies (2001) also noted how this structure dictates that if power is gained or lost through a popular vote at staff meetings or elections for example, the majority (boys and men) would win.

As has already been mentioned, a funnel effect in regards to girls' enrolment can be observed at the school, with fewer and fewer making it to Form V and VI. In terms of leadership positions within the student body, it is compelling that the head prefect is and always has been since the schools inception, a boy.¹¹² Out of 19 prefects, only 3 are girls. When asked why he thought this was so, one boy stated, "These girls, they are just not courageous you know. They don't think they can do the job as good as a boy can so they are afraid to try". Similar to the headmaster and the teacher, the boy didn't say that girls weren't capable of the job, but pointed out that they don't have the self-confidence to try. From a girls' perspective however, one argued that they felt that the

¹¹¹ In discussing friendship and love, sociologist Peter Blau argues that relationships between unequals are less strained when the inequality is clear and marked (Wallace & Wolf, 1991). Thus, when gender lines become blurry and if girls impinge on what boys' perceive as their territory (just one instance from this thesis is that of the football field), then boys would feel threatened. If they were secure in their position, there would arguably be less tension because each is aware of their status and role.

¹¹² In their research in Botswana and Ghana, Dunne & Leach (2005) found that although there were equal numbers of male and female prefects in schools, the positions entailed different responsibilities and power. Male prefects were accorded more authority and took greater initiative in leading activities, while females tackled more domestic duties.

Figure 7: Girls can be leaders just as well as boys.



cards were essentially stacked against them. According to her, “It is the teachers who decide on prefects and they will always choose a boy over a girl”.

The questionnaire data interestingly showed that girls and boys alike agree that girls have solid leadership skills with Figure 7 confirming that a solid 89% believing that they can be leaders just as well as boys can.

Given greater opportunity, role models and encouragement, perhaps these girls would take greater part in leadership roles. It seems that they themselves believe they have the capacity; they just need the reinforcement and confirmation from males and the encouragement from other females. One of the constraints identified by Omari & Mbilinyi (2000) however, notes that at the national level at least, Tanzanian society has not fully accepted the idea of women in positions of leadership and that people may lack confidence in the abilities of females.¹¹³

The fact that boys and men enjoy privileged positions of authority in the school (which is largely mirrored in wider Tanzanian society) sends a clear message and creates an imposing barrier for girls contemplating entering that realm. Symbolically, boys have more power than girls. For instance, it has been shown that they wield more negotiation power when it comes to cleaning duties, they have the majority of power as prefects, and educators (at the secondary level at least, females form the majority at primary schools) or those in authoritative positions are male. The linkages between symbolic and physical power highlight the complexity of relations, and the issue of corporal punishment discussed below is one further example of this manifestation.

7.5 Corporal Punishment

Corporal punishment is one demonstrative example of how teachers maintain their power over their pupils in an authoritarian manner which prevents the development of a healthy relationship needed to deliver an HIV/AIDS program based on participatory methods within an open and enabling environment. Punishing students in front of their peers at morning assembly clearly sends a message that a mistake in judgement or behaviour is best corrected by violence, which students internalize and normalize. Students seemed confused by questions asked regarding

¹¹³ A review of gender and education in sub-Saharan Africa likewise found that in a number of countries at the tertiary level, women are underrepresented in committees, as chairpersons of departments, and are largely passed up for career advancement in the form of grants, scholarships and fellowships (Adomako Ampofo *et al.*, 2004).

the frequency of punishment and how they felt about it. They wondered if this was unusual in other places and if students in Europe and America would be punished in the same way.

During the field work, several instances of illegal corporal punishment were observed.¹¹⁴ In speaking with teachers, most expressed that while they do not like corporal punishment, they see no other way to control the masses. In a class of often up to 70 students, teachers struggle to keep the attention and order of the class and feel they have no other pedagogical tools to aid them. This points to the dire need to reduce class sizes to a more manageable number¹¹⁵, and to increase the quality of teacher training that presents alternative disciplinary methods.

Some forms of physical labour as punishment were observed, such as uprooting large trees on the school grounds or chopping wood (for boys) and carrying it (for girls). Other unusual forms of punishment included having the entire class kneel in the dirt with their hands raised and fingers waving for an extended period of time. Apparently the class did not give the teacher the “proper” greeting. Most disturbing however, were instances of punishment that clearly violated the Corporal Punishment Act in a severe manner. In the most glaring incident, the headmaster was observed beating 7 students on the back, 4 male and 3 female who knelt on the ground and were surrounded by the entire class of approximately 60. While the boys remained steadfastly silent as the punishment was administered, the voice of a girl could be heard, pleading, “Oh please sir, no!” Would it have been acceptable for a boy to cry out and reveal his fear and weakness in the same manner, or would he be teased and called a wimp for instance? Or, as Connell identified in Chapter 3, does the gender regime of schools dictate patterns of emotion and regulate who is permitted to express different emotions?

According to the students, such punishments were normal and often performed in front of the school in order to set an example at the morning assemblies, which take place on Mondays, Wednesdays and Fridays. Being late, not having work finished, performing poorly on a test or exam and being disruptive or disrespectful were reasons cited by students as being likely to result in some form of corporal punishment. Students in FGDs agreed that there are some variations in punishment, but boys and girls are largely punished in the same manner (this contravenes the Corporal Punishment Act, which calls for gendered forms of punishment that are questionable and reinforce the notion that boys are stronger and can take more physical punishment than fragile girls

¹¹⁴ The Acting District Zonal Chief Officer explained that according to the Corporal Punishment Act in Tanzania, only the headmaster may administer corporal punishment. In the case of girls, it must be a woman who administers the punishment, and if one is not available, written permission must be obtained from the headmaster to discipline a girl using corporal punishment. Boys may be beaten on the back, while girls may only be beaten on the hand, and only a flexible cane can be used. Several teachers explained that, in practice, it is not generally feasible or practical for the headmaster to be the only one that can punish students, so teachers usually take care of such matters themselves.

¹¹⁵ Officially, ratios in Kilimanjaro are mandated to exceed no more than a 45:1 pupil to student ratio (KSEP, 2002).

can). As will be discussed in the next section, corporal punishment has implications for school-based HIV prevention programs.

7.6 What Role Can and Should the School Play?

Despite the importance of the educational system in levelling the ground and providing equal opportunity, it is imperative to note that this does not by any means ensure that girls and boys will be treated equally and have the same opportunities in the labour market and in society in general. Nevertheless, the fact that schools are sites of the production and reproduction of gender roles, norms and expectations and that the same power structures contained within them can be observed in wider society, points to the significance of fostering a healthy, safe, positive environment for young people to learn in and grow in the era of HIV/AIDS.

As it was stated in the introductory chapter, education is not a panacea or a ‘magic bullet’. It is one component, albeit a crucial one, in efforts to fight HIV/AIDS. Within that component, formal school-based education is yet again only one piece of the puzzle. The school, however, cannot be considered in isolation. The involvement of the community and society in conjunction with the school’s efforts are imperative for any sustainable change to occur. It is not possible to speak of ending the cycle of violence and silence for instance, without addressing the bedrock of the social structures that support these norms. The role of the community and society has been addressed earlier in this thesis, and will again be dealt with in the next chapter.

In connection with this and the ongoing discussion throughout this thesis on social change and the juxtaposition of tradition and modernity which has primarily focused on the students’ point of view, it is important to acknowledge and reiterate the impact this has from a teachers’ point of view. As was stated in Chapter 2, teachers are expressing frustration in regards to the aims and goals of contemporary education in Tanzania. Despite the fact that the nation is pursuing macro-economic neo-liberal policies, education is still predicated on the collective, socialist view of life. Like students, they too are caught in the contradiction.

Young people were desperate to be able to express themselves openly and ask questions about sex and were fraught with worries related to questions they didn’t feel comfortable enough addressing with the adults in their lives. Given the silence treatment they receive at home, the sporadic bits and pieces of information they may or may not get at school, and the often times inaccurate information they get from friends, it is no wonder that a barrage of questions, some shockingly candid were put forth. This has important implications for HIV/AIDS educational programming since many of the questions touched on topics which require teachers to be

comfortable discussing sensitive issues. An environment conducive to open discussion is crucial to dispelling myths surrounding sexuality, condoms and HIV/AIDS. This means that the way in which teachers and students interact will likely have to fundamentally change if young people are to feel comfortable in asking questions.

Significantly, teachers indicated that there is not sufficient time to teach life skills in biology, and further, it does not belong in the biology curriculum. As will be discussed in the concluding chapter, a comprehensive curriculum overhaul to reprioritize time and resources is necessary. Of crucial importance, a forum where young people can sift through and critically debate mixed messages and discuss their experiences, questions and frustrations is underscored.

According to the Acting Zonal Education Officer, girls these days know their rights. But there is a reason why violence, harassment and rape are underreported: mechanisms and stringent procedures dealing with these issues need to be put into place and a zero tolerance approach (first offence, immediate expulsion for teachers and students alike) should be adopted. Who would want to share sensitive information with a teacher who beat them last week? Or when they don't feel confident that their concerns will be taken seriously? Or when the perpetrator is their teacher?

As stated at the beginning, the school can be viewed as a microcosm or a mechanism for change. Females face similar structural inequalities and come up against the same barriers and attitudes that they do in wider society. Connell's gender regimes were clearly evident in the school; in this chapter in particular power relations characterized by dominance and authority were prevalent. The implicit and explicit messages which paint girls as being materialistic, lazy, and cowardly make the school an environment which reinforces stereotypes, rather than challenging them. On the other hand, fewer restrictions are placed on girls at school and greater equality is accorded them compared to at home which points to the potential of the school to serve as a site and catalyst of change and transformation. The following chapter will elaborate on one aspect upon which the potential of school-based programs depend: contextually sensitive programs situated within an enabling environment and supported by the wider community.

Chapter 8: Contextually Sensitive Programming: Rhetoric or Reality?

Whose knowledge counts?
Whose values?
Whose criteria and preferences?
Whose appraisal, analysis and planning?
Whose action?
Whose monitoring and evaluation?
Whose learning?
Whose empowerment?
 Whose reality counts?
'Ours' or 'Theirs'?
(Chambers, 1997:101)

The theoretical discussions in Chapters 3 and 4, linked together with the findings discussed in Chapters 6 and 7 have a number of implications for designing contextually sensitive HIV/AIDS educational programs. In reference to Robert Chambers' questions above, "whose context" as a question to be considered in designing HIV/AIDS educational programs could also be added to the conundrum. The final research question, which culminates in "What are the implications of these findings for designing contextually sensitive HIV/AIDS education programs", raises some interesting but challenging questions.¹¹⁶ What exactly do "contextually sensitive programs" entail? How does gender fit in? Why are such approaches important anyways? Can interventions designed for one culture be adapted to suit another?¹¹⁷ What if "culture" contradicts the stated aims, goals and principles underpinning a program? Is this decidedly vague expression an empty one, a "buzz word" that appeals to donors and opens purse strings?¹¹⁸ Development discourse has been shown to invariably latch on to such buzz words as trends shift. Chambers (2004) draws attention to a number of words that have made their way into the development lexicon in the last two decades, including: accountability, empowerment, gender, globalization, human rights, ownership, participation, partnership, sustainability and vulnerability. He explains how the words adopted in

¹¹⁶ For his comments, I am most grateful to my primary supervisor, Arnfinn Helleve who prompted me to consider just what I meant by the phrase "contextually sensitive". His critical thinking skills and experience on the SATZ project which aims to promote sexual and reproductive health through school-based interventions in South Africa and Tanzania, inform some of my comments on this topic.

¹¹⁷ One study that probed this question in Namibia used a US designed curriculum and tailored it to the Namibian context. According to the authors, "transplantation of a Western-designed curriculum can be successful" (Fitzgerald, *et al.*, 1999:60). This assertion must be treated with caution however; indeed, working the other way around, it is unlikely that Uganda's success would be replicated in a Western setting, given the unique historical and socio-cultural context (Hogle, 2002).

¹¹⁸ Chambers, renowned for his quick wit cleverly writes that:

Consultants with contracts to win
Use language they know to be in
Chameleons, they
Fake a fashion display
Camouflaging for cash is no sin (2004:3)

the development discourse are used in various ways and may result in changing research agendas and priorities, altering mindsets and legitimating new actions. Building on his seminal books *Rural Development: Putting the Last First* (1984), and *Whose Reality Counts? Putting the First Last* (1997), he again poses the question: who has the power to define these concepts that dominate the development landscape?

In addressing the issue, this chapter and the next will incorporate aspects of what has been written in the literature in conjunction with the main findings of this thesis in order to generate some suggestions for future HIV/AIDS educational programming in the Kilimanjaro region and directions for further research. The scope of this thesis necessitates limiting the analysis to primarily addressing school-based responses, but in recognition of the importance of its ties to the wider community, references will also acknowledge the mutually reinforcing role each has to play.

