Exploring understandings of sexual consent amongst Life Orientation student-teachers through intergroup dialogue

In this article, the author reports on how intergroup dialogue was used amongst Life Orientation (LO) student-teachers to deconstruct the heteropatriarchal notions of sexual consent, in the context of gender-based violence (GBV). Three sessions of intergroup dialogue were arranged between third-year student-teachers and female survivors of GBV from a local Non-Profit Organisation (NPO) in exploring the perceptions of sexual consent, to deepen their understanding regarding the concepts of shaming, blaming and silencing that perpetuate GBV in communities. Third-year LO student-teachers engaged in dialogue with four youth survivors of GBV from a local NPO who shared their experiences of GBV and sexual consent. The heteropatriarchal views to GBV held by student-teachers were disrupted through the dialogues between the two groups thus enabling a greater understanding of sexual consent and the role played by shaming, blaming and silencing of victims in perpetuating GBV. The findings highlighted that intergroup dialogue could be a useful tool in creating norm-critical and sex-positive schools and communities.

**Keywords:** gender-based violence; heteronormativity; intergroup dialogue; patriarchy; sexual consent.

**Introduction**

The incidence of gender-based violence (GBV) in South Africa has been an issue of concern for many years, ultimately resulting in President Cyril Ramaphosa announcing that ‘gender-based violence is South Africa’s second pandemic’ in June 2020. Gender-based violence affects one in three women in their lifetime according to the World Bank. This report draws attention to the individual and socio-economic costs of GBV for communities and highlights the fact that it needs to be addressed throughout the Global North and South. Evidence of the scourge of GBV has been evident in much of the global research in educational settings, proving that learning institutions are often breeding grounds for unequal power dynamics that result in high rates of GBV. The reality of violence for young women in colleges and universities in sub-Saharan Africa (SSA) is worrying. Research on the barriers that girls and young women must overcome to access secondary school education or to get a chance at post-secondary education in many SSA countries highlights a struggle that is often against all odds. Beyene et al. conducted a meta-analysis and systematic review of studies on GBV amongst young women in schools, universities and colleges in SSA in which they reported high rates of various types of GBV with South Africa having the highest rates.

As a result of the escalation of GBV in South Africa, the Department of Women, Youth and Persons with Disabilities (DWYPD) drafted a National Strategic Plan (NSP) on GBV and Femicide in 2020 whose aim is to provide a multi-sectoral, coherent strategic framework to strengthen and coordinate government and civil society’s response to the crisis of GBV and femicide in South Africa, thus creating a femicide and GBV free country. The NSP seeks to address the challenges faced by all women in South Africa irrespective of age, ability, gender, sexual identities, or migration status.

The United Nations (UN) defines GBV as:

> Any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

Gender-based violence has several categories depending on the type of violence or how the victim relates to the perpetrator. In agreement with this view, the UN Population Fund has defined GBV as:
According to Muluneh et al., GBV contributes greatly to the disease-burden and death of women by disproportionately affecting women and children because it comes with the added risk of Sexually Transmitted Infections (STIs), including human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS). Hence, GBV has become a public health problem posing challenges to human health especially in developing countries. Human rights abuses caused by GBV happen in developed and developing countries alike, irrespective of class, culture, or religion, and differ in extent, form and regularity from country to country.2 Despite these assertions, GBV still remains a silent epidemic because victims are hesitant to report or reveal their experiences of violence because of various barriers.2,3,4 Some of the barriers pertaining to women and girls’ lack of reporting are shaming, blaming and silencing. Women and girls are afraid of shame and stigma. They fear losing financial support, vengeance, ineffective law enforcement and the normalisation of violence in communities, whilst some lack awareness of available preventive services.2 This eventually results in lack of reporting or underreporting of GBV and challenges in accurately measuring its frequency.3,6

A multi-country study by the World Health Organisation (WHO), revealed that Intimate Partner Violence (IPV) rates in urban areas were at 15% whilst the rates were at 71% in rural areas. The study revealed that the incidence of IPV was exacerbated by low socioeconomic status and limited education in developing countries of SSA.9 This is especially true for women and girls who are totally dependent on their male partners financially. In recognition of the entrenched practices of GBV against women, nations of the world adopted and ratified the Sustainable Development Goals (SDGs) which target the elimination of all forms of violence against women such that all countries could eradicate GBV by 2030.6 Thus, it is the duty of every stakeholder in each country to work collectively towards decreasing the incidence of GBV and IPV in their respective regions.

