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“Group sex” parties and other risk patterns: A qualitative study about the perceptions of sexual behaviors and attitudes of adolescents in Soweto, South Africa

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Abstract

This study explored perceptions about sexual behaviors and attitudes of adolescents living in Soweto, Johannesburg, South Africa, from the perspective of parents, counselors and adolescents. A qualitative methodology was applied. Nine focus group discussions (FGDs) were held; three with parents of adolescents, two with counselors who work with adolescents, two with female adolescents aged 16-18 years and two with male adolescents aged 16-18 years. In total, 80 participants were recruited from in and around Soweto. FGDs were guided by a semi-structured interview guide, audio-recorded, transcribed verbatim and translated into English. Data were analyzed using Maxqda, a qualitative software analysis program. There were eight key themes related to adolescent sexuality and perceived attitudes towards relationships. Five themes were common to all participant groupings (parents, counselors and adolescents): (1) dating during adolescence, (2) adolescent females dating older males, (3) condom use amongst adolescents, (4) pregnancy and (5) homosexuality. (6) Sex as a regular and important activity among adolescents and (7) group sex practices among adolescents emerged as themes from adolescent and counselor FGDs. Lastly, (8) the role of the media as an influence on adolescent sexuality was common to adolescent and parent groups. Risky sexual behaviors continue among adolescents, with group sex parties a concerning emergent phenomenon that necessitates further study. HIV, other STIs and pregnancy prevention interventions should address multiple levels of influence to address context-specific influences.

Keywords

group sex; couple swapping; sexual behaviors and attitudes; adolescents; South Africa; qualitative

Introduction

Physical and neurocognitive changes unique to adolescence herald behavioral shifts towards increased experimentation, peer reliance and an interest in sex (Spear, 2000). Sexual debut before 15 years is reported by 27% of school-going adolescents in Sub-Saharan Africa. (Peltzer, 2010). Perceptions of risk of pregnancy, sexually transmitted infections (STIs) and human immunodeficiency virus (HIV) have been widely studied amongst adolescents, and indicate that despite exhaustive knowledge and awareness and freely available condoms, risky sexual behaviors continue (Marston & King, 2006).

South Africa continues to bear the global burden of HIV (UNAIDS, 2010) however prevention strategies aimed at decreasing sexual risk-taking amongst 15-19 year olds may be taking effect. An encouraging gain is that HIV prevalence amongst 15-24 year olds has

decreased from 10.3% in 2005 to 8.7% in 2008 (Shisana et al., 2009). In 2008, HIV prevalence amongst 15-19 year olds in South Africa was 6.7% among females and 2.5% amongst males, with females disproportionately affected (Shisana, et al., 2009). Concurrently, an increase in condom use has been observed among 15-24 year olds from 57% in 2002 to 87.4 % in 2008 and from 46% in 2002 to 73% in 2008 among males and females respectively (Shisana, et al., 2009). Yet, misconceptions around condom use and the perception that it reduces sexual pleasure continue among adolescents (Marston & King, 2006). Furthermore, national fertility rates among 15-19 year old adolescent females appear to be decreasing. However, it is argued that the decrease in fertility rates may be related to increased availability and use of legal terminations of pregnancy than a shift toward protective sexual behavior (Moultrie & McGrath, 2007).

Taken together, these findings suggest that adolescent sexual behavior in South Africa is beginning to change. Because of adolescents' predilection for novelty-seeking (Green, 2000; Gutiérrez-Martínez, 2007), it is important to consider emerging risk patterns in adolescent sexual behavior and changes in perceptions about sex to design innovative and effective interventions.

The aim of the study was to explore perceptions of sexual behaviors and attitudes of adolescents in Soweto, Johannesburg, South Africa, from the perspective of adolescents, parents of adolescents, and counselors who work with adolescents.

Method

Perceptions of sexual behaviors and attitudes of adolescents in Soweto were investigated by considering multiple levels of influence, that is, individual, family, peers, relationship, government and the media. A qualitative approach was used to collect in-depth information from participants via focus group discussions (FGDs). Bronfenbrenner's ecological systems theory guided the content of the FGDs (Bronfenbrenner, 1989).

Setting

The study was conducted in 2008 at the Perinatal HIV Research Unit (PHRU), at Chris Hani Baragwanath Hospital in Soweto. Soweto is an urban township in Johannesburg, South Africa, that is estimated to have a population in excess of one million residents (City of Joburg, 2010) which includes about 191 000 children aged 10 to 19 years.

