

A Sociological Qualitative Study: Intimate Relationships as a Social Pressure Around HIV-Related Issues Among Young South African Women and Girls (16-28)

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Abstract : Intimate relationships have constructed our embodied experiences and emotional memories, which can become grounded as practical knowledge to some extent and play a critical role in social medicine, particularly, in our well-being and mental health. In South Africa, such relational factors are significant for young women and girls in their emotional development period of time, especially, working as the existence of social and relational pressures over feminine sexual health and choices. This, in turn, brings about the absence/lack of communication in intimate relationships, especially with their parents, which leads to a vicious cycle in sexual health behaviour choices. Drawing upon sociological and socio-anthropological understandings of HIV-related issues, this study provides narrative threads of evidence about South African teenage mothers from early-dating debuted to HIV infection. Their stories consist of a visualised figure in chronicle order, illustrating embodied journeys of sexual health choices surrounding uncommunicative relationships and socially-suppressive environments. Methodologically, this qualitative study explored data from mixed online methods: 1) a case study analysing online comments (N = 12,763) on the South African Springster's website, run by the UK-based NGO, namely, Girl Effect; and 2) In-depth online interviews (N = 21) were conducted with young SA women and girls (16-28 ages) recruited in Cape Town, Pretoria, and Johannesburg, SA. Participants consist of both those living with HIV and without. Ethical approval was gained via the College of Social Sciences Ethical Committee at the University of Glasgow, and informed consent was obtained verbally and in writing from participants in due course. Data were thematically applied to an iteratively developed codebook and analysed. There are three kinds of typical pressures as relational factors for them, including peer pressure, partners or boyfriends, and parents' reactions. Under the patriarchal and religious-devoted social atmospheres, these relationships work as a source of scaredness among young women and girls who could not talk about their sexual health concerns and rights. Such an inability to communicate with intimate relationships, eventually, emerges as a perpetuated or taken-for-granted social environment in South Africa, insistently leading to an increase in unwanted pregnancies or new HIV infections in young South African women and girls. In this sense, this study reveals the pressing need for open communication between generations with accurate information about HIV/AIDS. This also implies that the sociological feminist praxes in South Africa would help eliminate HIV-related stigma as well as construct open space to reduce gender-based violence and sexually-transmitted infection. Ultimately, this will be a road for supporting sexually healthy decisions and well-being across South African generations.

Keywords : HIV, young women, South Africa, intimate relationships, communication, social medicine

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