Global education systems have a role to play in educating communities about the ills of GBV through Comprehensive Sexuality Education (CSE). Evidence of the effectiveness of CSE in HIV and AIDS prevention has emerged.21 According to UNAIDS, the number of new HIV infections have gone down worldwide. Kelly has also highlighted the need for discussions that unpack harmful sexual practices and norms during CSE. Thus, there is a very real possibility of reducing the HIV pandemic prevalence, by 2030. This implies that CSE can also be useful in curbing harmful practices that lead to infections and death. To achieve this milestone, there is a need for concerted efforts to sustain CSE and other youth centred programmes that provide youth friendly reproductive health services and information. Therefore, Higher Education Institutions (HEIs) and schools must play a critical role in reducing the incidence of GBV in all its forms to prevent the further spread of HIV and femicide.

This article reports on the use of intergroup dialogue as a transformative tool that enabled uncomfortable conversations to deconstruct heteropatriarchal notions of sexual consent, in the context of GBV, amongst university students doing Life Orientation (LO). This is performed by firstly discussing post-structural feminist theory as the theoretical basis for this study. Then I discuss intergroup dialogue and its usage including how it has been applied in this study. This is followed by a presentation of the results based on three themes: socially constructed heteropatriarchal norms, deconstructing heteropatriarchy and rethinking sexual consent in the context of GBV. The findings are then discussed, followed by concluding remarks and implications.

**Post-structural feminist theory**

At the centre of post-structural feminism is the assumption that realities are socially created, and that close linkages exist between oppression and practices of the individual and society at large. Post-structural feminism exposes both historical and contemporary oppression of women across races, organisations and societies through daily interactions that create multiple identities based on gender, social class and race.24 Post-structural feminism conceptualises human beings as active agents participating in the creation of their own realities rather than as passive victims of social reproduction according to St. Pierre.25 Agreeing with this view, I consider the victims of GBV as active agents with power to make choices in their situations, even though they may be victims of circumstance at the same time.

According to post-structural feminist theory, oppositional structures of meaning making are produced in society by experiences which are shaped by power, language and social structures.26 Hence, through interactions with their environments and each other, agents perform scripts prescribed by their societal contexts. Guerrero27 agreed by stating that power engineers the constructed meanings and interpretations because powerful discourses and interpretations are socially constructed through interactions. Using these concepts allowed for a deeper understanding of the meanings made by GBV survivors of their experiences in relation to their environments. The survivors of GBV revealed the socially constructed versions of sexual consent in their communities and how these played out in their lived experiences.

However, post-structural feminists argue that agents actively construct their social realities. They have the capability to impact upon their life-worlds, shaping theirs and their neighbours’ lives.28 Consequently, power structures within communities constantly determine which standards are deemed powerful and normal. This means that agents who hold positions of power socially construct notions and
scripts of proper womanhood which determine and control the performances of women in society. Thus, within heteropatriarchal societies, agents such as boyfriends, husbands and men in general determine the performative scripts and control the gender order in the lives of women and girls.

Central to post-structural feminist theorisation is the exploration of the origin, production and regulation of social norms. For post-structural feminists, individuals are positioned and position themselves through social norms. In agreement, Burman argued that for one group to dominate over others, it does so through the normalisation of certain social standards which determine what is permissible or not. Thus, groups whose social standards have become the norm hold an advantageous position over others. Social norms, therefore, are embedded with power because they can construct people’s identities or dictate ways of being right and normal.

Heteropatriarchal communities socially construct manhood and womanhood through social norms. In such communities, proper womanhood is constructed through sexual restraint and innocence whilst proper manhood is constructed through virility and sexual exploration. Despite such constructions, men and women experience their lives differently and may perform their manhood and womanhood differently to the socially constructed norms because they actively shape their identities in relation to their social spaces.

