THE DEVELOPMENT AND EVALUATION OF VUSHA

(a culture friendly psychoeducational programme for the prevention of teenage pregnancy in rural Venda).

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ABSTRACT

In Venda chiefs and community leaders no longer command the same type of respect from their subjects. The result is poor attendance of social ceremonial rituals which always maintained social integration.

Traditional sex education devices are being abandoned without being replaced and this leads to social disintegration. The high incidences of teenage pregnancies among rural girls is a result of this disintegration. The fact that this is generally found to occur after the girls' pubescent initiation, motivated the aims of this study: to develop a psychoeducational programme for the prevention of teenage pregnancies in rural Venda, and to evaluate the effectiveness of this psychoeducational programme. A field experiment before test and after test control group design was used. The measuring instrument was a questionnaire from Anagnostara's scale for assessing the sexual attitudes of black adolescents. The experimental intervention, a programme entitled VUSHA (a programme for the prevention of teenage pregnancy in rural Venda) was designed by the Venda researcher in English and translated into LuVenda. Based on the findings of the research inferences could be made that the high rates of teenage pregnancy in rural Venda are due to: a lack of sexual knowledge, a lack of awareness with regard to future career goals, and the fact that girls possess attitudes conducive to childbearing. Recommendations were made about future programmes promoting a thorough sexual knowledge including physical differences, sexual anatomy, menarche, conception, contraception and childbirth; adequate explanation of the risk involved in sexual relationships regarding pregnancy and sexually transmitted diseases and the implications thereof; life skills training with a special focus on interpersonal relationship skills, attitudes and values and career awareness.

OPSOMMING

In Venda ontlok tradisionele leiers en gemeenskapsleiers nie meer dieselfde soort respek van hulle onderdane nie. Die gevolg hiervan is dat daar swak bywoning is van sosiale seremoniële rituele wat altyd sosiale integrasie instand gehou het. Tradisionele seksopvoedingskemas word agterweë gelaat sonder dat dit vervang word. Die hoë voorkoms van tiener swangerskappe onder plattelandse meisies is die gevolg van hierdie disintegrasie. Die feit dat dit gewoonlik plaasvind na die meisies se puberteit inisiasie het die doelstelling van hierdie studie gemotiveer, naamlik: om 'n psigo-opvoedkundige program te ontwikkel vir die voorkoming van tiener swangerskappe in plattelandse Venda, en om die effektiwiteit van hierdie psigo-opvoedkundige program te evalueer. 'n Veldeksperiment voor- en na-toetskontrole is gebruik. Die meetinstrument was 'n vraelys uit Anagnostara se skaal om die seksuele houdings van swart adolessente te beraam. Die eksperimentele tussentrede, 'n program getitel VUSHA ('n program vir die voorkoming van tiener swangerskap in plattelandse Venda) is ontwikkel deur die Venda navorser in Engels en vertaal in LuVenda. Afleidings is gemaak gebaseer op die bevindings van hierdie navorsing naamlik dat die hoë voorkoms van tiener swangerskap in plattelandse Venda te wyte is aan: 'n tekort aan seksuele kennis; 'n tekort aan bewustheid betreffende toekomstige beroepsdoelstellings, en die feit dat die meisies houdings openbaar wat bevorderlik is vir kinderbaring. Aanbevelings is gemaak dat toekomstige programme die volgende sal bevorder: 'n deeglike seksuele kennis insluitende fisieke verskille, seksuele anatomie, menarge, konsepsie, kontrasepsie en kindergeboorte; toereikende verduideliking van die risiko betrokke in seksuele verhoudings betreffende swangerskap en seksueel oordraagbare siektes en die implikasie daarvan; lewensvaardighede opleiding met 'n spesiale fokus op interpersoonlike verhoudingsvaardighede, houdings en waardes en beroepsbewustheid.

INTRODUCTION

Adolescent childbearing is a world wide problem for which immediate answers need to be sought. This is a concern which has grown rather than diminished. It is estimated that half of the world's population is under twenty years of age. The factor, combined with the high incidence of unwanted early childbearing means that adolescent pregnancies are a concern for the society in general (Boult & Cunningham, 1993).