Sample

Eighty participants were purposively sampled into three groups: parents (n= 23) from Soweto who had adolescent children aged 16-18, counselors (n= 22) working with adolescents and adolescent males (n= 20) and females (n= 15) aged 16-18 years who were from Soweto.

Parents

Two female-only focus group discussions (FGDs) and one male-only FGD were conducted with parents recruited via HIV South Africa (HIVSA). HIVSA is an organization in Soweto that offers comprehensive, therapeutic care to those individuals and their families infected with and affected by HIV/AIDS. HIVSA staff contacted participants telephonically to participate in the study.

Counselors

Two mixed-gender FGDs were performed with voluntary counseling and testing of HIV (VCT) counselors. Permission was obtained from supervisors of seven Soweto centers

conducting VCT. Study staff contacted VCT counselors who worked specifically with adolescents to participate.

Adolescents

Two female-only and two male-only FGDs were held with 16-18 year adolescents. Adolescents were recruited via the PHRU and HIVSA. HIVSA runs programs within schools in Soweto to inform learners about VCT. HIVSA staff informed interested learners about the study and contacted them telephonically about participation. In addition, a list of interested participants from PHRU was obtained from Kganya Motsha Adolescent Center (KMAC), which provides reproductive health and VCT for 14-19 year old adolescents. Study staff invited the participants telephonically.

Procedures

Focus group discussions—FGDs were conducted with a semi structured interview guide in the local languages by trained facilitators. There were 8-12 participants per FGD. Facilitation of adolescent FGDs was gender-matched. FGDs lasted two to three hours.

FGD questions were open ended to elicit discussions around adolescent sexual behaviors and practices with specific prompts for HIV risk behaviors. FGD topics were guided by the work experience of the research team (pediatrician, nurse, counselors, social science researcher, clinical psychologist and social workers) who work with adolescents. The main topics were informed by the ecological systems theory which emphasizes the different systems that influence adolescent decision making about sex (Table 1).

Ethics approval was obtained from the University of the Witwatersrand, Johannesburg, South Africa and Duke University, Durham, North Carolina in the United States (US). Participants were reimbursed ZAR50 (~7US\$) for their transport and time. Participants younger than 18 years provided written informed assent with written parental consent. Written informed consent was required for participants 18 years and older. Adolescent participants were referred to KMAC when further care was necessary.

Data Analysis

FGDs were audio-recorded, transcribed verbatim and translated into English. Data were analyzed using Maxqda, a qualitative data analysis program (VERBI, 1989-2010). Grounded theory guided data analysis whereby constant comparison of data arising from FGDs was done to identify common and divergent themes and to determine the interrelationships between the identified themes (Walker & Myrick, 2006). First, a primary data analyst entered a process of data immersion whereby transcripts were read and re-read to gain an overall understanding for the data. Initial coding involved an open coding method whereby a line by line analysis was done to assign text to codes. After the first two transcripts had been coded a second analyst worked with the primary analyst to discuss codes arising from the data and to refine the coding schema. Following open coding the data analysts entered into a process of axial coding to understand the relationship between the codes. Codes were then grouped according to themes. Themes related to perceptions about sexual behaviors and attitudes of adolescents living in Soweto were specifically identified. Findings were validated with participants as well as the adult and adolescent community advisory boards at the PHRU.

Results

The age range for parents was 30-66 years, for counselors 19-45 years, and 16-18 years for adolescents. All counselors except one (with a degree in counseling) had basic 'lay' counseling training. Work experience as counselors ranged from 1 – 8 years.

There were eight key themes related to adolescent sexuality and perceived attitudes towards relationships. Five themes were common to all participant groupings (parents, counselors and adolescents): (1) dating during adolescence, (2) adolescent females dating older males, (3) condom use amongst adolescents, (4) pregnancy and (5) homosexuality. (6) Sex as a regular and important activity among adolescents and (7) group sex practices among adolescents emerged as themes from adolescent and counselor FGDs. Lastly, (8) the role of the media as an influence on adolescent sexuality was common to adolescent and parent groups.

Theme 1: Dating during adolescence

Male and female adolescent participants perceived dating as a means to have a partner to spend time with, talk to and do homework with. Female adolescents seemed to value these aspects of relationships more by associating them with their own self-esteem. One male adolescent believed that adolescent females pressured adolescent males into relationships; another believed that females easily committed to relationships so that males found it difficult to end relationships. Adolescent males differentiated between 'being in love' and 'real love' while a counselor said the following:

"They [young females] fall in love with the partner but the partner is not in love with them."