Human agency is either enabled or inhibited through power structures which create possibilities for its expression. Individuals can be depicted as powerful or powerless through social norms. Thus, any agent can either be dominant or subservient at any given point. Therefore, no one can keep or hold on to power. Foucault highlighted this interplay by pointing out that power is always present in human relationships. He states that relations of power are malleable and can be reshaped, allowing for different expressions of power in unequal relationships. In making meaning of our lives, we use different and contradictory political norms that shape the lives we live. In agreement, Steinberg et al. suggested that:

[... In gender relations it is not only the relations of power between men and women that are the problem; it is the way in which masculinities and femininities are constructed as separated categories that describe and circumscribe individual persons.]

Using the notion of the variability of human relations, it can be argued that masculinities and femininities can be constructed differently to suit agents and spaces.

**Research methods and design**

This qualitative study, guided by the critical paradigm, employed intergroup dialogue to get narratives of the lived experiences of survivors of GBV and the perceptions of student-teachers on GBV. Intergroup dialogue allows for the emotive sharing of intimate lived experiences of difference such as identities and inequality between people. It often involves privileged groups and those from marginalised or underprivileged groups. This is because intergroup dialogue allows for people from diverse backgrounds to engage in facilitated uncomfortable conversations conducive for the exploration of commonalities and differences. It should be noted, however, that the intention of intergroup dialogue is to allow open and truthful interpersonal communication and not debating different positionalities. Through intergroup dialogue, the nature and consequences of power and privilege systems are explored to assist participants to find ways to work together. Hence, intergroup dialogue becomes ideal in settings that privilege sexual innocence amongst women and virile masculinities for men.

In this study, intergroup dialogue meetings became conducive spaces for GBV survivors and third-year university students to explore sexual consent and GBV issues by engaging in participatory visual activities and dialogue between the groups. The meetings allowed participants from the two different groups to rethink their positioning and privilege in society, whilst learning from each other. Intergroup dialogue enabled the exploration of the socially constructed identities which afforded power to some whilst discriminating others. Researchers using intergroup dialogue found that participants not only learnt about others, but also had freedom to speak to those they would not normally speak.

Despite this, communication between groups of different privilege status can become emotionally challenging for participants. For example, in one study researching different sexual orientations, it was discovered that intergroup dialogue encouraged participant conversations and enabled them to empathise with others whom they would never have engaged with under normal circumstances and was seen as a tool for personal growth. In another study, intergroup dialogue was found to be useful in developing empathy and positive relationships amongst participants, thus enabling work towards inclusive collaborations and social justice. In agreement, a study by Dessel et al. highlighted that intergroup dialogue allows for sustained communication amongst participants irrespective of their differences, thus developing their understanding of the dynamics of difference and dominance within the group and hence encouraging commitment towards group solidarity and inclusivity.

Intergroup dialogue has been criticised because of the challenges it potentially poses to participants because it engages them in uncomfortable conversations and dialogues around intimate and personal experiences and feelings. Thus researchers should be cognisant of the participants’ fear of lack of confidentiality during intergroup dialogue.
Therefore, the survivors of GBV in this study may have been worried of the possibility of disclosing of their experiences to people outside the group who might not understand the context of the discussions. It was critical, in this case, to inform participants to share only the information they felt free to share, in case their stories ended up becoming public knowledge. It also became necessary to get participants to sign a confidentiality clause which prevented them from discussing the content of the discussions with anyone who was not part of the intergroup dialogue meetings. Another challenge to intergroup dialogue was to ensure that participants from the two groups understood that they needed to reserve their judgments about each other during the dialogue and only listen to gain an understanding of the different views and experiences.32

Purposively selected youth members of a local Non-Profit Organisation (NPO), in the Eastern Cape, who are survivors of GBV formed the participant group for this study together with third-year university students training to become teachers.33 The decision to invite the NPO members into the sessions was driven by student-teachers’ discussions regarding sexual and GBV during a LO session where sexual consent was a lecture topic. Several student-teachers had argued that they had never interacted with anyone who had experienced GBV because people were afraid to talk about their experiences for fear of being blamed, shamed or silenced by unfavourable structures. The student-teachers who identified as having never experienced GBV assumed a privileged position in conversation with those who had been abused. I facilitated this engagement over 3 weeks in three sessions, namely, preparation, engagement and debriefing sessions, during my LO lecture periods.