Compared to thirty seven other developed nations, including Holland, France and Canada, the rate of teenage pregnancy, abortion and childbearing is highest by far in the United States (Stewart & Friedman, 1987). The United States is thus the only developed country in which teenage pregnancy rates are rising. Teenage pregnancies are lower in England than a decade earlier. Open attitudes towards sex and sexuality seem to assume low teenage birth rates. However, it is possible to achieve these results even when attitudes are conservative. In countries like Hong Kong, Japan, Ireland and Singapore, strong social sanctions against premarital sex keep adolescent childbearing in check (Jones, Goldman, Henshaw, Lincoln, Roself and Wulf, 1986). Although the trend of pregnancies occurring at younger ages is noticeable all over the world, the problem seems greater in developing countries including South Africa.

In South Africa, the problem seems to be widespread as it occurs among all cultural and ethnic groups, in rural as well as in urban areas, with teenage childbearing constituting 12% of the country's births (Ntombela-Motapanyane, 1995). Of the 380 births recorded during December 1994 at the Donald Frazer Hospital (one of the major hospitals in Venda), 99 were those of teenage mothers, thus constituting 26% of all births.

LITERATURE REVIEW

Adolescence is a unique period of life, commonly described as transactional. Both physical and psychological changes are prevalent. The adolescent needs time to adjust to these changes and to assimilate them into their own identity demands on an immature body which may lead to serious health problems (Cobertt & Meyer, 1987). The birth of a child often necessitates the need to earn an income. Due to a lack of educational training dependence on welfare support becomes a likelihood for the adolescent mother and her child. Many adolescents face social and emotional problems that arises from untimely parenthood: parenting responsibilities for which they are in many ways ill prepared as well as probable negative feedback from families and peers - (Barr & Monserrat, 1982).

The question is, why in an age of improved accessibility to contraception do so many adolescents fall pregnant? In this study the literature review investigated some of the variables believed to be associated with teenage childbearing. Focus has been on early physical maturity with subsequent initiation of sexual activity, asynchrony among physical, cognitive and social dimensions of development, as well as the general breakdown in social order which seems to have impacted on sexual attitudes.

The problem as it occurs in Venda could be closely related to a breakdown in social order. From an age as early as seven, Venda girls were encouraged to kwevha (stretch their labia

minora) in preparation for *vhukomba* (maturity). This process would culminate in pubescence when the mature girl had to undergo the *vusha* ritual which, among other things, inculcated implications of sexual maturity as well as social rites of etiquette. The initiates would also be given lessons on how to have sexual interactions without being penetrated. A well stretched labia minora was believed to prevent vaginal penetration during sexual intercourse. Premarital sex was controlled through regular virginity inspections (Stayt, 19968). The goal of keeping one's virginity was marriage and as a result, a girl who lost her virginity inevitably jeopardised her chances of getting a good marriage. *Vusha* was compulsory and use to be conducted at the chief's kraals. No longer do chiefs and community leaders command the same type of respect from their subjects. The result is poor attendance of social ceremonial rites which always maintained social integration. Traditional sex education devices are being abandoned without being replaced (Sibisi, 1974). This leads to social disintegration. The high incidences of teenage pregnancies among rural girls is a result of this disintegration. The fact that this is generally found to occur after the girls pubescence initiation, has motivated the aims of this study.

- to develop a psychoeducational programme for the prevention of teenage pregnancies in rural Venda.
- to evaluate the effectiveness of this psychoeducational programme.

METHODOLOGY

1. The field experiment before test and after test control group design was used (Kerlinger, 1986). Purposive sampling was used employed for subject selection, whereby the researcher picked only those subjects which, according to her judgement, would meet the purpose of her study (Bailey, 1987). The subjects were randomly assigned into a control Group 1 and an experimental Group 2.
2. The measuring instrument was a questionnaire from Anagnostara's (1988) scale for assessing the sexual attitudes of black adolescents. The questionnaire comprised of:
 - * biographical information
 - * sexual knowledge
 - * sexual attitudes
 - * future career goals
3. The experimental intervention, a programme entitled **VUSHA** (a programme for the prevention of teenage pregnancy in rural Venda) was designed by Venda researcher in English and translated into LuVenda by Mr. E.S. Madima. Mr Madima has authored a number of books in LuVenda. The translated version was therefore satisfactorily comparable to the researchers original. The experiment took place in July 1995 (made to coincide with the traditional staging of the Venda pubescence ritual, *Vusha* at Chief Basitere Makhuvha's Chief Basitere Makhuvha's kraal inside a public house, *tshivhambo* and it was tailored to be culture friendly.
4. The following hypotheses were formulated:

- Hypothesis (H1)

At pre-test there will be no statistically significant difference between group 1 and group 2 on the three variables: sexual knowledge

- * sexual attitudes
- * career awareness

- Hypothesis (H2)

There will be a statistically significant difference in sexual knowledge of group 2 at the post-test when compared to group 1. This difference will be in the direction of superiority.