8.1 Issues of Semantics

For the purposes of this thesis, the expression “contextually sensitive” encompasses a number of interrelated issues and signals attempts to move beyond notions of universalized, homogeneous conceptions of youth (or girls) at risk and the limitations of the KAPB survey as detailed in the introductory chapter. Looking at frequency of coitus, number of sexual partners, age of sexual debut and so on are useful indicators at the outset, but do not for instance provide information regarding local understandings of HIV/AIDS, or guidance in determining what should be included in the curriculum. Nor do standardized surveys adequately account for cultural nuances and local specificities. Practical contextual factors such as age differential in classes¹¹⁹, enormous class sizes, linguistic needs, available resources and the community’s epidemiological status must be taken into account in designing a program. But in a broader sense, programs that take into account and acknowledge the historical and economic context, social norms, beliefs, values and taboos, traditions, customs, practices, religion and power structures of the target population encapsulate what is meant by “contextually sensitive”. Lending credence to the call for more contextually sensitive programming, Haram (2004) maintains that in order to identify potential obstacles to behaviour change, contextualized local knowledge about people’s lived realities is essential. Others working in the field in Tanzania have likewise supported this notion. For instance, Students Partnership Worldwide (SPW) emphasized the social context of HIV/AIDS in its programming in Tanzania. In Makete district, the focus is on widow inheritance; in Ludewa

¹¹⁹ This is particularly relevant in Tanzania’s case. The wide age range found at various levels of the education system presents some difficulty given that a 19 year old boy might be in the same class as a 13 year old girl.

district, it centers on witchcraft beliefs about AIDS (World Bank, 2003). As a result of his extensive work in Kilimanjaro, Setel (1999:143) cautions that:

“...it should be emphasized that the international health community and policy-makers must be aware that the behaviours that spread the epidemic are the product of large-scale forces as much as they are of individual choice and character. This may not be comforting to those who harbour the naïve hope that social science will still succeed in identifying key “cultural risk factors” that can be easily addressed and are amenable to conventional health education, which targets individual behaviour...structural and environmental interventions must accompany any behavioural change campaign”.

The degree to which programs address contextually sensitive aspects is undoubtedly mediated by factors such as funding and the extent to which locals are involved in the process. The findings of this study underscore the importance of understanding how gendered identities are constructed and reconstructed in the shift from what is perceived as traditional to modernity is imperative.

8.2 The Importance of Context: Addressing Collective Identities and Understandings of Risk

“In Africa, we have a concept known as *ubuntu*, based on the recognition that we are only people because of other people. We are all humans, and the HIV/AIDS epidemic affects us all in the end. If we discard the people who are dying from AIDS, then we can no longer call ourselves people.” Nelson Mandela, closing remarks at the International AIDS Conference in Barcelona, July 2002. (www.kaisernetwork.org/aids2002, retrieved 03/02/05)

Addressing collective identities in line with the African *ubuntu* philosophy instead of imposing programs based on Western notions of individualism may seem like a minor point, but in designing “contextually sensitive” programs, people’s identities and how they are formulated in relation to others is important to consider in reaching out to the target population. As Fuglesang (1982:122) elaborates:

“In western society, the process of socialization sanctifies the individual as a separate member of society; socialization becomes a process of individualization. In traditional societies, the process of socialization emphasizes a person as an integral part of a social system, a community member, because this is essential to the survival of the group”.

As was discussed in Chapter 6, identities, particularly collective ones stressing the importance of the extended family may be fracturing and altering as a consequence of modernity. Indeed, one distinct feature of modern life in Kilimanjaro is the disconnectedness of the individual in relation to traditional notions of collectivity (Talle, 1995).¹²⁰ However, collectivity nevertheless remains

¹²⁰ Sociologists have long debated identity and collective identity formation. As opposed to a functionalist understanding of the individual as a passive agent, Mead (1934) elaborated on the concept and postulated that identity comprises 2 elements: the “I”, (our unchangeable core), and the “me”, with the former being mediated by the latter,

deeply ingrained on Tanzanian consciousnesses and has relevance even today. In the contextual analysis chapter, it was stated that Tanzanian society remains deeply influenced by Nyerere's philosophy or what Gyekye (1997) refers to as "humanistic ethic". The importance of *ujamaa* can still be seen and may serve as one example of how a nation can harness their unique historical and socio-cultural background in a productive way in relation to HIV/AIDS. For instance, in dealing with stigma, stressing the importance of inclusion and caring for each other may be one way of identifying positive aspects of local traditions, customs, practices and beliefs which is just as important as identifying harmful ones. This may pave the way for a more open dialogue to ensue in acknowledgement that silence and ignorance will only heighten everyone's risk.

Understanding how locals perceive HIV/AIDS and make sense of its transmission and spread is of the utmost importance in designing contextually sensitive programs as these views can vary from country to country, region to region and even within the region. As was found in Chapter 6, the comments by students in this thesis support several researchers' findings that demonstrate that locals in Kilimanjaro tend to hold fatalistic attitudes towards the virus and liken it to an accident beyond one's control (Setel, 1995b; Haram, 1999; Moland, 2002, Bujra, 2000). Even the song *Starehe* supports this belief: having AIDS is compared to being struck by lightning or zapped by electricity (*umeme*), something which is beyond individual control and is entirely random. This is an important point of entry for AIDS educators to address and challenge misconceptions related to transmission. Tackling widespread beliefs that AIDS is like an accident in a community wide effort in order to break down defeatist mentalities and encourage people to see themselves as in control of their own sexuality is essential. Open discussion addressing the fears and beliefs of young people coupled with the provision of accurate knowledge and counselling services is imperative.

In addition, personalizing risk and putting a face on HIV/AIDS is one way to heighten students' awareness of the seriousness of the epidemic. Only one of the students in FGDs indicated that they knew someone who either had the virus or had passed away as a result of it, and the findings indicated that they generally saw it as someone else's problem. Making students aware of HIV/AIDS in their own community, through the use of local epidemiological statistics, guest

alluding to the socially constructed nature of identity. In this view, identity is a flexible concept which may be constructed, deconstructed and reconstructed depending on context. In line with symbolic interactionism, Mead views the individual as an active, rather than passive agent. Social influences emanating from parents, peers, teachers and the wider community therefore, play an instrumental role in collective identity formation, more so than egocentric perspectives which have difficulty relating to others in a wider, more complex socio-cultural web. Where there is significant social change, it is useful to look at Piaget's (1937) perspective where he asserts that identities evolve in order to adapt and assimilate more complex realizations about interactions on a larger scale. Other relevant theorists are Parsons (1952), Freud, Foucault and Habermas (1979), and more recently Butler (1990, 1999).

speakers from the health community, or even by those who are infected and willing to speak out may go a long way to impacting students attitudes, beliefs and practices.

Speaking to youth in a language they can relate to is more likely to garner a positive response than utilizing scientific jargon in a manner which does not address their desires, concerns and needs. According to one multi-site study on youth,

“These are not just semantic differences or merely local slang. Nor is a simple argument being mounted here merely to encourage the use of local language or colloquialisms in health education...young people employ specific and finely graded terms and shades of meanings both to understand what is happening to themselves and their bodies, and to locate themselves within their culture and age group...these terms and the culturally specific concepts they embody enable young people to find their sexual ‘feet’”. (UNAIDS, 1999b:31)

For instance, in this study the term *mlupo* (player) was used, likely slang which adults even living in the community may not be aware of. Similarly, the exchange called “Chick ‘n Chips” is a reference point that could be used in discussions to reach young people with familiar situations. This type of intimate knowledge of the community necessitates local involvement (including young people themselves, a topic dealt with later) in the initial needs assessment, planning, implementation and evaluation phases, which ultimately may indicate that some level of decentralization is necessary in order to ensure contextual sensitivity in prevention programs.

One of the findings by UNAIDS (1999b:41) found that “single nation-wide approaches to prevention education are inappropriate, and that the local, context-specific health promotion is by far the preferable strategy...” This is not to say that national plans are not important, they clearly



Images of modern, urban youth in *Femina* magazine

are. However, greater attention to local context is crucial and decentralization in the education sector, which the ESDPD (2000) indicates is planned for, may aid this. In the case of Tanzania, this is particularly relevant since youth in Kilimanjaro for instance, experience and perceive AIDS differently than urbanite youth in Dar es Salaam, and different still from those in Bukoba. The urban-rural disparity that has been discussed also means that while mass media

campaigns are less likely to reach rural dwellers, the message is also likely to be inappropriate to their realities. Pictures on TACAIDS billboards for example, portraying young Tanzanians clothed in Western style dress, are images not likely to be readily identifiable to youth in rural areas.

One of the strategies the MoEC is attempting to facilitate is that of decentralization and devolution of some powers to the local level. This means that programs may be tailored to suit the needs of the population, through a number of relevant stakeholders such as local youth, educators,

parents, religious representatives and NGOs, as they have proposed. As will be discussed below, how to integrate all these stakeholders is not unproblematic and will require negotiation and commitment to the process from all parties involved.

8.3 Designing Contextually Sensitive Programs

“A person cutting a path does not know that the part that he has cleared behind him is crooked”
Akan proverb (Gyekye, 1997)

HIV/AIDS educational programs in sync or balance with their surroundings will exhibit high levels of mutualism, characterized by interdependent relationships resulting in mutual benefits. This means that programs that are built on an understanding of and support by the community and young people themselves are more likely to be sustainable. It does not mean that programs can or even should cater to everyone’s wishes however; rather it means that harmful norms, practices and traditions will not go unchallenged. Indeed while the aim of contextually sensitive programming is to root the intervention solidly within the local context, it is also to enable communities to critically reflect on their beliefs and the reasons that inform the practices and traditions. In terms of challenging gender norms, Gupta (2000:7) argues, “In point of fact, by changing gender roles what is being altered is not a society’s culture but rather its customs and practices, which are typically based on an interpretation of culture”. She touches on some sensitive issues here: addressing the “culture”¹²¹ issue can be difficult, since identities are so closely intertwined with the concept, but she also makes reference to the fact that interpretations of culture are not always based on fact: the romanticized version of the past is often used to defer blame for the current state of affairs in Kilimanjaro, and this theme is likely also played out in many other communities. In discussing how traditions come into being and change, Gyekye (1997:222) contends that:

“...those cultural values and practices that evolve into tradition were, at the time of their creation, grounded in some historical circumstances, certain conceptions of human society, social relations, certain metaphysical ideas, and other kinds of ideas, beliefs, or presuppositions. That is to say, the beliefs, values, practices, or institutions of a tradition are almost invariably grounded in some conceptions. But the conceptions themselves may not, from the perspective of subsequent generations, have been adequately rationally grounded. Consequently, subsequent generations may discover them to be simply false, inconsistent, morally unacceptable, or inadequate to the realities of their times”.

The proverb above highlights the need for critical analysis on traditions that have been passed down to them from previous generations. Evaluating and discarding those no longer useful or beneficial to

¹²¹ Culture may be defined as the creation and recreation of ideologies, rules, and practices that allow people to make sense of the world in both different and shared ways (Crewe & Harrison, 1998).

society is part of the process, as is renewal and celebrating those positive traditions. As was pointed out in the literature review, it is also imperative to ensure that boys and men (often viewed as the gatekeepers of tradition) are included in order for sustainable, long-term change to occur.

If certain practices are deemed harmful to certain members of the population, such as Female Genital Mutilation (FGM), male circumcision, trans-generational relationships, polygamy and so on, to what extent should they be discouraged or made illegal? If gender norms such as male domination and female acquiescence are understood as putting both sexes at risk, should they remain unchallenged? In regards to access and legal rights, if asymmetrical relations rooted in a patriarchal system dictate that males are privileged, while the risk and vulnerability of females is heightened, should laws and practices be altered? In terms of religion, where the use of condoms may be condemned and a stringent focusing on abstinence may prevail as the only way to curb the pandemic (thus ignoring the possibility and likelihood that young people are engaging in sexual relations), what is to be done? How should conflictual values and norms be reconciled?

Darnell and Hoëm (1996) demonstrate how outcome of an educational program is determined by the relationship of values to interests.¹²² Adapting their concept to the context of designing HIV/AIDS educational program, it is also apparent that reconciling conflictual values and interests is essential. For instance, most stakeholders are likely to agree that their values or goals center on curbing and reversing the spread of HIV/AIDS through education. However, the ways in which these values and goals might be achieved depends largely on their interests. When religion enters the picture, promotion of condoms may not be the most desirable means to achieve the ends. Or, given the discussion on hegemonic masculinities, life skills programs promoting female assertiveness may be wholly unacceptable to those who benefit from maintaining the *status quo*. Thus, although it is ideal when there is a complete correlation between values and interests (the upper left hand box), the other 3 outcomes are also common and present challenges to be dealt with.

Figure 8: Values and Interests. Adopted from Darnell and Hoëm (1996).

Values \ Interests	Shared	Conflicting
Shared	+ +	-- +
Conflicting	+ --	-- --

¹²² Shared values constitute a core concept in functionalism which seeks to understand how social systems achieve equilibrium (Wallace & Wolf, 1991).

Participatory approaches often problematically do not address issues of power and conflict within communities and tend to view them as homogeneous and with mutually compatible interests.

These questions confront program planners and raise some difficult issues for international and local teams striving to develop contextually sensitive programs. This thesis does not presume to provide answers to these questions, but the process of voicing them provides an entry point for further examining these issues and making recommendations for future research.

8.4 Widening the Scope: Community Mobilization, Cohesion and Empowerment¹²³

Although the unit of analysis in this study has focused on the school and its role in shaping gender norms, it is clear that too narrow a focus fails to account for the complex web of interactions inherent in the production and reproduction of gender norms and roles. Gender identities, norms and roles are not formed in a vacuum, and any attempt to understand and ultimately challenge their construction through educational programming should incorporate other relevant sectors in the community and society in a holistic approach. Community mobilization, cohesion and empowerment embedded within a broader more holistic framework which takes into consideration the range of impacts on sexuality and behavior including social, cultural and economic constraints that affect both sexes is a fundamental prerequisite to establishing a sustainable program.