Preparation session

During the preparation session, 35 third-year LO student-teachers and four survivors of GBV from a local NPO in the Eastern Cape met with me in separate sessions. The four members from the NPO were invited to share stories of their experiences of GBV to help disrupt student-teachers’ perspectives and assumptions about sexual consent. Thus, it was important for me to meet each group separately and explain the dialogue’s focus before commencement. The survivors of GBV met alone and shared their experiences amongst themselves to decide on which story each person would share with the student-teachers. During this preparatory session, I also met with the LO student-teachers and trained them on engagement strategies to use in their discussions with the GBV survivors. I asked the student-teachers to talk amongst themselves about how the survivors of GBV were perceived and talked about within their respective communities. As argued by Brown,34 phrasing sensitive questions from a social angle avoids politically correct responses which could reflect student-teachers’ personal views. This could protect student-teachers from being perceived as negative towards GBV survivors.35 These two separate meetings were audio recorded with permission from the participants.

Engagement session

The engagement session of this study involved the four survivors of GBV meeting with the third-year LO student-teachers in a facilitated discussion space. An educational psychologist was also invited to this session to provide assistance in case the survivors of GBV felt embarrassed or were retraumatised by retelling their experiences. A cellphilm depicting grade 9 boys’ understandings of GBV was screened for all participants.36 The purpose of the cellphilm screening was to allow the two groups to explore concerns around GBV presented in the video so that they could interrogate the commonalities and differences between the groups.37 After the video screening, the two groups discussed the video in terms of what they saw, what it meant, and what was missing in the depiction. Then the survivors of GBV each presented an aspect of their experiences as agreed upon during the preparation phase. This was to sensitize the student-teachers of the realities of GBV and the spaces in which it occurs. It was also to engage the student-teachers on the interpretation of sexual consent within heteropatriarchal communities and how this influences society’s view of GBV and its survivors. The discussions between the two groups were audio-recorded for ease of analysis. Once the engagement session between the two groups was over, the student-teachers were given a prompt to use in reflecting on their experiences of the session.

Debriefing session

There were two separate debriefing sessions for each participant group. The debriefing session with the survivors of GBV was for them to reflect on their experiences of sharing such intimate stories of their lives with strangers and how this had made them feel. This was to ensure that the survivors of GBV had not been retraumatised by retelling their stories, despite having told these stories on several platforms. The debriefing for the student-teachers was held during LO lecture time where we discussed their perceptions about GBV before and after the intergroup dialogue. This included discussions from the preparation session where student-teachers had talked about how survivors of GBV were perceived and talked about within their communities, their reflections of the intergroup dialogue from the engagement session and reflections on their individual perceptions of sexual consent and GBV before and after the intergroup dialogue. The aim of the debriefing session with student-teachers was to identify possible shifts in their thinking and to allay any fears and questions they could have had regarding sexual consent and GBV. All data sets were thematically analysed to respond to the aims of this study.41

This study was given ethical clearance number H18-EDU-ERE-005 by the university’s ethics board. The survivors of GBV and the 35 student-teachers were 18 years and older and could consent to participate in the study. Both groups also signed confidentiality clauses and consented to being audio-recorded and for me to use their experiences and reflections for publication, provided their identities would remain
anonymous. Despite their freedom to withdraw at any time during the study if they felt uncomfortable, none of the participants withdrew.

Ethical considerations
This research project received ethical clearance from the Nelson Mandela University Research Ethics Committee-Human H18-EDU-ERE-005.

Results
This section presents the results of this study which explored the use of intergroup dialogue as a transformative tool to enable uncomfortable conversations that deconstruct heteropatriarchal notions of sexual consent, in the context of GBV, amongst third-year student-teachers doing LO. Three themes were generated during data analysis and are used to present the results of the study. These are as follows: (1) socially constructed heteropatriarchal norms, (2) deconstructing heteropatriarchy, and (3) rethinking sexual consent in the context of GBV.