- Hypothesis (H3)

With regard to sexual attitudes, there will be a statistically significant difference between the two groups at post-test. Group 1 will have more conducive attitudes towards child bearing attitudes in comparison to group 2.

- Hypothesis (H4)

There will be a statistically significant difference with regard to awareness of future career goals of group 2 at the post test in comparison with group 1. The difference will be in the direction of superiority.

RESULTS AND CONCLUSIONS

The group's educational level ranged between standard five and standard seven as the highest frequency. The average age for the onset of menarche (onset of first menstruation) was 14.3 years and 88% of the subjects had already been initiated through the traditional pubescent ritual. The findings of the group's mean age for experiencing menarche do not support studies conducted by Cutright (1972) in the United States of America where this figure was found to be 12.5 years. This difference could be attributed to poor nutrition as subjects in this study were from an economically deprived rural environment. Approximately 70% of the sample consented to being sexually active. Only 17% of the sexually active said they had always used a contraceptive method while the remaining 83% were ineffective contraceptive users. Failure to take the necessary preventative measures could be partly attributed to the adolescent's lack of cognitive maturity which limits their understanding of sexual reproduction (Stewart & Friedman, 1987).

Traditionally both vhave (initiates) and vhadabe (instructresses) were supposed to be dzikhomba (virgins). When mention was made of the traditional virgin inspection (tshitavha) whereby the elders checked if the hymen was still intact, one of the elders laughed with scorn (ehoho, ihoho). Pointing at the girls she said 'ra tolela itsho tshithuu tsha hone zwino, a ringa tshi wani !!' (literally meaning that if we dare check for the thing that you were referring to, the hymen, now, we are sure not to find it). To have twenty eight of the forty maidens in front of the elders with broken membranes was quite ironic. Not only does this situation signify a loss of social control but a marked change in attitudes towards sexual activities.

Results of the pre-test showed no difference between group 1 and group 2 with regard to the variables, sexual knowledge, sexual awareness and awareness of future career goals. This supports **hypothesis 1 (H1)** which postulated that the two groups would be equal at the beginning of testing. Further comparison of Group 1's results on both the pre-test and post-test evidence no significant difference on the three variables. Pre-testing had therefore not significantly affected the control groups sexual knowledge, sexual attitudes as well as awareness of future career goals.

At post-test, Group 2 was found to have significantly improved on the variables sexual attitudes and awareness of future career goals in comparison to Group 1 had more conducive attitudes towards childbearing at post-test than did Group 2, thus supporting **hypothesis 3 (H3)**. **Hypothesis 4 (H4)** was also confirmed as Group 2 was found to be more aware of future career goals in comparison to Group 1 at post-test. In view of future career goals they set for themselves, subjects in Group 2 are likely to impose social limitations on themselves regarding sexual activities in order to reach these goals.

With regard to sexual knowledge, there was no statistically significant difference between the two groups at post-test. In other words, Group 2 had a minimal improvement in this regard. **Hypothesis 2** which suggested that Group 2 would, at post-test, have a more superior sexual knowledge in comparison to Group 1, was therefore not supported. These findings could be attributed to the subjects being of Venda culture which lacks the openness regarding sexual communication. Language could be further contributory factor. Traditional Venda culture communicated sexuality by using symbols for example, tshivhaso (fire place) for female genitalia, tshiuludza (tip of the hut) for penis and minora (ashes) for sperms. The researcher's Venda version of vusha used literal translations such as nnyo (vagina), tshitungulo (penis), u vutshelwa (erection). These translations caused some amusement for the subjects. As they chuckled, the elders showed their disapproval and this in turn affected the researcher's openness in communicating the subject. A study by Anagnostarass (1988) confirmed that sexual knowledge is necessary, but not sufficient for avoiding unwanted adolescent pregnancies. Moreover, sexual knowledge is something that the subjects could still improve on, through education.