Community-based responses within an empowerment framework have been experimented with, and have been met with mixed success. Catherine Campbell's (2003) account of a well-funded but ill-conceived project in a South African community points out that though the project failed, it does not mean that community-based responses don't work. Her candid appraisal, critical awareness and acknowledgement of the projects lack of conceptual framework at the outset and the other shortcomings it suffered from represent what Chambers (2004) refers to as "reflexive responsibility". More well documented instances of what works and what doesn't are needed.

According to Darnell & Hoëm (1996:269) the ideal learning environment exists in an environment where the integration levels between school and society are in a state of equilibrium. They admit that it is rare to find school and society in such a state, but concede that if there is a certain level of integration between the system and subsystem above a certain level, the units will be mutually reinforcing and have a high level of potential for progress and success. Thus the success

¹²³ Empowerment is another example of a decidedly vague concept that has largely evaded precise operationalization and measurement. Some focus on the psychological aspect of empowerment, while others argue this lacks sophistication and fails to account for the need for political and economic empowerment (Campbell, 2003). The Gender Empowerment Measure by UNDP measures three dimensions: economic participation and decision making, political participation and decision making and power over economic resources. Tanzania ranked 162 out of 177 countries (UNDP, 2002, see <http://hdr.undp.org/statistics>, accessed 05.04.05)

of a program is dependant partly on the extent of school and community cohesion in the values and messages they transmit to young people. This is particularly relevant for the findings of this study which highlight the paradoxical state young people find themselves in today, heightened by the conflictual nature of expectations and messages received from numerous sources.

In addressing the relationship between home and school, which has been shown to exhibit tensions and conflictual expectations in this thesis, they maintain that, “Where there is cultural homogeneity or a complementary relationship between the home and the school, each will reinforce each other... Conversely, if the cultural background of the students and the culture of the school lack symmetry there will be conflict” (Darnell & Hoëm, 1996:271). Ultimately, they conclude that:

“...there must be a considerable degree of congruence between the values espoused by the school and the significant institutions of the society before the school can achieve its goals... In situations where the cultural gap between the school and local community are manageable for the students and the school, but not the parents, the students will experience schooling as a constant choice between their traditional life style in the outside world. In this case education will weaken the pupils sense of belonging to their home environment, thereby necessitating a new frame of reference existentially”. (ibid: 272, 282).

This new frame of reference was alluded to in Chapter 6, where it was found that students combined desired elements of tradition and modernity, in what Chikovore (2004) referred to as “hybridity”.

Asymmetrical power structures embedded in society and the school in terms of access to knowledge, services and leadership positions need to be identified, dismantled and reconfigured in a more egalitarian manner. This means, at the macro level, wider society must introduce, support and reinforce sustainable changes that shift the balance of power so that females and males enjoy equal status in the realms of employment and promotion, legal status and inheritance laws as well as access to education and other services. In particular, strict laws adopting a zero tolerance policy on harassment and abuse need to be supportive and mechanisms need to be put in place to deal with such cases, especially in and around the school, which is supposed to be a safe environment. Policies must be highly congruent: work with influential stakeholders such as the religious community should strive to adopt stances in line with government programming. As this thesis has found, it can be very damaging for young people to be constantly assailed by conflictual messages and a united stance on the fight against AIDS is one element which may contribute to change. Another important stakeholder to be involved in the process are elders in the community, who likely enjoy the respect of young and old alike. Making use of pre-existing systems of knowledge transfer, or strengthening ones that may have broken down or fallen into disuse should not be underestimated as a means of reaching the young and general public.

The manner in which HIV/AIDS educational programs in Tanzania deal with (or do not deal with) the issue of sexuality needs to be reconsidered, given the current largely scientific approach. There is no easy way of dealing with the fact that that in Moshi at least, a large number of the schools are Catholic and thus not supportive of educating students about condoms. Parental support on this may also prove to be an obstacle. This is why it is important that a wide variety of stakeholders are engaged in the planning and implementation phases. Other integral facets of this problem focus on the importance of an enabling environment, discussed in greater detail below.

8.5 Healthy Schools, Healthy Students: Building a Health-Promoting Environment

According to Campbell & Lubben (2003), two dimensions, the first being organizational and the second being professional, are essential to actualizing a health promoting environment.

In terms of the organizational dimension, they identify four elements:

- (i) the existence and implementation of a school health policy document;
 - (ii) in addition to the incorporation of HIV/AIDS education into the core curriculum, the addition of extra-curricular health related activities;
 - (iii) the provision of school-based sexual health care; and
 - (iv) school-community links
- (Campbell & Lubben, 2003)

While students do learn about HIV/AIDS in Form II and IV Biology for approximately 3 weeks in the school year, it is far from being comprehensive and there is currently no specific school health policy document. The ad hoc nature of programming in the country thus far means that some areas have been saturated with efforts by NGOs, while others have been left completely out. The establishment and implementation of a more in-depth cross-curricular program that addresses the life skills and HIV/AIDS throughout the year would alleviate such disparities.

The examples detailed in this study of gang rape, abuse, violence and harassment were discussed in order to demonstrate the silence surrounding these situations, the attitude towards it by teachers and how it is dealt with in the school. It is clear that more stringent school policies on harassment, abuse and rape must be enforced and supported by mechanisms for dealing with such situations as well as provisions for counseling for both the abuser and the abused. Victims need to feel that they will be taken seriously and protected from further harm. Consequently, pre and in-service training needs to educate all teachers on how to handle these situations. The views and comments by teachers indicated that they did not always take cases seriously, and may themselves hold harmful attitudes, which is also problematic.

In addition, it must be remembered that in many places extra-curricular activities are non-existent at worst and considered a luxury at best. Given the pressure already exerted on teachers, one possibility is to have peer educators receive training in this realm, as well as expand the use of other forms of entertainment such as plays, dramas, music, debates and story telling. Inviting elders from the community or public health officials are also options. Another constraint is that schools may not be able to provide school-based health care in the form of counselors, underscoring the importance of forging links between the school and community.

The professional dimension highlights three important aspects of teacher training, namely:

- (i) mastery of content knowledge in relation to HIV/AIDS by teachers
- (ii) provision of appropriate learning and teaching methodology for both teachers and students
- (iii) fostering teachers desire and ability to get involved and claim responsibility for HIV/AIDS education

(Campbell & Lubben, 2003)

The centrality of adequate pre and in-service teacher education rests on the fact that without properly trained facilitators, that perfectly designed “contextually sensitive” program will lie on the desk, untouched and unused. Beyond understanding the basics on transmission, teachers need participatory, learner-centered methodologies in their repertoire, coupled with an intimate understanding of the gender issues innately woven into the fabric of their classroom.¹²⁴

The last section in this chapter will deal with incorporating the views of young people in designing contextually sensitive programming.

8.6 Listening to the Voices of Young People

Incorporating the views, attitudes and values of young people in the planning processes that is ideally characterized as ‘bottom up’ and participatory has been deemed essential.¹²⁵ Increasingly, recognition of the potential of young people to meaningfully contribute has seen calls from a variety of sources for their inclusion in decision making processes.¹²⁶ Tanzania’s president, Benjamin

¹²⁴ This is a huge challenge for Tanzania, where only approximately half of all teachers are properly certified. Compounding the problem is the rural-urban disparity. In 2000, for instance, 59% of teachers in urban areas were certified, while in rural areas it was only 45% (Rajani, 2003)

¹²⁵ The term participation may be as slippery and ambiguous as other terms in development lexicon such as empowerment. What exactly does it entail? Crewe & Harrison (1998) ponder: Does simply asking people’s opinion constitute participation, or is something more fundamental required?

¹²⁶ The WHO (2001) maintains that young people should be involved as full partners in all stages from initial program conceptualization, design, implementation, to feedback and follow-up. The 1989 UN Convention on the Rights of the Child (UNCRC) stresses that children have the *right to be heard* and that all actions concerning them should have their *best interests* in mind. This may be accomplished through focus group discussion, art work, story telling, social mapping and diary keeping to complement quantitative approaches such as KAPB surveys (Webb and Elliot, 2002).

Mkapa, reiterated the importance of including children in achieving Tanzania's goals in the Development Vision 2025 (UNICEF, 2002). He stressed that "...this is not just the responsibility of the Government, or NGOs, or international organizations, but the responsibility of each and every one of us. Everyone has a role to play, including children themselves".

However, research on how true partnership can be achieved is still in its infancy and moving beyond tokenistic participation remains a challenge.¹²⁷ For instance, the best way to incorporate the voices of youth has not yet been ascertained. Should they be afforded decision making power or would other ways of gathering their input, such as through establishing open forums be more useful? Choosing who to represent a peer group is also problematic. What makes an individual representative of such a highly diverse group? How does background and experience influence their stance on issues? In addition, the rhetoric of participation may disguise inequalities and power differentials. Thus, in relation to the dynamics presented by gender and power, participatory methodologies need to be keenly aware of the underlying processes which may limit the extent to which voices from a diverse cross-section are heard and may actually perpetuate these structures.

Although Dilger (2003) reported the self-reflexivity of young people in Tanzania, and their active role in shaping their sexual and social lives, he also concludes that while integrating their views, perspectives and experiences may be a promising way of ensuring messages are culturally sensitive, it should not be presumed that it is *the* solution to the fight against AIDS. Indeed, he draws on Giddens (1999) to assert that it is not the content of their reflections that should be the focal point of AIDS programs since objects of reflection are subject to change over time and space and from individual to individual. Rather, it is the process of articulating inconsistencies and ambiguities in their young lives and posing solutions that is instrumental in fuelling change.

The preceding chapters have discussed the changing nature of the construction of gender in various contexts with reference to power relations and risk. Consequently, this chapter has sought to bring together the findings and discuss the implications for designing contextually sensitive programs rooted in an understanding of young people's lives. The concluding chapter will further sum up the objectives and results of the case study, and discuss in a broader context the implications of the findings.

¹²⁷ Vygotski (1978) proposed that "guided participation" or facilitation by adults is the key to enabling young people to make a meaningful contribution. Similarly, the "Ladder of Participation" was created to conceptualize levels of youth participation whereby the bottom rung signifies tokenistic involvement, while the upper rungs represent more significant contributions in peer education projects, youth-run magazines and newspapers and sports teams (Hart, 1992).

Chapter 9: Challenging AIDS at its Gendered Roots

This chapter will summarize the main focus of the case study and its findings in order to provide a brief overview of the thesis, followed by recommendations for future research.

9.1 Synopsis of the study

In recognition that AIDS is a highly gendered pandemic, this thesis has sought to explore the shifting nature of young people's gendered identities in Kilimanjaro through a case study of a secondary school. The study has aimed to broaden understandings of how these contradictory gender norms may contribute to heightening risk and vulnerability (which, as discussed previously are highly subjective concepts) of HIV/AIDS for girls and boys and the implications of this for designing contextually sensitive school-based HIV/AIDS programs rooted in an understanding of the complexity of young people's lives.

By probing the intersection of tradition and modernity, the environment in which young people shape their gendered identities in a state of change and flux has been highlighted. The construction and reconstruction of gendered identities based on the contradictions between expectations from parents, whom are seen in a more traditional light; as opposed to schools, communities and peers which seem to be more modern influences illustrated the juxtaposition between perceptions of tradition and modernity and the expectations and norms bound up in each. Though young people typically dichotomized tradition and modernity, masculinity and femininity, continuity is stressed as being a more productive and accurate conceptualization and is evident in the way in which attempts are made to merge elements of both, in a form of "hybridity".

How these conflicting norms, expectations, and messages regarding gender, sexuality and HIV/AIDS are played out in relationships has also been discussed using the theory of gender and power, articulated by Connell (1987), which provides a useful tool for understanding how power operates on both a formal and informal level in gender relations and which may heighten risk and/or vulnerability of HIV/AIDS. Extending the theory to account for the impact of tradition and modernity, the three interlinked structures, when applied to the school as an institution with clear "gender regimes" underscored the paradoxical nature of young people's lives.

9.2 Summary of the Main Findings

The changes Tanzanian society has seen including increased urbanization and familial dislocation, and a more outward orientation in general have been discussed. In Chapter 2, the confusion of teachers as to whether they should still be teaching and emphasizing socialist principles or whether education should be more in line with the neo-liberal policies the government is pursuing is one example. The confusion of young people in regards to mixed messages they get on the position and status of girls and women in society is another. While sexuality is generally constrained in language and practice traditionally, influences from mass media abound with images promoting it. At home, girls are expected to fulfil traditional domestic roles, while boys are given free reign, but at the school they are on much more equal footing. These contradictions in roles, behaviours and expectations may produce confusion for both girls and boys in shaping their gendered and sexual identities. Violence and abuse in relations may be symptomatic of the frustrations and confusion brought on by such changes, since when the gender lines become blurry, boys and men may attempt to symbolically and physically solidify their status. It might be that the push and pull factors associated with tradition and modernity constitutes a risk factor on account of the state of confusion that arises from their oppositional set of expectations and norms. On the other hand, it might mark the emergence of shared norms and values (which may be harmful or beneficial) since as mentioned before, the state of dissonance can be uncomfortable and undesirable.

In particular, the consequences of societal changes have been looked at from the angle of how sex education has been altered. The findings indicate that the school has not managed to adequately fill the so-called “void” or “moral vacuum” left in the absence of traditional structures. Yet, the question must be raised in light of often counter-productive romanticized visions of the past: in the era of HIV/AIDS would traditional modes of sex education have been adequate to deal with this social epidemic which breeds in conditions of silence? The fact that AIDS has come to be understood as a social rather than purely biomedical one has meant that increased communication is of the utmost importance. Simply being told about menstruation, how to please your husband and fulfil your duties as a wife by your aunt for instance, falls dramatically short of the kind of dialogue, openness, and negotiation skills required in the era of HIV/AIDS. This type of gendered socialization only reinforced women’s subordination to men. Traditional methods of sex education bear similarities to what Freire called “banking education”.