Although parent participants were aware that their children were involved in relationships they wished for their children to complete their schooling before entering romantic relationships.

Theme 2: Adolescent females dating older males

Young females were perceived to date older males to: transact sex for money, please their friends, gain higher status amongst peers and because older males were regarded as being more mature.

Adolescents, parents and counselors perceived poverty to be the main reason that adolescent females had relationships with older males. Older males were perceived to provide adolescent females with the necessary material means to support themselves and their families with basic necessities such as food and in other instances clothes, transport and pocket money. Counselors reported conflicted feelings when working with adolescent females without food security who engage in transactional sex, because the emotional support they could offer them as counselors could not address the more urgent financial needs. Counselors believed that some parents did not question or want to know how their daughters had received the money. In other situations, female adolescents would hide the truth about their source of money from their parents. According to one counselor young females were vulnerable to HIV and pregnancy because females would be less likely to advocate for condom use in their relationships with older males.

Some adolescent females dated older males because they were thought to be more mature. Adolescent female participants felt that they matured faster than males their age and believed that older males would be at the appropriate maturity level.

Theme 3: Perceived condom use amongst adolescents

All groups believed that sexually-active adolescents were not using condoms during sexual acts. Adolescent male and female participants agreed that condoms were perceived as ‘not cool’. Parents and adolescents perceived that male adolescents were not using condoms because they were thought to impact negatively on sexual pleasure for adolescents. A female adolescent participant stated that sex with a condom could be more painful. Some female adolescents felt that the female condom could be made more accessible for young females to use. A female parent believed that adolescents were not using condoms because adolescents perceived condoms to delay sexual gratification and because not using a condom was a way of proving their trust for their partner. Using a condom in a relationship was perceived to be a sign that the person initiating condom use was HIV-infected, and males who used condoms were regarded as homosexual. An adolescent male stated that condoms could be used to protect against HIV and preventing pregnancy.

A counselor mentioned the following:

“They know each other for three weeks then they trust each other to do it [sexual intercourse] without a condom”.

Theme 4: Pregnancy

All groups raised concerns and possible explanation for the perceived high prevalence of teenage pregnancy. The first concern was about adolescent females planning pregnancies to access the South African government child support grant. For some adolescent females, the grant was their only income. Parents and adolescents blamed the government for encouraging adolescent females to become pregnant to access the grant income. An adolescent male participant was concerned that adolescent females become pregnant to maintain relationships with their partners. The term ‘ukuqinisa uthando’ (to make the relationship stronger) was used. Finally, adolescents believed that peer pressure influenced pregnancy intention: pregnancy at a young age is now normalized as fashionable and as the ‘in thing’. Counselors spoke about pregnancy within the context of intergenerational relationships and the lack of condom use amongst adolescents.

Theme 5: Views about homosexuality

All groups agreed that adolescents who are openly or suspected to be homosexual are stigmatized by the community. Parent participants were influenced by religious beliefs and dismissed homosexuality as a behavioral problem learned “outside their homes” but modifiable through counseling. Some adolescent participants, while recognising their parents were influenced by religious beliefs and the generation gap, believed that parents and society should become open to same sex relationships. An adolescent female said the following:

“As much as they accept guys being gays they should do the same with girls.”

In contrast, some male adolescent participants regarded homosexuality as a disgrace to families and believed that homosexual relationships should be kept hidden. Counselors reported that males and females in same sex relationships were “starting to come out” and beginning to test for HIV.

Theme 6: Sex as a regular and important activity among adolescents

Adolescents were perceived to engage in sexual activity for various reasons: sex for fun and recreation, as a form of identity and as a means of strengthening and maintaining relationships. Adolescent participants perceived sex to be a pleasurable activity that their peers engaged in for ‘fun, as a hobby and even as a stress relief’. Engaging in sexual activity

during adolescence was also a means of gaining higher status amongst peers: the ‘cool girl’ or ‘top dog’.

An adolescent female stated how sexual activity was not always about love but merely about the physical act itself without any emotional involvement. Counselors and adolescents spoke about sexual activity as the natural progression of intimacy to strengthen and maintain a romantic relationship. A male adolescent spoke about sexual activity being the only ‘intimate’ act ‘to make a couple feel closer’.