Socially constructed heteropatriarchal norms
During the preparation session of this project, third-year LO student-teachers were asked to discuss how survivors of GBV were perceived and talked about within South African communities. This was based on the notion that South African communities are heteropatriarchal and use the social norms that privilege sexual innocence and restraint amongst women whilst promoting virile masculinities for men. In my presentation of the lecture on sexual consent and GBV with the third-year student-teachers, I used video-clips of popular South African cases of GBV which included femicide. After watching the videos, the student-teachers talked about the socially constructed notions of GBV survivors within their communities which allocated all the blame on the victims or survivors. Several of them also argued that they had not experienced GBV nor engaged with anyone who had survived GBV:

‘What I know is that most women are blamed for being victims of sexual and gender-based violence. They are often asked what they were wearing; as if clothes are the ones that sexually violate them.’ (FST1, female student-teacher, October 2020)

‘But if you are wearing a mini-skirt to a party, what are you hoping for?’ (MST1, male student-teacher, October 2020)

‘Brah! Have you seen what these girls wear nowadays even at varsity! It’s like wow! You want to control yourself, but hey … you feel things …’ (MST5, male student-teacher, October 2020)

‘I think women are not dressing-up properly these days. That is why they get raped and then they cry that they were violated. What do you expect if you are not covering up properly?’ (FST2, female student-teacher, October 2020)

‘My sister, are you saying that women who cover-up properly do not get violated? Then how do you explain cases of grandmothers and infants who are also sexually violated by males?’ (FST5, female student-teacher, October 2020)

These discussions were focussed on what victims of sexual and GBV were wearing during the incidence, thus providing a glimpse into how the survivors or victims of GBV were socially perceived within communities. The student-teachers were referring to the social norms that their communities use to portray women and girls who experience GBV. However, some of the student-teachers had different views as exemplified in the following:

‘So, what causes a man to rape his wife or a boyfriend to rape his girlfriend, if you are saying it is all about clothes?’ (FST3, female student-teacher, October 2020)

‘What? Do you mean a man can pay lobola and be accused of raping his wife at the same time? That is totally insane. I pay lobola for you, I own your body!’ (MST3, male student-teacher, October 2020)

‘But a boyfriend does not pay any lobola. Why are there so many cases in our country where boyfriends rape their girlfriends or even kill them when they break-up with them?’ (FST4, female student-teacher, October 2020)

‘If you are my girlfriend, it means you have agreed to have sex with me whenever I want, and how I want. How can you be my girlfriend and say you don’t want to have sex with me?’ (MST4, male student-teacher, October 2020)

‘Being a girlfriend does not mean I want to have sex with you all the time, or that I am always willing. What about what the girl wants? When is that discussed?’ (FST6, female student-teacher, October 2020)

‘But boyfriends also buy gifts and take their girlfriends out for entertainment. To me, that is the same as paying lobola…it means I am paying for something …’ (MST8, male student-teacher, October 2020)

These discussions showed the socially constructed notions of heterosexual relationships within the student-teachers’ communities which also shaped the views held by some of the student-teachers. They highlight the privilege held by male virility and female sub-ordination. Some of the student-teachers argued that husbands and boyfriends are entitled to their female partners’ bodies because of the material benefits afforded to the female partner by the male partner. Thus, based on these discussions, it was clear that the patriarchal gender order of South African societies dictated how victims of GBV were viewed and talked about. Male sexual entitlement was dominant over female choice for sexual engagement. The second theme from this study is presented in the next section.

Deconstructing heteropatriarchy
During the engagement session of this study, the four survivors of GBV presented their experiences to the cohort of third-year LO student-teachers. The presentations focussed on different aspects of GBV experienced by the NPO members:

‘I come from a poor rural community and my parents wanted me to get married so that they could get money to send my siblings to school. I did not want to get married because I wanted to go to school too. So, one day, the man who was
supposed to marry me kidnapped me from school with his friends and raped me to force me into marriage. Unfortunately, my parents supported his action and I had to stay in that marriage.’ (NPO member 1, volunteer, October 2020)

The experience shared by the first member of the NPO did not shock the student-teachers because of some traditional practices in their communities that were used to force women and girls into marriage. Such practices highlight the subordinate status of women in patriarchal societies. Whilst some women eventually get married to their abusers, some others end up afraid of any intimacy with the opposite sex as exemplified by this next excerpt:

‘I was also forced into marriage through ukuthwala. My parents had refused for me to get married. So, the man who wanted to marry me kidnapped me on my way from school and raped me. This was to make sure that I would be too ashamed to go back home because I was no longer a virgin. Even though my parents were against the marriage, they agreed for this man to marry me because no other man would marry a girl who had been deflowered by another man. My virginity was stolen, and I was forced to stay with a man who raped me every day. I left him after a year and ran away to the city where I got shelter. I was afraid of any sexual intimacy for many years after that.’ (NPO member 2, volunteer, October 2020)