Tanzanian society is not stagnant: the problems of today such as HIV/AIDS are not the same as they once were. Thus, the kind of education that is required must also shift as new skills such as

critical thinking and communication are needed. The examination of Freire's theory of critical consciousness as a pedagogy for liberation and empowerment holds enormous transformative potential, yet must also be viewed pragmatically. Classrooms in Tanzania are often overcrowded and staffed by teachers who may lack the resources, skills, qualifications and the desire to teach students about HIV/AIDS. Furthermore, schools may not be the health promoting environments necessary for providing a safe, enabling environment.

The school is not the sole, nor the primary source of information for many young people today. Given that students are exposed to a variety of sources of conflicting information, a concerted effort to create a united stance on fighting HIV/AIDS is important. For instance, the conflictual information on condoms from the church, mass media, school, and peers creates a tension whereby students are forced to choose whom to believe. Since the school will likely continue to be an important venue targeted by governments and donors to disseminate information to students about sex, condoms and HIV/AIDS, this means that every effort must be made to devise contextually sensitive programs that clarify, rather than muddy the waters further.

All of these findings point to the need for a forum, perhaps on a variety of levels. Young people at the national and local level in Tanzania need and seem to want an outlet where they can actively express themselves, raise questions and debate the changes happening in Tanzanian society. Schools have key role to play in creating such a space for young people, where power (in its positive and negative forms, as discussed in Chapter 3) can be discussed, where gender norms embodied by Connell's structures and gender regimes can be challenged and transformed, and where sexuality and the concerns and pressures young people currently face can be brought out in the open so that HIV/AIDS does not thrive in silence and violence. As stated in regards to their participation however, vigilant attention must be paid to ensure that these same structures are not reproduced in the forums. Teachers have an instrumental role in facilitating this process and indeed being a part of it themselves. As it has been argued, it is perhaps more the process of initiating and stimulating discussion that is important in involving young people in HIV/AIDS educational programming. In what may result in a snow-ball effect, parents and communities may benefit from the transformative power of consciousness raising and enabling pedagogies

9.3 Recommendations for Future Research

The limits placed on the representivity of this small-scale case study point to the need for more large-scale projects in this area. Refining research instruments such as the questionnaire used in this study, utilizing larger samples of young people in Tanzania and following cohorts over long

periods of time to probe a wide variety of interrelated issues such as gender, age, socio-economic status, the urban-rural disparity, educational attainment and religion at the local, regional and national level is necessary to yield more reliable data to inform program design. In short, a deeper understanding of the barriers and facilitators operating at different levels (such as wider society, the school, the home, peers and at the individual level) underpinning sexual behaviour is needed. Social change and tensions between tradition and modernity are also central to understanding to how programmatic responses can cope with this. Setel's (1999) account which situated an understanding of sexual life in Kilimanjaro within a broader framework of historical, economic, social and demographic factors was a good starting point for understanding the multidimensional nature of sexuality. More instances of in-depth ethnographic work of similar to that of Setel and Stambach are needed in the Kilimanjaro region to understand the current situation. Clearly, more information on globalization and social change and the impact this is having on the transition to adulthood at the national and local levels in Tanzania is necessary for understanding the sexual behaviour and risk of young people and what this means for program design. Understanding how young people grapple, deal with and negotiate the ambiguities and contradictions in their lives demands further attention.

More empirical, interdisciplinary research that investigates and quantifies the nature and source of gender norms underlying sexual behaviour and identities are needed. Issues such as pressure to conform to gender norms, examples of counter-normative behaviour, how young people begin relationships and the dynamics inherent in them, peer pressure, harassment, abuse and rape, which sources of information are most sought after and trusted, relations with teachers and parents and how pregnancy and risk of HIV/AIDS are perceived through gendered lenses are some examples of broad topics that need further investigation.

The plethora of sources disseminating information on HIV/AIDS and the subsequent confusion that young people must contend with points to the need for increased research on how to integrate various stakeholders in the process so that a concerted effort based on shared values and interests can be initiated. The tension between traditional and emerging modern institutions may be diffused by initiating a forum for input from a variety of sources from the community to contribute to HIV/AIDS education. Addressing the role of the religious community and their influence on the school and community and integrating diverse views of stakeholders is complex, but more experimentation and documentation of what works and what does not needs to be done.

The social context of environment and relationships amongst young people also deserves more attention in HIV/AIDS programs. Examining the balance of power between boys and girls for instance, would yield richer data on how young people interact and negotiate on issues such as sex

and condom use that would be useful in designing contextually sensitive programs. Using reference points familiar to them, like the game “Chick ‘n Chips” may be ideal for stimulating discussion about issues such as abuse, rape, respect, trust, equality and sexuality in general.

A more balanced research agenda which addresses the concerns, challenges, desires, fears and expectations of both girls and boys is essential. Hodgson (2001:108) asserts that:

“Since gender, like patriarchal power, is not a monolithic, ahistorical entity, but produced and reproduced through the contested ideas and actions of men as well as women, we must analyze masculinities as well as femininities, men as well as women, male dominance as well as female subjugation”.

Homogenized views of girls and women at risk neglect the complex manner in which boys and men are similarly adversely affected by societal norms. It has been stressed that challenging dominant masculine hegemonies and *status quo* power structures is unlikely to succeed unless it can be shown that the changes will benefit all. Thus, listening to the voices of boys and men is important.

More research on the school environment itself is needed to identify areas of concern and which may compromise its ability to serve as a health promoting environment. Research into pre and in-service teacher training and curriculum design in order to build the capacity of teachers is urgent. Addressing the concerns articulated by young people, such as the girls’ in this study which cited their prime concern as being harassed by *dala dala* drivers may point to the need for the government to address this issue.¹²⁸

It is also clear that school-based prevention programs must be rooted in an understanding of the context of young people’s lives, and their perceptions of the problems they face. In relation to risk, it has been pointed out that young people may assess risk from a different standpoint adopted by prevention programs. Often more immediate concerns such as survival, the threat of pregnancy or violence, or simply gratification (the references to *starehe* emphasized this) take precedence to abstract understandings of an illness which may take years to develop. The invincibility of youth, unconscious desires, fatalistic attitudes and even an attraction to risk situations may underlie behaviour. This presents a significant challenge for school-based prevention programs, and means that an understanding of young people’s reference points is essential, though maybe not always possible given that behaviour is informed by a multitude of contextual factors. Identifying and addressing these contextual factors through a forum where young people can discuss, debate and critically reflect on the pressures and conflicts in their social and sexual lives is perhaps one of the

¹²⁸ A Tanzanian colleague explained that school buses were experimented with in the past, but due to corruption it fell into disuse. However, if further research identified this problem as a significant area of concern for girls’ safety and well-being, an attempt to revive the use of school buses should be experimented with.

most important findings of this study. Notably, the boys in this study indicated their need, desire and appreciation for open, frank discussion on traditionally sensitive topics. This promising articulation must be built upon and used as an entry point for increased dialogue in school-based HIV/AIDS education programs.

Looking at HIV/AIDS educational programming itself, it is clear that as the number of programs aiming to promote gender empowerment and transformation burgeons, research must keep pace in evaluating its outcomes to identify what works and what does not. Establishing measurable outcomes in life skills curricula is not straightforward. As mentioned this is an amorphous term that needs to be conceptually clarified. In addition, programs must be built on a solid understanding of the realities and contexts of the classroom, which will likely necessitate a comprehensive curriculum overhaul to prioritize time and resources to implementing and monitoring an HIV/AIDS program.

9.4 The Way Forward

The findings of this thesis highlight some of the crucial roles that education must work to address such as fostering the development of critical thinking and communication skills that will not only enable and empower young people to protect themselves from HIV/AIDS and other diseases, but will also promote healthier relationships between the sexes based on mutual understanding and respect. The importance of fostering communication and breaking the silence between the sexes has been stressed. Since dialogue inherently consists of at least two parties, it is axiomatic that the communication (both talking and listening) capabilities of boys as well as girls must be improved simultaneously. The discussion on gender and power has drawn this point out further.

Translating theory to practice takes a notoriously long period of time: a luxury that a country such as Tanzania cannot afford. The urgency of the task of designing contextually sensitive programs that equip and enable individuals to take control of their lives, particularly in regards to HIV/AIDS is a challenging one.¹²⁹ There is a voluminous literature identifying the ways in which gender shapes risk and vulnerability; now an emerging cadre of professionals, researchers, policy makers and educators need to engage in the process of establishing reliable indicators within their local contexts and strategize how best to address underlying gendered structural constraints within the framework of school-based HIV/AIDS programs, while at the same time engaging in a degree of reflexivity and critical thinking about their own role in the process.

¹²⁹ See Appendix 1 for a thematically compiled list of programmatic recommendations that have emerged from the study.

References

- Adomako Ampofo, A.A., Beoku-Betts, J., Njambi, W.N., Osirim, M. (2004). Women's and Gender Studies in English-Speaking Sub-Saharan Africa. A Review of Research in the Social Sciences. *Gender & Society* 18, (6): 685-714.
- Ählberg, B.M. (1994). Is There a Distinct African Sexuality? A Critical Response to Caldwell. *Africa*, 64, (2): 220-242.
- Ählberg, B.M., Jylkas, E., Krantz, I. (2001). Gendered construction of sexual risks: implications for safer sex among young people in Kenya and Sweden. *Reproductive Health Matters* 9, (17): 26-36.
- Ajzen, I. (1988). *Attitudes, personality, and behavior*. Chicago: Open University Press.
- Ajzen, I., Fishbein, M. (1980). *Understanding attitudes and predicting social behavior*. Englewood Cliffs, NJ: Prentice Hall.
- Altman, D. (1994). *Power and Community: Organizational and Cultural Responses to AIDS*. London: Taylor and Francis.
- Anderson-Levitt, K.M., Bloch, M., Soumare, A.M. (1998). Inside Classrooms in Guinea: Girls' Experiences. In: Bloch, M., Beoku-Betts, J.A., Tabachnick, B.R. (eds.), *Women and Education in Sub-Saharan Africa: Power, Opportunities and Constraints*, pp.99-130. London: Lynne Rienner Publishers.
- Auerbach J, Wypijewska C, Brodil K. (1994). *AIDS and behavior: An integrated approach*. Washington D.C.: National Academy Press.
- Bandura, A. (1977). *Social Learning Theory*. Eaglewood Cliffs, NJ: Prentice Hall.
- Bandura, A. (1989). Perceived self-efficacy in the exercise of control over AIDS infection. In: Mays, V.M., Albee, G.W., Schneider, S.F. (eds.), *Primary Prevention of AIDS*, pp. 128-141.
- Barnett, T., Whiteside, A. (2002). *AIDS in the Twenty-First Century. Disease and Globalization*. Hampshire: Palgrave MacMillian.
- Baylies, C., Bujra, J. (2000). Responses to the AIDS Epidemic in Tanzania and Zambia. In: Baylies & Bujra (eds.), *AIDS, Sexuality and Gender in Africa: Collective strategies and struggles in Tanzania and Zambia*, pp. 25-59. London: Routledge.
- Beck, U. (1992). *Risk Society: Towards a New Modernity*. London: Sage Publications.
- Becker, C., Guenther-Grey, C., Raj, A. (1998). Community Empowerment Paradigm Drift and the Primary Prevention of HIV/AIDS. *Social Science & Medicine* 46, (7): 831-842.