Theme 7: Group sex

Adolescents and counselors reported group sex events, commonly organized by adolescents, even though it was kept covert. A counselor mentioned reports heard during counseling sessions with adolescents where adolescents organize parties with the purpose of engaging in group sexual activity. An adolescent female participant mentioned that adolescents seemed to attend these events because sex was a free activity. An adolescent male participant spoke about his own experiences, how in contrast to previous generations, parties in the current era skipped talk and refreshments, for sex and drugs like marijuana instead.

There was further mention of group sex for couples, or couple partner swapping. The term ‘*ocil*’, an informal word coined by adolescents, was used by female adolescent participants to describe a group sex event where couples intentionally meet to engage in sexual activity to swap partners for that particular time. They would arrive at the designated venue in a taxi which they called a ‘love boat’.

“We know when we get to that pool party, we gonna start grooving [having sex]. You are with your partner. Come midnight, then you swap partners until you are all tired.” Adolescent female participant.

Drugs and alcohol were mentioned by male adolescents as being part of the group sex scene at parties. One male adolescent recognized that males would use drugs and alcohol at these parties to manipulate young females into risky sexual behaviors which these females would otherwise not partake in.

Theme 8: The media as a negative influence

Parents felt that television programming and music were perceived to normalize vulgar behavior by portraying adolescent alcohol use, drugs, and pornography. Parents blamed soap operas filmed in the US for encouraging relationships that would otherwise be taboo in an African setting; for instance, a male having sex with his mother-in-law. Some parent participants were concerned about the influence of the media on adolescent males because the media was perceived to perpetuate the idea that having money and ‘girls’ was important. With young females, the media marketed the notion of being ‘sexy’ especially through choice of attire. Adolescent males mentioned that music could be a positive influence too; as a form of entertainment.

Discussion

Adolescent sexual behaviors and attitudes are perceived to be influenced at multiple levels. Individual level influences are evidenced by girls selecting older romantic partners, having sex to please their partners and as a stress relief. Family circumstances may motivate adolescents to transact sex for material gain. Partners influence individual behavior where sex is used to strengthen and maintain relationships. Adolescents may make risky sexual health decisions to be accepted by peers. Homosexual relationships are stigmatized in communities. Lastly, macro influences are perceived to influence adolescent sexual

decision-making such as the myth of becoming pregnant to access a government grant and the negative influences of the media industry.

Our study demonstrates the emergence of a previously unreported adolescent risky sexual behavior in South Africa, that is, group sex practices. Both group sex and couple sexual partner swapping are described at events (parties) orchestrated for multiple sexual interactions within a short space of time. The purpose of these parties is linked with experimentation, “free” entertainment, and to please partners and peers.

Adolescent group sex has been described in the United States. One qualitative study described a phenomenon called “running a train”, sexual intercourse involving multiple males and one female which was perceived as recreational for males but possibly coercive for females. In common with our study, alcohol and drug use were co-reported but involved the participation of multiple males and females (Rothman et al., 2008).

Group sex activity implies multiple sexual partners in rapid sequence within a short time such as an evening. Given the negative perceptions of condom use found in this study, it is unlikely that individuals engaging in group sex assert condom use in these situations. Taken together, this raises the risk profile of these individuals because multiple partnerships and unprotected sex are reported risk factors for HIV and other STIs among young people (Eaton, Flisher, & Aaro, 2003; Mathews et al., 2009).

Transactional sex is a risk behavior associated with HIV acquisition, gender-based violence, substance use and socio-economic disadvantage in women (Dunkle et al., 2004). At least two themes in this study reflect how the need for money may drive risky sexual behaviors in this urban setting of poverty. These include girls choosing to date older boyfriends to transact sex for money and the persisting community perception that girls plan pregnancies to access child support grants. Despite the negative portrayal and consequences of this phenomenon, there are situations where transactional sex is encouraged and accepted by parents and in fact positively viewed by females who transact sex for material gains (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010). In our study, there was the continued perception that girls engage in transactional sex which was also age-disparate, a combination of risk behaviors previously noted as creating hyper-vulnerability to HIV infection (Leclerc-Madlala, 2008). Higher HIV prevalence amongst older men in South Africa is of concern for adolescent females who engage in this set of behaviors (Shisana, et al., 2009). Young females are less likely to assert condom use if it may jeopardize their material gain (Wamoyi, Wight, Plummer, Mshana, & Ross, 2010).