Given the above findings, one could infer that the high rates of teenage pregnancy in rural Venda are due to:

- a lack of sexual knowledge
- a lack of awareness with regard to future career goals
- the fact that the girls possess attitudes conducive to childbearing

A further inference which could be drawn is that a modern psychosexual programme which entails sexual attitudes and career guidance, can help reduce the high incidence of unwanted early childbearing.

These deductions concur with studies by Furstenberg (1976) which evidenced that a fully informed adolescent can make thoughtful and responsible decisions about her sexual life and that woman who became sexually active at a very young age were less ambitious educationally. Sheriff's (1995) study also reports that there is very little reason for a girl not to have a baby if she has little chance of fulfilling a career or furthering her education.

LIMITATIONS AND GUIDELINES FOR FUTURE RESEARCH

Although the criteria for subject selection helped control extraneous variables, factors such as prior exposure to sexual knowledge could not be controlled. In terms of subject selection, the investigator cannot claim that the sample represents all adolescent girls in Venda. Findings therefore cannot be generalised beyond the specific sample that has been studied. Given the group's variations in educational standard, Venda questionnaires could have helped control the probable Halo-effect that ensued from the researcher's interpreting some questions to subjects during the testing.

One of **VUSHA'S** aims was to prevent early childbearing in rural Venda. The programme has therefore endeavoured to empower rural Venda girls to take control of their own fertility. Through career awareness, the girls were also encouraged to develop their resources towards the improvement of their own standard of living. **VUSHA** has, in this regard, made a contribution towards the African National Congress Reconstruction and Development Programme whose central aim is to improve the quality of life of all South Africans and in particular the most poor and marginalized section of the country's communities.

Being a culture friendly program, **VUSHA** has also established mutual communication between the Venda culture and counselling from a Western point of view. Application on a broader scale will require the programme to be changed from time to time in order to suite the different groups in South Africa. An example of such change could be the name of the organisation. **Vusha** could be translated into Shangaan or Northern Sotho becoming **KuKHOMBA** or **GoBINELWA** respectively.

Keeping one's virginity is a desirable and yet rather idealistic view of what Stevens-Long and Cobb (1983) term the sexually charged social climate prevalent today. Campaigns such as the True Love Waits (TLW), which encourages young people to maintain their virginity until marriage are likely to be supported by Christian youths who are guided primarily by biblical principles. However, advocating abstinence as the only solution is liable to present problems for adolescents who are already sexually active and who may not hold any moral values to restrict such behaviour. Future programmes should therefore entail the following:

- A thorough sexual knowledge including physical differences, sexual anatomy, menarche, conception, contraception and childbirth.
- Adequate explanation of the risk involved in sexual relationships regarding pregnancy and sexually transmitted diseases and the implications thereof
- Life skills training with a special focus on interpersonal relationship skills, attitudes and values
- Career awareness

Ntombela-Motapanyane (1995) suggests that contraceptive services for teenagers should be manned by individuals with a positive attitude toward sexuality and teenagers. Adolescents need an opportunity to discuss their sexual feelings and activities in a more relaxed atmosphere of respect and understanding. In this way the different levels of sexual awareness, regardless of difference in chronological age, can be met with appropriate education and information (Furstenberg, 1997). This calls for trained counsellors who, among other things, must feel comfortable about speaking to people on sexuality and sex. Van Dyk (1992) states that if a

counsellor feels embarrassed to talk about sexual practices, the clients will not feel free to discuss sex.

An awareness of differences in client's backgrounds, cultures, world views and lifestyles, is essential. In societies where open discussion of sex is taboo, culture-compatible devices have been used. In Ghana, for example, music and dance have been used in anti-AIDS campaigns to demonstrate condom use and to give talks on STDs and HIV (Fee & Yousef, 1993). Music plays an important role in African culture. During pubescence rituals, be they for males or females, sexual knowledge and cultural rules of etiquette are inculcated through music and dancing. The use of music could create a more culture friendly atmosphere and at the same time help the youth assimilate sexual knowledge, moral values and attitudes conducive to the attainment of future goals. This may in turn help decrease pregnancies.

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