- Bendera, S. (1999). Promoting Education for Girls in Tanzania. In: Heward, C., Bunwaree, S. (eds.), *Gender, Education and Development. Beyond Access to Empowerment*, pp. 117-132. London: Zed Books.
- Bergsjø, P. (1996). *Action Against AIDS. The MUTAN Report*. Center for International Health, University of Bergen.
- Bledsoe, CH., Cohen, B. (1993). *Social Dynamics of Adolescent Fertility in sub-Saharan Africa*. Washington DC: National Academy Press.
- Bloch, M., Vavrus, F. (1998). Gender and Educational Research, Policy, and Practice in Sub-Saharan Africa: Theoretical and Empirical Problems and Prospects. In: Bloch, M., Beoku-Betts, J.A., Tabachnick, B.R. (eds.), *Women and Education in Sub-Saharan Africa: Power, Opportunities and Constraints*, pp.1-24. London: Lynne Rienner Publishers.
- Boler, T., Adoss, R., Ibrahim, A., Shaw, M. (2003). *The Sound of Silence: Difficulties in Communicating on HIV/AIDS in Schools*. London: ActionAid.
- Boler, T., Aggleton, P. (2004) Life Skills-based education for HIV prevention: a critical analysis. *Policy & Research*: issue 3. London: Save the Children, ActionAid.
- Bond, G.C., Gilliam, A. (1994). Introduction. In: Bond, G.C., Gilliam, A. (eds.), *Social Construction of the Past. Representation as Power*, pp.1-13. London: Routledge.
- Bourdieu, P. (1977). *Outline of a theory of practice*. Cambridge: Cambridge University Press.
- Bourdieu, P. (1990). *The Logic of Practice*. Oxford: Polity Press.
- Brenner, M.B. (1998). Gender and Classroom Interactions in Liberia. In: Bloch, M., Beoku-Betts, J.A., Tabachnick, B.R. (eds.), *Women and Education in Sub-Saharan Africa: Power, Opportunities and Constraints*, pp.131-156. London: Lynne Rienner Publishers.
- Brock-Utne, B. (2000). *Whose Education for All? The Recolonization of the African Mind*. New York: Falmer Press.
- Buchert, L. (1994). *Education in the Development of Tanzania: 1919-90*. London: James Currey.
- Bujra, J. (2000). Risk and Trust: Unsafe sex, Gender and AIDS in Tanzania. In: Caplan, P. (ed.), *Risk Revisited*, pp.59-84. London: Pluto Press.
- Butler, J. (1990). *Gender Trouble*. London: Routledge.
- Butler, J. (1999). *Gender trouble: feminism and the subversion of identity*. New York: Routledge.
- Caceres CF, Rosasco AM, Mandel JS, and Hearst N. (1994) Evaluating a school-based

- intervention for STD/AIDS prevention in Peru. *Journal of Adolescent Health, 15*: 582-591.
- Campbell, C., MacPhail, C. (2002). Peer Education, Gender and the Development of Critical Consciousness: Participatory HIV Prevention by South African Youth. *Social Science & Medicine, 55*: 331-345.
- Campbell, C., Mzaidume, Y. (2002). How can HIV be prevented in South Africa? A social perspective. *British Medical Journal, 324*: 229-32.
- Campbell, B., Lubben, F. (2003). The Provision of a Health Promoting Environment for HIV/AIDS Education: the Case of Namibian Senior Secondary Schools. *International Journal of Educational Development, 23*: 529-542.
- Campbell, C. (2003). *Letting them Die: Why HIV prevention programs fail*. Bloomington: Indiana University Press.
- Carr-Hill, R., Kataboro, J.K., Katahoire, A. (2000). *HIV/AIDS and Education*. Paris: UNESCO Institute of Educational Planning.
- Catania, J., Kegeles, S., & Coates, T. (1990). Towards an understanding of risk behavior: An AIDS risk reduction model (ARRM). *Health Education Quarterly, 17*: 381-399.
- Catechist Department of Diocese of Moshi. (1993). *Spiritual Life and Guidance For Youths in Secondary Schools and Colleges*. Third Seminar of Catholic Teachers Teaching in Secondary Schools and Colleges. Diocese of Moshi.
- Chambers, R. (1984). *Rural Development: Putting the last first*. London: Pearson Education.
- Chambers, R. (1997). *Whose Reality Counts? Putting the First Last*. London: Intermediate Technology.
- Chambers, R. (2004). *Ideas for development: reflecting forwards*. IDS Working Paper 238. XPS Limited, Brighton, UK.
- Chikovore, J. (2004). *Gender Power Dynamics in Sexual and Reproductive Health: a Qualitative study in Chiredzi District, Zimbabwe*. Doctoral Thesis, Umeå University. http://publications.uu.se/umu/fulltext/nbn_se_umu_diva-202.pdf, accessed 20.04.04.
- Chirimuuta, R.C., Chirimuuta, R.J. (1987). *AIDS, Africa and Racism*. Derbyshire: Richard Chirimuuta.
- Colclough, C., Rose, P., Tembon, M. (1998). *Gender Inequalities in Primary Schooling: the role of poverty and adverse cultural practice*. IDS Working Paper No. 78. Brighton, IDS.
- Cohen, L., Manion, L. (1989). *Research Methods in Education* (3rd ed). London: Routledge.

- Connell, R.W. (1987). *Gender and Power: Society, the Person and Sexual Politics*. Cambridge: Polity Press.
- Connell, R.W. (1995). *Masculinities*. Cambridge: Polity Press.
- Connell, R.W. (1996). Teaching the Boys: New Research on Masculinity and Gender Strategies for Schools. *Teachers College Record* 98, (2): 206-235.
- Creighton, C., Omari, C.K. (2000). Introduction: Family and gender relations in Tanzania-inequality, control and resistance. In: Creighton, C., Omari, C.K. (eds.), *Gender Family and Work in Tanzania*, pp.1-16. Burlington: Ashgate Publishing.
- Crewe, E., Harrison, E. (1998). *Whose Development? An Ethnography of Aid*. London: Zed Books.
- Darnell, F., Hoëm, A. (1996). *Taken to Extremes. Education in the Far North*. Oslo: Scandinavian University Press.
- Davis, A.R., Weller, S.C. (1999). The effectiveness of condoms in reducing heterosexual transmission of HIV. *Family Planning Perspective* 31, (6): 272-279.
- De Beauvoir, S. (1997). The Second Sex. In: Gould, C.C. (ed.), *Key Concepts in Critical Theory: Gender*, pp. 3-15. NJ: Humanities Press.
- Dilger, H. (2003). Sexuality, AIDS and the Lures of Modernity: Reflexivity and Morality among Young People in Rural Tanzania. *Medical Anthropology*, 22: 23-52.
- Dowsett, Gary W. (2003). Some Considerations on Sexuality and Gender in the Context of AIDS. *Reproductive Health Matters* 11, (22): 21-29.
- Dunne, M., Leach, F. (2005). *Gendered School Experiences: the impact on retention and achievement in Botswana and Ghana*. UK: DFID.
- Education Sector Development Programme Document. (2000). United Republic of Tanzania.
- Epstein, D. (1998). *Schooling Sexualities*. Buckingham: Open University Press.
- Epstein, D., Elwood, J., Hey, V., Maw, J. (1998). *Failing Boys? Issues in Gender and Underachievement*. Buckingham: Open University Press.
- Epstein, D., Morrell, R., Molestane, R., Unterhalter, E. (2004). Gender and HIV/AIDS in Africa South of the Sahara: Intervention, Activism and Identities. *Transformation: Critical Perspectives on Southern Africa*, 54: 1-16.
- Erdtsieck, J. (2001). Encounters with forces of pepo: Shamanism and healing in East Africa. *Tanzanet Journal* 1,(2): 1-10.

- Evans, R. (2002). Poverty, HIV and barriers to education: street children's experiences in Tanzania. *Gender and Development* 10, (3):51-62.
- Fishbein, M., Ajzen, I. (1975). *Belief, attitude, intention and behaviour. An introduction to theory and research*. Reading, MA.: Addison-Wesley.
- Fishbein, M., & Middlestadt, S. E. (1989). Using the Theory of Reasoned Action as a framework for understanding in changing AIDS-related behaviors. In V. M. Mays, G. W. Albee, & S. F. Schneider (eds.), *Primary prevention of AIDS: Psychological approaches*, pp. 93-110. Newbury Park, CA: Sage.
- Fishbein, M. (2000). The role of theory in HIV prevention. *AIDS Care* 12, (3): 273-278.
- Fitzgerald, Stanton, Terreri, Shipena, X, Kahihuata, Ricardo, Galbraith, De Jaeger. (1999). Use of Western-based risk reduction interventions targeting adolescents in an African setting. *Journal of Adolescent Health*, 25: 52-61.
- Foucault, M. (1978). *A History of Sexuality, Vol. 1*. New York: Pantheon.
- Freire, P. (1972). *Pedagogy of the Oppressed*. London: Penguin Books.
- Fuglesang, A. (1982). *About Understanding-ideas and observations on cross-Cultural communication*. Uppsala: Dag Hammarskjöld Foundation.
- Gallant, M., Maticka-Tyndale, E. (2004). School-based HIV Prevention Programmes For African Youth. *Social Science & Medicine*, 58:1337-1351.
- Garbus, L. (2004). *HIV/AIDS in Tanzania*. AIDS Policy Research Center, University of California San Francisco. <http://ari.ucsf.edu/policy/profiles/Tanzania.pdf>, retrieved 22.12.04.
- Giddens, A. (1979). *Central Problems in Social Theory: Action, Structure and Contradiction in Social Analysis*. London: Macmillan.
- Giddens, A. (1991). *Modernity and Self-Identity: Self and Society in the Late Modern Age*. Cambridge: Polity Press.
- Gramsci, A. (1971). *Selections from the Prison Notebooks*. London: Lawrence & Wishart.
- Grunseit, A., Kippax, S., Aggleton, P., Baldo, M., Slutkin, G. (1997). Sexuality education and young people's behavior: a review of studies. *Journal of Adolescent Research* 12, (4): 421-53.
- Gupta, G.R. (2000). *Gender, sexuality and HIV/AIDS: the what, the why and the how*. Washington, D.C.: International Center for Research on Women (ICRW).
- Gupta, G.R., Weiss, E. (1993). Women's lives and sex: Implications for AIDS prevention. *Culture, Medicine and Psychiatry*, 17: 351-369.

- Gupta, G.R., Whelan, D., Allendorf, K. (2002). *Integrating Gender into HIV/AIDS Programmes*. Washington, D.C.: International Center for Research on Women (ICRW), World Health Organization.
- Gyekye, K. (1997). *Tradition and Modernity. Philosophical Reflections on the African Experience*. New York: Oxford University Press.
- Habermas, J. (1984). *Theory of communicative action, Vol. 1*. Boston: Beacon Press.
- Hagquist, C., Starrin, B. (1997). Health Education in Schools-from information to empowerment models. *Health Promotion International, 12*: 225-232.
- Hakielimu. (2005). *What is PEDP?* www.hakielimu.org, accessed 10.02.05.
- Haram, L. (1995). Negotiating sexuality in times of economic want: the young and modern Meru women. In: Klepp, K.-I., Biswalo, P., and Talle, A (eds.), *Young People at Risk: Fighting AIDS in Northern Tanzania*, pp. 31-48. Oslo: Scandinavian University Press.
- Haram, L. (1999). *Women out of sight: modern women in gendered worlds: the case of the Meru in Northern Tanzania*. Doctoral Thesis. Department of Social Anthropology, University of Bergen.
- Haram, L. (2004). AIDS and risk: the handling of uncertainty in northern Tanzania. *Culture, Health and Sexuality*, www.tandf.co.uk/journals, retrieved 29.01.05.
- Harrison, A., Xaba, N., Kunene, P. (2001). Understanding safe sex: gender narratives of HIV and pregnancy prevention by rural South African school-going youth. *Reproductive Health Matters 9*, (17): 63-71.
- Hart, R. (1992). *Children's Participation: From Tokenism to Citizenship*. Innocenti Essays No. 4. New York: UNICEF.
- Haywood, C., Mac an Ghail, M. (2003). *Men and masculinities: theory, research and social practice*. Buckingham: Open University Press.
- Heguye, E. (1995). Young People's Perception of Sexuality and Condom Use in Kahe. In: Klepp, K.-I., Biswalo, P. & Talle, A (eds.), *Young People at Risk. Fighting AIDS in Northern Tanzania*, pp. 107-120. Oslo: Scandinavian University Press.
- Heward, C. (1999). Introduction: The New Discourses of Gender, Education and Development. In: Heward, C., Bunwaree, S. (eds.), *Gender, Education and Development, Beyond Access to Empowerment*, pp. 1-14. London: Zed Books.
- Hodgson, D. (2001a). Of Modernity/Modernities, Gender, and Ethnography. In: Hodgson, D (ed.), *Gendered Modernities: Ethnographic Perspectives*. New York: Palgrave.
- Hodgson, D. (2001b). "Once Intrepid Warriors": Modernity and the Production of Masaai Masculinities. In: Hodgson, D (ed.), *Gendered Modernities: Ethnographic Perspectives*. New York: Palgrave.

- Hogle, J. (2002). *What Happened in Uganda? Declining HIV Prevalence, Behavior, Change, and the National Response*. Washington: USAID.
- Hoyle, R., Harris, M., Judd, C. (2002). *Research Methods in Social Relations*. USA: Thompson Learning.
- Human Rights Watch. (2001). *Scared at School: Sexual Violence Against Girls in South African Schools*. Washington: Human Rights Watch.
- Hyden, G. (1980). *Beyond Ujamaa in Tanzania: Underdevelopment and an un-captured Peasantry*. London: Heinemann Educational Books.
- Jellema, A., Philips, B. (2004). *Learning to Survive: How education for all would save millions of young people from HIV/AIDS*. Brussels: Global Campaign for Education.
- Jemmott, J. B., Jemmott, L. S., & Fong, G. T. (1998). Abstinence and safer sex: HIV risk reduction interventions for African-American adolescents. *Journal of the American Medical Association*, 279:1529-1536.
- Jewkes, R. (2000). Evaluating community development initiatives in health promotion. In: Thorogood, M., Coombes, Y. (eds.), *Evaluating Health Promotion. Practice and Methods*. London: Oxford University Press.
- Kaaya, S.F., Flisher, A.J., MBwambo, J.K., Schaalma, H., Aarø, L.E., Klepp, K.-I. (2002). A Review of Studies of Sexual Behavior of school students in sub-Saharan Africa. *Scandinavian Journal of Public Health*, 30: 148-160.
- Kaiser Network. www.kaisernetwork.org/aids2002, accessed 03/02/05.
- Kapiga, S.H., Nachtigal, G., Hunter, D.J. (1991). Knowledge of AIDS among secondary school pupils in Bagamoyo and Dar es Salaam, Tanzania. *AIDS*, 5: 325-328.
- Kinsman, J., Harrison, S., Kengeya-Kayondo, J., Kanyesigye, E., Musoke, S., Whitworth, J. (1999). Implementation of a comprehensive AIDS education programme for schools in Masaka District, Uganda. *AIDS Care* 11, (5): 591–601.
- Kirby, D., Barth, R., Leland, N., & Fetro, J. (1991). Reducing the risk: A new curriculum to prevent sexual risk-taking. *Family Planning Perspectives* 23, (6): 253–263.
- Kirby D. (2001) *Emerging answers: research findings on program to reduce teen pregnancy*. Washington, DC: National Campaign to Prevent Teen Pregnancy.
- Kirby, D., Coyle, K. (1997). School-Based Programs to Reduce Sexual Risk Taking Behavior. *Children and Youth Services Review* 19, (5/6): 415-36.
- Kitzinger, J., Barbour, R. (1999). Introduction: the challenge and promise of focus groups. In: Barbour, J., Kitzinger, R.S. (eds.), *Developing focus group research: politics, theory and practice*, pp. 1-11. London: Sage.