These two experiences show how these women’s rights were violated sexually by the men who raped them. They also show how the parents and communities allowed such practices to take place. The two women were forced into situations beyond their choosing by the practices which positioned them as lacking capability and powerless against men and the patriarchal gender-order of their communities. For NPO member 2, the privilege accorded to a virgin bride in communities stood to her disadvantage after having been abused. Even if she had wanted to get married, her parents would not get the same amount of bride price (lobola) as a virgin bride. However, women’s capability is not denied in all the experiences as exemplified by NPO member 3:

‘I had a boyfriend that I enjoyed having sex with. He was a good man, but he did not understand that despite enjoying sex with him, I did not want to do it all the time. When I told him that I was not ready or did not want sex, he would get angry and beat me up and then force me to have sex. The crazy thing was that he expected me to enjoy it the same way as I did when I was a willing participant...I had to leave him. I mean, forcing someone to have sex because they enjoy it is like forcing someone to drink coffee because they enjoy it. Like coffee, but I drink it only when I want it! Why can’t men treat sex the same, like a cup of coffee?’ (NPO member 3, volunteer, October 2020)

The above experience shows that women and girls have the right to choose to have sex and enjoy it on their terms. On the other hand, heteropatriarchal communities often use social norms that represent women and girls who enjoy sex as deviant. Good women are often depicted as those who never enjoy sex, please their male partners sexually and bear their children. Additionally, the social norms which are used to describe sexual consent in heterosexual relationships deny women their right to choose when to have sex. Once women and girls are in a heterosexual relationship, they are automatically depicted as consenting to their male partner’s sexual advances.

The experience shared by NPO member 4 presents a totally different setting of sexual abuse as stated below:

‘My high school friends and I decided to go clubbing after writing our matric examinations. We went to a popular night club and had drinks with some boys that we met there. I am not sure what happened, but I woke up in a strange house the next day completely naked and in pain. My private parts were sore. I realised that my three girlfriends were also completely naked. I woke them up and asked them what had happened, but they did not know. The boys had drugged us, raped us and left us in a stranger’s house. We were too ashamed to report what had happened. I later discovered that I was pregnant .’ (NPO member 4, volunteer, October 2020)

The experience reported by the NPO member 4 is a regular occurrence in many South African institutions that sell alcohol. In such situations, the women and girls’ rights to sexual consent are taken away from them using a drug. This renders them powerless against those who abuse them. The NPO member 4 argues that she and her friends were ashamed to report the incident. The fear of being shamed and blamed for their abuse led to their silence. The perceptions in communities around date rape position the victim as being at fault and thus lead to the denial of women and girls’ rights to accessing reproductive health and protective services.

Rethinking sexual consent in the context of gender-based violence

The discussions in this section highlight the transformation of student-teachers’ thinking about GBV and sexual consent from the assumed view about sexual consent in heterosexual relationships and blaming the survivors of GBV, to being considerate of everyone’s right to choose to have sex. This came up in the reflection session by the student-teachers after their engagement with the NPO members. Their comments include the following:

‘I love my culture, but some traditional practices need to change. Imagine if it was your child who got forced into marriage through rape!’ (MST9, male student-teacher, October 2020)

‘I always thought girls play hard-to-get when they say NO. Now I know that I cannot expect girls to have sex just because they enjoy it. I loved the idea of sexual consent being like a cup of coffee. I think I will use it in my lessons.’ (MST7, male student-teacher, October 2020)

‘Our societies should really get educated on women and girls’ rights to sexual consent. We cannot go on thinking that just because someone is in a relationship, or married, they must have sex.’ (FST9, female student-teacher, October 2020)

‘I also love my culture, but this thing of paying more lobola for a virgin creates unnecessary shame for women and girls. Nobody ever asks if the man is a virgin. Why should women and girls be virgins at marriage? A man who has lots of sex is praised, but women are shamed? No man!’ (MST10, male student-teacher, October 2020)
“Imagine having to raise a child conceived from rape! I feel very sad for the lady who got pregnant from rape. She was violated on so many levels that it is difficult to believe that our South African communities condone such things!” (FST10, female student-teacher, October 2020)

These statements show how the student-teachers’ views regarding GBV and sexual consent changed after discussing with the survivors of GBV. The intergroup dialogue created a platform for them to rethink their perceptions of heterosexual relationships and women’s rights to consent to sex, whilst also allowing them to challenge the privileged status of male sexual prowess and virility.