The idea that girls plan pregnancies to gain access to welfare persisted amongst our participants however, there is no evidence to support the idea (Moultrie & McGrath, 2007). However, providing money to young girls is an innovative intervention with proven short-term efficacy: a controlled study in Malawi showed that monthly financial incentives paid to young girls to remain in school resulted in significant reductions in teenage pregnancy and self-reported sexual activity (Baird, Chirwa, McIntosh, & Ozler, 2010).

The role of sex to strengthen or maintain a relationship is well documented (Bayley, 2003; Foreman, 2003; Hillier, Dempsey, & Harrison, 1999; Marston & King, 2006; Nuko, Chiduo, Mwaluko, & Urassa, 2001; Nyanzi, Pool, & Kinsman, 2001; Varga, 2000). Young females in particular engage in sexual relationships with males as a means of maintaining the relationship. These perceptions belie underlying gender ‘power’ that males have about whether or not to maintain the relationship (Bayley, 2003).

In this study adolescents cited sex for pleasure, material gain, as a means of identity and to maintain/strengthen relationships. Sex for ‘fun’ and prior to marriage has even been

described by adolescent boys in Malaysia where premarital sex is greatly frowned upon and where sex is seen within the context of marriage (Low, Ng, Fadzil, & Ang, 2007). Adolescents will engage in sexual activity even in strict conservative societies.

This study again demonstrated that peer-level influences were perceived to affect decisions made by adolescents regarding whether or not to engage in sexual activity. Adolescents were perceived to engage in sexual activity to please friends and as a means to gain higher social status. Research shows that if peers advocate virginity, then adolescents are likely to abstain from sex but if adolescents believe that their peers are engaging in sexual activity, then they are likely to initiate sexual activity too (Buhi & Goodson, 2007). Peer groups were also perceived to influence child bearing decisions, where a girl becomes pregnant to gain acceptance by peers.

Media influences on sexual behavior of adolescents and parental apprehension about its negative influence existed. A national longitudinal study conducted with adolescents in the US showed that watching sex on television (conversations about sex and visual depictions of sexual activity) was associated with early sexual activity and non-coital activities in adolescents aged 12-17 years (Collins et al., 2004). They found that talks about sex and visual sex depictions was equally associated with initiation and increased frequency of sexual behavior.

The issue of condom use is complex within the developing world, particularly South Africa where knowledge regarding HIV is disproportionate to condom use (Marston & King, 2006). Intervention programs cannot assume that an isolated focus on male condom use will lead to its increased use. Negative perceptions of condoms are common (Marston & King, 2006) and continue despite media campaigns around the efficacy of using condoms. The use of the female condom is an area requiring further attention.

Gay and lesbian youth in South Africa are vulnerable to societal prejudice and inner turmoil (Butler, 2008). Male to male sexual experiences is identified as a risk for HIV infection that requires more attention. Female to female sexual relationships require even more attention in the South African research and prevention context.

The main strength of this study is that it was conducted amongst a variety of participants from multiple perspectives. However, generalizability of our findings may be limited. Some participants were recruited from programs serving people affected by or infected with HIV, where they may have been exposed to HIV-related messages that altered their thoughts and behaviors from those of the general population. Furthermore, social desirability bias may have resulted in over- or underreported perspectives as a result of the FGD context. Lastly, the long nature of the FGDs is acknowledged as possibly being a source of fatigue to the participants by limiting their responses, but we attempted to address this by ensuring frequent breaks with refreshments during the interviews.

Conclusion

Risky sexual behaviors are perceived to be continuing amongst adolescents. A concerning emergent phenomenon among adolescents is group sex practices. Preventative interventions should be at multiple levels to address context-specific influences. Counseling for adolescents should be tailored given differential risk profiles. Group sex amongst adolescents is a topic that requires investigation within the South African context to determine its frequency and effect on adolescent risk for HIV, STIs and pregnancy.

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Table 1

Topics for FGD Guides

Adolescent group and parent group		Counselor group	
1	Romantic and sexual relationships amongst adolescents.	1	Adolescents having romantic relationships
2	Pregnancy	2	Challenges in working with adolescents? (Probes include pregnancy and transactional sex)
3	Experimentation during adolescence.	3	Risky/unsafe behaviors amongst adolescents.
4	Condom use amongst adolescents.	4	Adolescents and their use of condoms.