- Klepp, K.-I., Ndeki, S.S., Seha, A.M., Hannan, P., Lyimo, B.A., Msuya, M.H., Irema, M.N., Schreiner, A. (1994). AIDS education for primary school children in Tanzania: An evaluation study. *AIDS* 8, (8): 1157-1162.
- Klepp, K.-I., Mnyika, K.S., Ole-King'ori, N., Bergsjø, P. (1995). The Local HIV/AIDS Epidemic in Arusha and Kilimanjaro. In: Klepp, K.I., Biswalo, P., & Talle, A. (eds.), *Young People at Risk. Fighting AIDS in Northern Tanzania*, pp. 3-17. Oslo: Scandinavian University Press.
- Klepp, K.-I., Ndeki, S.S., Leshabari, M.T., Hannan, P., Lyimo, B.A. (1997). AIDS education in Tanzania: Promoting risk reduction among primary school children. *American Journal of Public Health* 87, (12): 1931-36.
- Klepp, K.-I., Lugoe, W.L. (1999). AIDS education in Tanzania: Focus on school children. *The AIDS Reader* 9, (4): 276-281.
- Klouman, E. (2004). *Women at risk: population-based research on HIV, sexually transmitted infections and female genital cutting in Northern Tanzania*. Unpublished Doctoral Thesis. Faculty of Medicine, University of Oslo.
- Leach, F., Fiscian, V., Kadzamira, E., Lemani, E., Machakanja, P. (2003). *An Investigative Study of the Abuse of Girls in African Schools*. DFID Educational Research No. 54, London: DFID.
- Leach, F., Machakanja, P. (2000). *Preliminary Investigation of the Abuse of Girls in Zimbabwean Junior Secondary Schools*. DFID Education Research No. 39, London: DFID.
- Levy, S. R., Perhats, C., Weeks, K., Handler, A., Zhu, C., & Flay, B. R. (1995). Impact of a school-based AIDS prevention program on risk and protective behavior for newly sexually active students. *Journal of School Health* 65, (4): 145-151.
- Lewinson, A.S. (2000). Renovating the modern home: Gender, weddings and marriage among professionals in Dar es Salaam. In: Creighton, C., Omari, C.K. (eds.), *Gender Family and Work in Tanzania*, pp.266-291. Burlington, VT: Ashgate Publishing.
- Lie, G.T., Lothe, E.A. (2002). "We do not speak so much about 'Risk Groups' any longer, we know we are all at risk". *A Qualitative Evaluation of KIWAKKUKI Women Against AIDS in Kilimanjaro Region, Tanzania*. Hemil-Rapport Nr. 4, Senter for forskning om helsefremmende arbeid, miljø og livsstil. University of Bergen.
- Liljeström, R., Masanja, P., Mkai, C., Tumbo-Masabo, Z. (1994). The pubescent girl-past and present. In: Tumbo-Masabo, Z. & Liljeström, R. (eds.), *Chelewa, Chelewa. The Dilemma of Teenage Girls*, pp. 35-52. Uppsala: Nordiska Afrikainstitutet.
- Lindhe, V. (1999). *Greening Education. Prospects and Conditions in Tanzania*. Acta Universitatis Upsaliensis. *Uppsala Studies in Education* 81. Uppsala.
- Lips, H.M. (1991). *Women, Men, and Power*. California: Mayfield Publishing Company.

- Lugoe, W. (1996). *Prediction of Tanzanian Students' HIV Risk and Preventative Behaviors*. Doctoral thesis, Faculty of Psychology. University of Bergen, Norway.
- Lupton, D. (1995). *The Imperative of Health. Public Health and the Regulated Body*. London: Sage.
- Mac an Ghail, M. (1994). *The Making of Men: Masculinities, Sexualities and Schooling*. Buckingham, UK: Open University Press.
- Machel, J. (2001). Unsafe sexual behavior among schoolgirls in Mozambique: a matter of gender and class. *Reproductive Health Matters* 9, (17): 82-90.
- Main, D. S., Iverson, D. C., McGloin, J., Banspach, S. W., Collins, K., Rugg, D., & Kolbe, L. J. (1994). Preventing HIV infection among adolescents: Evaluation of a school-based education program. *Preventive Medicine*, 23: 409–417.
- Maman, S., Mbwanbo, J., Hogan, M., Kilonzo, G., Sweat, M., Weiss, E. (2001). *HIV and Partner Violence: Implications for HIV Voluntary Counseling and Testing Programs in Dar es Salaam, Tanzania*. The Population Council, Inc.
- Masatu, M.C., Klepp, K.I., Kvåle, G. (2001). Use of health services and reported satisfaction among primary school adolescents in Arusha, Tanzania. *Journal of Adolescent Health*, 28: 278-287.
- Masatu, M.C., Kvåle, G., Klepp, K.I. (2003). Reported sources and perceived credibility of reproductive health information among primary school adolescents in Arusha, Tanzania. *Scandinavian Journal of Public Health*, 31: 216-223.
- Mead, G.H. (1934). *Mind, Self, and Society*. Chicago, IL: University of Chicago Press.
- Measure: National AIDS Control Programme, Tanzania; and Bureau of Statistics, Tanzania. (2001). *AIDS in Africa During the Nineties: Tanzania*. Carolina Population Center, University of North Carolina at Chapel Hill.
- Merton, R. (1975). *Social Theory and Social Structure*. New York: Free Press.
- Mgalla, Z., Schapink, D., Boerma, J.T. (1998). Protecting School Girls Against Sexual Exploitation: A Guardian Programme in Mwanza, Tanzania. *Reproductive Health Matters* 6, (12): 19-30.
- Ministry of Education and Culture. (2003). *Basic Statistics in Education*. Dar es Salaam: Ministry of Education and Culture.
- Mirembe, R., Davies, L. (2001). Is Schooling a Risk? Gender, Power Relations and School Culture in Uganda. *Gender and Education* 13, (4): 401-416.
- Mitchell, C., Smith, A. (2002). Changing the Picture: Youth, Gender and HIV/AIDS Prevention Campaigns in South Africa. *Canadian Woman Studies* 21, (2): 56-62.

- Mmbaga, R.D. (2002). *The Inclusive Classroom in Tanzania: Dream or Reality?* Doctoral Thesis. Stockholm: Institute for International Education.
- Moland, Karen Marie. (2002). *Giving Birth in Kilimanjaro: The politics of knowledge in moral contexts*. Doctoral thesis. Center for International Health, University of Bergen.
- Morris, M. (1997). Sexual networks and HIV. *AIDS*, 11: 209-216.
- Mzinga, J. (2002). Changing Gender Roles in Tanzania. *Sexual Health Exchange* (4). www.tgnp.co.tz, accessed 11.01.05.
- National Bureau of Statistics & Kilimanjaro Regional Commissioner's Office. (2002). *Kilimanjaro Region Socio-Economic Profile (2nd Ed.)*.
- Ndeki, S.S., Klepp, K.-I., Mliga, G.R. (1994). Knowledge, perceived risk of AIDS, and sexual behavior among primary school children in two areas of Tanzania. *Health Education Research*, 9: 133-138.
- Ndeki, S.S., Klepp, K.-I., Seha, A.M., Leshabari, M.T. (1994). Exposure to HIV/AIDS information, AIDS knowledge, perceived risk and attitudes toward people with AIDS among primary school children in Northern Tanzania. *AIDS Care* 6, (2): 183-191.
- Ndeki, S., Klepp, K.-I., Irema, M., Lyimo, B., Msuya, M. (1995). Ngao: AIDS Education for Primary School Children. In: Klepp, K.-I., Biswalo, P., & Talle, A. (eds.), *Young People at Risk. Fighting AIDS in Northern Tanzania*, pp. 133-148. Oslo: Scandinavian University Press.
- Nnko, S., Pool, R. (1997). Sexual discourse in the context of AIDS: dominant themes on adolescent sexuality among primary school pupils in Magu district, Tanzania. *Health Transition Review* 3, (7): 85-90.
- Oldersma, J., Davis, K. (1991). Introduction. In: Oldersma, J., Davis, K., Leijenaar, M. (eds.). *The Gender of Power*, pp. 1-14. London: Sage.
- Omari, C.K., Mbilinyi, D.A.S. (2000). Born to be less equal: The predicament of the girl child in Tanzania. In: Creighton, C., Omari, C.K. (eds.), *Gender Family and Work in Tanzania*, pp.292-314. Burlington, VT: Ashgate Publishing.
- Parsons, T. (1952). *The Social System*. London: Tavistock.
- Piaget, J. (1937). *The Construction of Reality in the Child*. New York: Ballantine.
- Pick de Weiss S, Loving R.D., Palos, P.A., David, H.P. (1990). Effect of sex education on the sexual and contraceptive practices of female teenagers in Mexico City, *Journal of Psychology & Human Sexuality* 3, (2): 71-93.
- Prochaska, J.O., DiClemente, C.C., & Norcross, J.C. (1992). In search of how people change: Applications to the addictive behaviors. *American Psychologist*, 47: 1102-1114.

- Rajani, R. (2003). *Is Primary Education Heading in the Right Direction? Thinking with Nyerere*. HakiElimu Working Paper Series No. 4. Dar es Salaam.
- Rivers, K., Aggleton, P. (1999). *Adolescent Sexuality, Gender and the HIV Epidemic*. New York: UNDP.
- Rogers, E. M. (1983). *Diffusion of innovations* (3rd ed.). New York: The Free Press.
- Rogers, E.M., Vaughn, P.W., Swalehe, R.M., Rao, N., Svenkerud, P., Sood, S. (1999). Effects of an entertainment-education radio soap opera on family planning behavior in Tanzania. *Studies in Family Planning*, 30: 193-220.
- Rosenstock, I.M., Strecher, V.J., Becker, M.H. (1994). The health belief model and HIV risk behavior change. In DiClemente, R.J., Peterson, J.L. (eds.), *Preventing AIDS: Theories and Methods of Behavioral Interventions*, pp. 5-24. New York: Plenum Press.
- Setel, P. (1995a). *Bo'n town life: youth, AIDS, and the changing character of adulthood In Kilimanjaro, Tanzania*. Doctoral thesis. Department of Anthropology, Boston University.
- Setel, P. (1995b). The Social Context of AIDS Education among Young Men in Northern Kilimanjaro. In: Klepp, K-I., Biswalo, P., & Talle, A. (eds.), *Young People at Risk. Fighting AIDS in Northern Tanzania*, pp. 49-68. Oslo: Scandinavian University Press.
- Setel, P. (1996). AIDS as a Paradox of Manhood and Development in Kilimanjaro, Tanzania. *Social Science & Medicine* 43, (8): 1169-1178.
- Setel, P. (1999). *A Plague of Paradoxes: AIDS, Culture and Demography in Northern Tanzania*. Chicago: University of Chicago Press.
- Shuey D.A., Babishangire B.B., Omiat, S., Bagarukayo, H. (1999) Increased sexual abstinence among in-school adolescents as a result of school health education in Soroti district, Uganda. *Health Education Research: Theory and Practice*, 14: 411-419.
- Shumba, A. (2001). Who guards the guards in schools? A study of reported cases of child abuse in Zimbabwe secondary schools. *Sex Education*, 1, (1): 77-86.
- Silberschmidt, M., Rasch, V. (2001). Adolescent girls, illegal abortions and “sugar-daddies” in Dar es Salaam: vulnerable victims and active social agents. *Social Science & Medicine*, 52: 1815-1826.
- Singhal, A. (2003). *Challenges in Measuring Behavior Change*. In: BCC Network for HIV/AIDS: First Regional Meeting for East, Central and Southern Africa. www.fhi.org , retrieved 13.12.04.
- Stambach, A. (2000). *Lessons from Mount Kilimanjaro: Schooling, Community and Gender in East Africa*. New York: Routledge.
- Stromquist, N. (1990). Women and Illiteracy: The Interplay of Gender Subordination and Poverty. *Comparative Education Review*, 34: 95-111.