Discussion

The findings of this study show that human realities are socially created in context as argued by post-structural feminists.24 The experiences of the survivors of GBV highlight the historical and contemporary oppression faced by women and girls in their daily life. Whilst this study focussed only on heterosexual female survivors of GBV, it does not disregard the fact that GBV also occurs to people of different sexual orientations. Despite the oppressive treatment they endure, women have a right to, and freedom for pleasurable sexuality as exemplified by one of the survivors of GBV in this study. This is in line with the argument raised by St. Pierre30 that human beings are active agents in the creation of their realities. During the preparation phase, the student-teachers used language and social structures that showed the power inherent in certain discourses within communities.32 These social standards created the norms which women and girls were expected to perform. For example, society represents proper womanhood as that which is sexually unknowing and innocent whilst good manhood is premised on sexual prowess and virility.

The student-teachers made an interpretation of GBV and sexual consent in relation to their environments and the socially constructed norms of what is permissible in society within heterosexual relationships. Heteropatriarchal societies normalise different ways of being a woman and the survivors of GBV are expected to fit the mould. As argued by Burman,31 those in power within heteropatriarchal societies such as boyfriends, husbands and men in general determine what it means to be a good woman, and any deviant expression of womanhood is seen as aberrant. These discussions highlight the need for LO teachers and teacher-educators to teach about deconstructing heteronormative and patriarchal notions within CSE such that students can learn about sexual consent and violence.

Despite the interpretations made by student-teachers regarding GBV and sexual consent in the preparatory session, they were not passive recipients of socialisation. They actively questioned their beliefs in a quest to shape their world and their lives free from GBV.26 This questioning is crucial for future LO teachers to be critical thinkers who question their realities such that they can teach future generations to question the taken-for-granted assumptions of life. The engagement session between the survivors of GBV and the student-teachers proved to the students that the socially constructed notions of the sexually unknowing woman and the sexually explorative man are not the norm in all communities. This, according to Foucault,30 is because of the interactions of different social factors that constantly shape identities in places and spaces.

The survivors of GBV, in sharing their experiences with student-teachers, proved that whilst they were powerless when they were abused, they have assumed the power in their capability to educate others about GBV. This is what Foucault30 meant when he said that every agent can be powerful or powerless at any given moment, because no one can hold on to power. The survivors of GBV exercised their power by choosing to share their stories with others. The student-teachers also exercised their power by choosing to rethink the interpretation they made of GBV and sexual consent after being exposed to the lived experiences of the survivors. This highlighted the crucial role played by intergroup dialogue between the two groups in deconstructing the heteropatriarchal notions of sexual consent and GBV amongst third-year LO student-teachers. The use of intergroup dialogue in the LO sessions allowed for a deeper exploration of a subject that might have otherwise been glossed over. The topic of sexual violence is very sensitive and not an easy subject to deal with in class; hence there is a need to explore innovative ways of engaging in uncomfortable conversations to explore such topics in LO teaching.

Conclusion

In this article, I presented how I engaged my third-year student-teachers in a three-session intergroup dialogue process with the survivors of GBV from a local NPO to create a conducive environment for deconstructing heteropatriarchal notions of sexual consent and GBV. I used post-structural feminist theory to make meaning of the findings of this qualitative study. The identified three themes highlight a transformative engagement from socially constructed heteropatriarchal notions of sexual consent and GBV towards a caring and inclusive view to the promotion of sexual health and rights for all citizens, whether male or female. Critical reflections on their perceptions and positions of privilege allowed the student-teachers to choose different discursive spaces and language to rethink sexual consent, thus enabling a deconstruction of female-sexuality in the context of GBV. This article has therefore highlighted the transformative value of intergroup dialogue amongst groups of different privilege positionalities towards the creation of norm-critical and sex-positive communities.

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Disclaimer
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