- Stromquist, N. (1999). The Impact of Structural Adjustment Programmes in Africa and Latin America. In: Heward, C., Bunwaree, S. (eds.). *Gender, Education and Development, Beyond Access to Empowerment*, pp. 17-32. London: Zed Books.
- Stromquist, N., Monkman, K. (2000). *Globalization and Education: Integration and Contestation Across Cultures*. Lanham, M.D.: Rowman and Littlefield.
- Talle, A. (1995). Bar Workers at the Border. In: Klepp, K.-I., Biswalo, P., & Talle, A. (eds.), *Young People at Risk. Fighting AIDS in Northern Tanzania*, pp. 18-30. Oslo: Scandinavian University Press.
- Tallis, V. (2002). *Gender and HIV/AIDS. Overview Report*. BRIDGE: Institute for Development Studies.
- Tanzania Commission for HIV/AIDS. (2003). *National Multi-Sectoral Strategic Framework On HIV/AIDS: 2003-2007*. <http://www.tanzania.go.tz/pdf/tacaidnsmf.pdf>, accessed 13.04.04.
- Tellis, W. (1997). Application of a case study methodology. *The Qualitative Report* 3,3. <http://www.nova.edu/ssss/QR/QR3-3/tellis2.html>, accessed 11.10.04.
- Tiendrebeogo, G., Meijer, S., Engeberg, G. (2003). *Life Skills and HIV Education Curricula in Africa: Methods and Evaluations*. Technical Paper No. 119. Office of Sustainable Development, Bureau for Africa. Washington: USAID.
- Turner, G., Shepherd, J. (1999). A method in search of a theory: peer education and health promotion. *Health Education Research* 14, (2): 235-247.
- UNAIDS. (1999a). *Gender and HIV/AIDS: Taking Stock of Research and Programmes*. Geneva: UNAIDS.
- UNAIDS. (1999b). *Sex and youth: contextual factors affecting risk for HIV/AIDS. A comparative analysis of multi-site studies in developing countries*. Geneva: UNAIDS.
- UNAIDS. (2001). *Gender and AIDS Almanac*. Geneva: UNAIDS.
- UNAIDS. (2004). *AIDS Epidemic Update*. Geneva: UNAIDS.
- UNESCO. (2003/4). *Gender and Education for All: The Leap to Equality*. Paris: UNESCO.
- UNICEF. (2002). *Situation Analysis of Children in Tanzania*. Dar es Salaam: Government of Tanzania & UNICEF of Tanzania.
- UNICEF. (2003). *Breaking Silence. Gendered & Sexual Identities and HIV/AIDS in Education*. ESAR, UNICEF.

- USAID. (2004). *Tanzania Marketing & Communications: AIDS, Reproductive Health (RH) & Child Survival (CS) (The TMARC Project)*.
www.pspiqc.org/docs/TMARCTOSOW.doc , accessed 13.12.04.
- Vaughan, P. W., Rogers, E. M., Singhal, A., Swalehe, R. M. (2000). Entertainment-education and HIV/AIDS prevention: A field experiment in Tanzania. *Journal of Health Communication*, 5: 81-101.
- Vygotsky, L. (1978). *Mind in society: the development of higher psychological processes*. Cambridge: Harvard University Press.
- Wallace, R., Wolf, A. (1991). *Contemporary Sociological Theory: Continuing the Classical Tradition*. Englewood Cliffs NJ: Prentice Hall.
- Walter, H. J., & Vaughn, R. D. (1993). AIDS risk reduction among a multi-ethnic sample of urban high school students. *Journal of the American Medical Association* 270, (6): 725–730.
- Wamahiu, S.P., Chege, F. (1996). *Empowering Strategy for Dealing with Sexual Harassment and Abuse: A Case Study from Kenya*. Prepared for the African Conference on the Empowerment of Women through Functional Literacy and the Education of the Girl-Child. September 8-13, Kampala, Uganda.
- Warwick, I., Aggleton, P. (2001). *Learning from what young people say about sex, relationships and health, Safe Passages to Adulthood*.
<http://www.socstats.soton.ac.uk/cshr/pdf/learning/learningfrommysay.pdf> ,
accessed 07.09.04.
- Webb, D., Elliot, L. (2002). *Learning to Live: Monitoring and evaluating HIV/AIDS programmes for young people*. UNAIDS & DFID.
- Wellings, K., Macdowall, W. (2000). Evaluating mass media approaches. In: Thorogood, M., Coombes, Y. (eds.), *Evaluating Health Promotion. Practice and Methods*. London: Oxford University Press.
- Wight, D. (2004). *HIV Prevention-State of the art and high priority research areas*. Presentation for Adolescent HIV/AIDS Prevention Seminar, GLOBINF. Oslo.
- Wingood, G., DiClemente, R. (2000). Application of the Theory of Gender and Power to Examine HIV-Related Exposures, Risk Factors, and Effective Interventions for Women. *Health Education & Behavior* 27, (5): 539-565.
- World Bank. (2002). *Education and HIV/AIDS: A Window of Hope*. Washington, D.C: World Bank.
- World Bank. (2003). *Education and HIV/AIDS: A Sourcebook of HIV/AIDS Prevention Programs*. Washington, D.C: World Bank.
- World Health Organization. (1989). *The Health of Youth, Facts for Action: Youth and Reproductive Health*. Geneva: World Health Organization.

World Health Organization. (2001). *Programming for Adolescent Health and Development*. Geneva: World Health Organization.

Yin, Robert. (1989). *Case Study Research: Design and Methods*. New York: Sage.

YouthNet. (2003). *Summary Review: YouthNet Program Assessment Conducted for Tanzania*. Family Health International.

Electronic Resources:

www.id21.org

www.worldbank.org/hipc

www.arushatimes.co.tz

www.hakielimu.org

www.comminit.com

www.chezasalama.com

www.kaisernetwork.org/aids2002

<http://hdr.undp.org/statistics>

<http://www.nova.edu/ssss/QR/QR3-3/tellis2.html>

Appendix 1: Programmatic Recommendations

The perspectives, attitudes, and experiences of the young people and other key informants in this study exposed a number of key issues pertinent to designing contextually sensitive HIV/AIDS educational programs. In exposing the interlocking concepts of gender and power and risk, an outline of key points to will be presented below, which may be overlapping and could exist in multiple categories. The list is not exhaustive; rather, in narrowing the focus it attempts to draw out the main lessons in relation to school-based programming to emerge from the findings of this thesis:

Focus Point: Gender

- Programs should draw greater attention to similarities between girls and boys, with less attention given to traditional ways of dichotomous thinking.
- Encourage reflection on the contradictory experiences young people have at home and in the school in relation to gender. Focus on the benefits to be had by both sexes in more equitable relations.
- Challenge the sexual double standard where boys are encouraged and viewed favourably if they have multiple girlfriends, while girls are regarded as loose and without morals. Explore the mutual benefits of a monogamous relationship, since both boys and girls in this study indicated they wanted a partner who was faithful.
- Trust in negotiating condom use is a significant stumbling block for young people in relationships. Since openness is a precursor to trust, communication skills are extremely important.
- Critical thinking capability should be emphasized.
- Identify and address the frustrations boys experience in trying to live up to the masculine ideal as central to resolving gender power relations that are harmful such as abuse. Promoting positive aspects of the masculine ideal such as responsible parenthood should be focused on.
- Encourage relations built on mutual respect.
- Strong, assertive female role models and males confidently engaging in counter-normative masculine behaviour, including treating females with respect are important to challenging dominant norms.
- Breaking down stereotypes of girls as being materialistic and boys as purely sex driven is important in a dialogue focusing on the common wants and needs in a relationship.
- In terms of pregnancy, promoting the responsibility of both girls and boys, rather than blaming girls, which is counterproductive and unfair. Official policies and attitudes in this respect need to change.
- A mixture of single sex and mixed sex grouping may provide a balance to ensure both girls and boys feel discussing sensitive matters, while at the same time developing interpersonal skills. Condoms and pregnancy affect both sexes for instance, albeit in different ways, and young people need to be able to talk about sensitive issues.
- Abuse and harassment need to be addressed in a cross-curricular approach.
- Encourage more mixing in sports teams to break down gender stereotyped roles.
- Promote female leadership in roles such as prefects. Appoint a head boy and head girl prefect who have same level of power and responsibility.

Focus Point: Risk

- Programs need to be designed based on an understanding of local perceptions of risk. In Kilimanjaro, understandings of AIDS as an accident out of one's control need to be addressed and challenged so that people realize they are in fact active shapers of their own reality.
- Personalize risk using local epidemiological statistics and guest speakers.
- Adequate training in how to minimize risk and vulnerability, including life skills and condom use.

Focus Point: Involving the Community and Parents

- Foster parent-child communication as well as the involvement of elders or other influential figures in the community.
- Work with faith based organizations to ensure messages being sent to students are congruent, particularly in relation to condoms.
- Ensure that in the planning and implementation phases, parental and community leaders contribute and support the program.
- Make parents and the wider community aware of problems with the *dala dala* drivers so that they may be part of the solution.
- Greater communication between the school, teachers and parents might clear up miscommunication, alleviate fears, and open a dialogue.

Focus Point: School-based Programs

- Research has indicated that in Tanzania programs should start early in primary school (Klepp & Lugoe, 1999; Ndeki *et al.*, 1995). This is supported by data collected in this study showing that some young people engage in sex as early as age 7, whether as a result of abuse or early experimentation based on imitating observed sexual behaviour.
- Programs should be age appropriate, and built on the recognition that classes may be comprised of a wide range of ages.
- Utilize local terminology and are build on local understandings.
- Programs should be cognizant of the urban-rural divide.
- Perceptions of violence (through corporal punishment and in relationships) as normative should be challenged.
- A platform is needed where students can debate paradoxes they face, such as contradictory views on condoms, and explore how gender norms are shifting, the implications and the underlying processes.
- Education should focus on young peoples' lives, identities and relationships (sexual and otherwise), not only on bio-medical understandings of AIDS.
- Avoid moralistic tendencies which do not recognize the desires and needs of both boys and girls and ignores the fact that many are already sexually active.
- Correct knowledge on how to use a condom is crucial to maximizing effectiveness.
- Dispel myths connected to transmission and the efficacy of condoms.
- In a co-educational class, the issue of mixed messages (through dress and body language) and intentions should be discussed so that boys and girls can exchange perspectives on relationships.
- Men and boys too must be targeted to sensitize, educate and involve them in the process.
- Peer educators may be able to make a greater impact than traditional chalk and talk methods, though they should not be used uncritically and without adequate training.

Focus Point: The School, Teachers, and Ministry

- A comprehensive curriculum review is needed to prioritize and create time for a life skills or HIV/AIDS program.
- Incorporate gender awareness training into pre-service and in-service teacher education programs.
- Increase communication between teachers and the MoEC.
- Teachers need to learn and utilize alternative pedagogies such as participatory methods in the classroom.
- Increased teacher training on how to deal with students who have been abused or harassed and the development and enforcement of a strict protocol for dealing with such students.
- Programs should be designed with the wide rural-urban disparity in mind.
- Drastically reduce class sizes to 25-30 students in order to maximize effectiveness and interaction.

Appendix 2: Student Questionnaire on Gender, Risk and HIV/AIDS

This questionnaire aims to find out what you, as a student, think and feel about being a young woman or man, and to find out about the sexual lives of adolescents in Kilimanjaro. The information that you give may be helpful in designing HIV/AIDS educational programming and understanding how young people are at risk.

This questionnaire is anonymous. This means that there is absolutely no way for anyone to connect your name with your questionnaire. You should feel free to express your own views, as there are no right or wrong answers. Thank you for taking the time to fill in the questionnaire!

Code# _____

Section 1: Background Information

1. What is your age? _____
2. What is your sex? female
 male
3. What is your tribe? Chagga
 Other Please specify: _____
4. What is your religion? Christian Muslim Other
5. What form are you in at school? _____
6. Please indicate the education level of your mother:
 - didn't finish primary school
 - finished primary school
 - entered, but did not finish secondary school
 - finished secondary school
 - university/college
7. Please indicate the education level of your father:
 - didn't finish primary school
 - finished primary school
 - entered, but did not finish secondary school
 - finished secondary school
 - university/college
8. How do you get to school?
 - walk
 - bus

- taxi
- bicycle
- car

9. What do you like to do in your spare time?

- party
- disco
- bar/night club
- exercise/sports
- other: _____

10. Do you have a girlfriend or boyfriend?

- yes
- no

11. *If* you do, how old is she/he?

12. How long have you been together?

- less than 3 months
- 3-6 months
- 7-12 months
- longer than a year
- I don't have a boyfriend/girlfriend

13. Have you ever had sexual intercourse before?

- yes
- no

14. *If* you have, how old were you when you first had sex?

15. Have you ever had sex without a condom before?

- yes
- no, I have only had protected sex before
- I have never had sex before

16. Have you ever smoked a cigarette before?

- yes
- no

17. Do you smoke cigarettes during the week or on weekends?

- yes
- no

18. Have you ever drank alcohol (beer, wine, spirits) before?

- yes

no

19. Do you drink alcohol during the week or on weekends?

Section 2: These questions find out what your attitudes are towards boys and girls in relation to school. Please use the scale to show how much you agree or disagree with a statement. **Check only ONE box!**

Statement	1 Strongly Disagree	2 Disagree	3 Not sure/Don't know	4 Agree	5 Strongly Agree
20. Girls care less about graduating from high school and having a career than boys.					
21. Boys are smarter and do better in school than girls.					
22. Boys are better at subjects like math and science than girls are.					
23. Girls can be just as strong and good at sports as boys.					
24. Girls can be leaders just as well as boys can.					
25. At school, boys and girls are equally active and talkative in class.					
26. At school, girls are given more freedom than at home.					
27. Girls have as much freedom at school as boys.					
28. Male teachers favour boys in class and think they are smarter than girls.					
29. Female teachers have difficulty controlling or disciplining boys.					
30. If a girl gets in trouble at school, she will be punished the same as a boy would be.					
31. It is important that students learn about HIV/AIDS in school.					
Statement	1 Strongly Disagree	2 Disagree	3 Not sure/Don't know	4 Agree	5 Strongly Agree
32. In our sex education classes, boys and girls talk openly about sex.					
33. I think it is important to study hard and do well at school.					

These questions ask you what you think about how boys and girls behave.

34. Girls are more emotional than boys.					
35. Boys are more likely to drink alcohol and do drugs than girls are.					
36. Girls are better at taking care of younger children and babies than boys are.					
37. Girls are better at controlling their emotions than boys are.					
38. “Good” girls are not supposed to dance, but it is OK for boys to.					
39. If a girl dresses sexy it means she wants sex.					

This group of questions asks about how boys and girls are in relationships.

40. Boys like it when girls take control in a relationship.					
41. Girls should not know too much about sex, or she will be thought of as “easy”.					
42. Boys should be the one to ask a girl out on a date.					
43. Boys like sex more than girls do.					
44. When a boy gets excited, he needs to have sex or he will get sick or have pain.					
45. Girls should be responsible for household chores like cleaning, washing and cooking.					
46. Girls often have sex just to get money or gifts.					
47. If a girl says “no” to sex, it really means “maybe” or “yes”.					
48. It is OK for a boy to force a girl to have sex, as long as she is his girlfriend or wife.					
49. Girls often play with, or tease boys sexually.					
Statement	1 Strongly Disagree	2 Disagree	3 Not sure/Don’t know	4 Agree	5 Strongly Agree
50. It is the girls’ responsibility to make sure the boy wears a condom during sex.					
51. Boys always want to have sex.					

52. It is OK for boys to have more than one girlfriend, but a girl should only have one boyfriend.					
53. It is OK for a girl to ask out a boy first.					
54. If a girl asks her boyfriend to use a condom, it means she doesn't trust him.					
55. Girls that live in the city have sex more than girls who live in rural areas.					

Now you will be asked about how things are at home between men and women, boys and girls.

Statement	1 Strongly Disagree	2 Disagree	3 Not sure/Don't know	4 Agree	5 Strongly Agree
56. Boys are given more freedom at home than girls.					
57. Parents expect boys to finish high school and maybe go on to university, but don't expect girls to.					
58. If a boy doesn't have a girlfriend, he will be teased.					
59. If a girl doesn't have sex with her boyfriend, he will find another and leave her.					
60. There are more girls in Tanzania with HIV/AIDS than boys.					
61. It is more common nowadays for both husband and wife to have jobs/careers.					
62. It is important that the boy makes more money than his girlfriend/wife.					
63. My parents think it is important that I do well at school.					
64. My parents think I should quit school so I can work.					
65. A man should have completed more years of schooling than his wife.					
Statement	1 Strongly Disagree	2 Disagree	3 Not sure/Don't know	4 Agree	5 Strongly Agree
66. Since a boy knows more about sex, he should be responsible for always wearing a condom.					
67. I learn about sex mostly from school.					
68. I can talk about sex and ask questions openly at home.					
69. What I have learned about sex from my parents is different from what I learn					

at school.					
70. In my family, my mother and father both make decisions about the house, money and children.					
71. It is important that both boys and girls communicate what they need and want in a relationship.					
72. A girl should obey her boyfriend or husband when he tells her to do something.					
73. Most girls have had sex before they get married.					
74. It is common for girls to lie about how many boys they have had sex with.					
75. Boys often exaggerate and say they've had sex with more girls than they really have.					
76. A boy will not respect a girl who has sex before marriage.					

Section 3: questions about HIV/AIDS, risk and relationships

Please answer the following questions about HIV/AIDS. You may be required to write a short answer.

77. How much do you think you are at risk of HIV/AIDS?

- no risk at all
- very low risk
- average
- higher than average risk
- extremely high risk

78. How much do you think other students in the school are at risk of getting HIV/AIDS?

- no risk at all
- very low risk
- average
- higher than average risk
- extremely high risk

79. Who do you think is *most* at risk of HIV/AIDS?

- boys
- girls

80. Who do you think is most at risk of HIV/AIDS?

- older people

younger people

81. List 3 examples of risky sexual behaviour that may lead to HIV/AIDS.

- a)
- b)
- c)

In relationships between boyfriends and girlfriends, who do you think decides the following:
Check only ONE box.

	Girls decide	Both Boys and Girls decide	Boys decide
82. When and where to meet.			
83. If the relationship is more than just friends.			
84. Whether or not to have sex.			
85. To end the relationship.			
86. To wear a condom or not.			

Appendix 3: Single Sex Focus Group Discussion Guide

Themes:

1. Problems girls/boys face
 2. Relations with girls/boys
 3. School interactions
 4. Relations at home
 5. Future hopes and expectations
 6. HIV/AIDS education
-
1. What are the biggest concerns, difficulties or troubles that you, as girls/boys face at school?
At home?
 2. Who do you feel most comfortable talking about these problems with?
 3. What are relationships like between boys and girls?
 4. Do you think that boys and girls can be friends?
 5. How many here have boyfriends/girlfriends?
 6. How do relationships usually start?
 7. Is it common to have a relationship with a much older boy/man? (girls) If so, why?
 8. Describe the perfect boyfriend/girlfriend.
 9. Do you consider yourself to be modern or traditional? Why?
 10. Do you like boys/girls who are modern or traditional?
 11. Do boys and girls participate equally in class?
 12. How much do students tease or make fun of each other at school? Examples?
 13. If a boy gets in trouble with a teacher, how might he be punished or disciplined? Is it any different for a girl? If it is, why do you think it is this way?
 14. Do you feel that teachers treat boys and girls the same or differently? How?
 15. What kinds of after school clubs are there? Sports? Drama? Music?
 16. Do boys and girls participate equally in these clubs? Why or why not?
 17. What kinds of duties do boys and girls have at school? Is it a fair distribution?
 18. What about at home, do boys and girls share the house work?
 19. What kinds of jobs do your parents do at home?
 20. Do parents expect good grades from both boys and girls?
 21. What do you think your parents hope and expect of you for your future?
 22. What is important to you about your future?
 23. Do you think it is important to learn about HIV/AIDS education at school?
 24. Where do you mostly get your information from about sex, condoms and HIV/AIDS? Who do you trust the most to give you correct information?
 25. What kinds of things do you learn about HIV/AIDS at school?

Appendix 4: Mixed Focus Group Discussion Guide

Theme: Sources of Information

1. How do young people in Moshi learn about relationships, sex, HIV/AIDS and condoms?
2. Do friends talk openly to each other about sex? What do you talk about? Do boys talk about it more than girls?
3. Is there anyone that young people don't talk to or trust?
4. Who or what is the most important source of information for young people?
5. What role does the media play in teaching young people about relationships, sex, AIDS and condoms? What messages are sent? How are women and men portrayed? Do you think the messages are positive or negative? Why? Has the media influenced you in your opinions or behavior? How? Describe the most popular media that talks about sex, HIV/AIDS and relationships today.
6. What messages does the church send about sex, AIDS and relationships? How has this influenced you and your opinions or behavior? Do you think many young people are influenced by the church?
7. Do parents ever talk about relationships, sex or AIDS to their children? If so, what do they say? If not, why don't they talk about it?
8. What about brothers, sisters, grandparents, aunts and uncles?
9. What role do traditions such as circumcision and initiation play in teaching young people about sex today? Are they seen as outdated, old fashioned? How common is it? Do young people value such traditions?
10. Would you like it if your parents and other family members were more open?
11. How important are they as a source of information for young people today?
12. Do you talk about relationships, sex, AIDS and condoms at school? What is the main message given? What topics did you learn about? Who taught it? How was it taught? Did you feel you could ask questions? Did it give you the information you needed? Was it enough information? Were the classes taken seriously? What could have been better? Do you learn about condoms, sex and AIDS in Bible class? What messages are sent? Is it different from biology class?

Theme 2: Gender roles

1. What do you think are the main differences between boys and girls your age?
2. Are girls and women treated differently than boys and men? How?
3. What is power? Who has it? At home? School? Community? Patterns?

Theme 3: Risk

1. Do you think that young people today are at risk of HIV/AIDS? Who is most at risk?
2. Do young people always use condoms? If not, why not? Do they see themselves as being at risk? What reasons are there for young people not using condoms?
3. Do you think young people have more or less sex nowadays compared with in the past? Why or why not?

Theme 4: Pressure

1. At what age do young people start dating? Having sex? Does any discussion take place

- before sex? Do boys have several girlfriends? Is this accepted? Do girls have several boyfriends? Is this accepted?
2. Do you think young people your age are pressured into sex? Do young boys respect girls? Would a girl tell anyone if she was raped? Why or why not? Who would she tell? What would happen?
 3. How are boys/girls pressured?
 4. Are young girls pressured by older men to have sex? Who? Older boys at school? Teachers?
 5. Have you ever heard of a young girl having a sexual relationship with a teacher? Why would a girl have such a relation?

Theme 5: Tradition/Modernity

1. What is the difference between a traditional girl/boy and a modern one? How do values differ? Sexual behavior and dress? Education?
2. Would you describe yourself as traditional or modern?
3. Do boys want girls that are more traditional or modern? What about girls, do they want boys that are more traditional or modern? Why?
4. Is it acceptable nowadays for young people to have sex before marriage? Is there any difference between boys and girls?
5. What happens if a girl gets pregnant? Does the boy have any responsibilities?

Theme 6: School Interactions

1. Do boys and girls participate equally in class?
 2. How much do students tease or make fun of each other at school? Examples?
 3. If a boy gets in trouble with a teacher, how might he be punished or disciplined? Is it any different for a girl? If it is, why do you think it is this way?
 4. Do you feel that teachers treat boys and girls the same or differently? How?
 5. What kinds of after school clubs are there? Sports? Drama? Music?
 6. Do boys and girls participate equally in these clubs? Why or why not?
- What kinds of duties do boys and girls have at school? Is it a fair distribution?

Theme 7: Relations at Home

1. What about at home, do boys and girls share the house work?
2. What kinds of jobs do your parents do at home?
3. Do parents expect good grades from both boys and girls?
4. What do you think your parents hope and expect of you for your future?
5. What is important to you about your future?

Appendix 5: Translation of *Starehe* song lyrics

By Sylvia Chinguwile

Starehe (luxury, pleasure, good times)

By Ferouz

Here I am lying in my bed
Good times is the source of my troubles
I am never gonna recover again
My buddies, my relatives so long, bye bye all

Sua Side, Scout Jenta bye all
Bongo record and Majani bye all
You will never see me again in this world
Now I am regretting, I am in trouble
The devil has won and has seduced me
Now I don't know who to blame
Between my soul and the devil
Bye all, bye all
Makungo na Jutegemea bye bye
MOA and Azania bye ahhaaa

Now it is one o'clock sharp
Looking at the watch
I am through with Jacqueline now I'm gonna meet Salama
At six o'clock I have an appointment with two girls
Not to mention Lily whom I will meet at eight,
Jenny of Mikochen, who passed away, who used to wait for me at Vatican *Kijiweri*,
Amina and Semeni who will meet me at *Macheni's*
Everyday I was changing girls
Had a long queue of them
That's how I used to lead my life

I'm very fond of the good times (*starehe*)
Enjoying with prostitutes
Aahaa, I felt so proud
I was not careful when having a good timie
I changed girls like *dala dalas*
When you're going you board this one,
On your way back you board that one
I wish I had control of all the good times
I never dreamed of God at all
I was conquered by the world
Without knowing I was playing with fire

My attitude toward girls was extreme
I slept with rich people's daughters, prostitutes and street girls
The bad thing is that I never used condoms
I thought it distorted the sexual pleasure

I never adhere to people's advice
I moved with so many women (countless)
There was a time I could not even recognize those I had slept with
Look look aahaa
Now look, what happened with Bashiri's sister
I had forgotten that we had had sex, when I saw here I made a pass at her for the second time
Now look aahaa

Here I am lying in my bed
The good times (*starehe*) are the source of my troubles
I will never get well again
My buddies, my relatives so long bye bye all
Afande Sele from Mungono bye
Arusha and mainland bye all
You will never see me again
Now I regret, I am in trouble
The devil has succeeded
Now I don't know who to blame between my soul and the devil
Bye all bye all
Bye Istin Camp and Wakushi
Bye Sinza star and Choka Mbaya
Bye all aahaa

At the hospital—Doctor (Professor Jay)
What's up young man you just bumped in my office
Join the queue, we serve one after another (one by one)
Don't worry, good treatment needs a lot of patience
Wait I have to take care of those who came before you

(Ferooz)

Doctor, I just came to confirm
I know these are my last days
I have all the symptoms that I am infected
I just came for a check-up to confirm what I suspect

Look at how I have lost weight;
I have sores, not to mention scabies
All these are symptoms of AIDS (*umewe*=electricity)
Symptoms of *umemeee*!

(Professor Jay)

Do not be afraid
Sometimes those symptoms
It might be malaria
You can loose weight because of typhoid or TB
Be frank about what is bothering you
It is better I know why you are so much afraid

(Ferooz)

High fever almost all the time
Diarrhea, vomiting sixty two times per week
Look my hair is falling out
My shoulders are almost coming out

I'm positive, I'm positive, I'm positive

(Prof Jay)

Wait for the check up

(Ferooz)

I'm positive, I'm positive, I'm positive

(Prof Jay)

Don't worry

(Ferooz)

I'm positive doctor, what you are telling me
Is like giving a bone to a toothless person to break (there is no hope)
I'm useless in this world
I must die
Tell me so that I can just go to hell (commit suicide)

(Prof Jay)

No, no, that wouldn't be wise
It is a stupid thing to commit suicide for no reason
Falling sick is just normal for human beings
You have to know that
Just wait for the results

(Ferooz)

Now what should I wait for,
I would rather die and rest

(Prof Jay)

There is no good end for those who overindulge in things
So many people are perishing due to sleeping around
The results show that you are infected
I am very sorry for losing the nations manpower
Now eat a proper diet, pray, go back to God, do some exercise
That's the only way to live with hope

By the way you have a chance have confidence

(Ferooz)

I have sinned against the Creator
Heaven and earth are mocking me
The angles for punishment are waiting for me
When I die who will welcome me aahaa