EXPLORING THE NOTION OF UKUKHUPHA IFUTHA AMONG AMAKWRALA AND VULNERABILITY IN CONTRACTING HIV AND STIS IN THE EASTERN CAPE PROVINCE

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ABSTRACT

This paper sought to explore the notion of ukukhupha ifutha among amakrwala and their vulnerability in contracting STI’s and HIV. The objectives of the study were as following: to explore the perception of ukukhupha ifutha among amakrwala; to find out how much knowledge amakrwala have regarding safe sex; to explore the indigenous way of ukukhupha ifutha among traditional surgeons. The respondents were amaXhosa males coming from initiation school in less than six months now called amakrwala and traditional surgeons. The sample comprised of 100 newly initiates and 20 traditional surgeons. The stratified sampling technique was utilized to sample amakrwala and purposive sampling was used to sample the traditional surgeons. The researchers utilized questionnaire and interviews to collect data. Data was analysed using tables, graphs, thematical and narrative writing. The findings of the study revealed that amakrwala perform ukukhupha ifutha by engaging in an unprotected sex with a female they do not have an affair with. Traditional surgeons confirmed that the notion of practing ukupha ifutha is performaed and encouraged. Recommendations sex education must be promoted and instil in the initiation schools, initiates need to stay more than a month in the mountain to allow initiates to heal properly.

Keywords: Incibi, amakwala, ifutha, circumcision, STIs/HIV, unsafe sex

BACKGROUND AND STATEMENT OF THE PROBLEM

Male circumcision is an old practice done by males as a rite of passage into adulthood. The practice is marked by a period of seclusion, and thereafter begins their preparation for re-entrance into the society as men. In the olden days the seclusion period lasted for about a year. Nowadays, it is three to four weeks in rural areas of the Eastern Cape amongst the Xhosa tribes. The end of seclusion is marked, among other things, by washing of the white clay in a river with running water. Therefore, now called Amakrwala (Lamla, 2005). Mini (2003). Defines ikwrala as a young man who just emerged from the initiation school. Being an ikwrala begins a moment an initiate washes in a river, he becomes ikrwala for a period of a year (Mhlahlo, 2006). Ikrwala wears new formal clothes of which the tie is not included, the walks are dignified and they carry a stick which is called umqayi. Ukukhupha ifutha is associated with the washing of the white clay that initiates (abakhwetha) smear on their body during the seclusion period. According to Mini (2003) Umkhwetha is a boy undergoing the rite of circumcision who during that period lives apart from the community.
The white clay is sometimes referred to as ‘Ingceke’ or ‘Ifutha’. The former is mostly used while an initiate is still at circumcision school, whilst the latter is mostly used outside the school. A white clay which is mixed with water into paste that is smeared on the bodies and faces of circumcision initiates in some areas it is also used by diviners’ neophytes (Mini, 2003). The ‘Ifutha’ serves different purposes, this range from protecting oneself from sorcerers, evil spirits, and familial, wild animals as it is believed that Ifutha camouflages one’s natural scent which can be easily detected by wild animals and witches. Furthermore, the initiates are required to use the white clay for the rest of their training, and it is alleged that the Ifutha `gets absorbed by the body and changes the skin to be in light complexion condition. Spalla stated that if the white clay has not be clean properly on the initiate when going back to the society, it has bad luck bad mean the personal endeavours are hindered and sometimes is rejected by peers and opposite sex. (Mini, 2013). Therefore, in order for an initiate to remove the clay from the skin, one is required to use the red clay (Imbola, pronounced Im-bo-lah) for a period of three weeks. In the olden days this used to take about six months to a year. This was referred to as ‘Ukukhupha ifutha’, that is the removal of the white clay, or to cleanse oneself of its impurities. Nonetheless, this is only half of the whole process as there is another less mentioned method of removing the ‘Ifutha’, which is the focus of the study.

The issue of ukukhupha ifutha by engaging in unprotected sex is commonly mentioned to new initiates amakrwala, after they come from initiation school, that they should test their penis if it is still working normally by engaging in unprotected sexual intercourse. However, it is mentioned that this must be done shortly after coming out. This issue is communicated discreetly to new initiates by traditional nurses and close elderly brothers, not necessary related by blood. According to the ‘advocate’ of this practice, the cleansing of the white clay ‘Ukukhupha ifutha’ requires that someone engages in unprotected sex with a female of whom they don’t have a love affair. This is usually a female whom they would meet for the first time. The use of condom is not encouraged as it is perceived to defeat the purpose of the whole idea, thus unprotected sex is recommended.

Reports on ukukhupha ifutha remain inconclusive and the link between this practice and forced sex remain unclear. Part of the reason why reports of this nature raise more questions than to provide answers, it is because there have not been studies conducted on this phenomenon and how it is related to the issue of Sexual Transmitted Infections (STI) and Human Immuno deficient Virus (HIV). Thus it is very imperative to investigate the incidence of this phenomenon and how it contributes to the spread of HIV and STI amongst newly initiated young men. There has been unaccepted behaviour on the part of amakrwalwa concerning their sexual misconduct, and their behaviour in generally especially in some areas around the Eastern Cape. In terms of this notion, it is said that an ikrwala has to have sex with a woman, other than his girlfriend, shortly after his return from the initiation school. Various women and young girls become victims of sexual molestation during the period of initiation season. They are sexually violated due to the notion of ukupha ifutha that the newly graduated initiates must perform so that they can be fully accepted into manhood.

To foster a better understand and to obtain a better perspective of how the newly initiates contract STIs and HIV, the following questions were asked: what are the perceptions of ukukhupha ifutha among amakrwalwa in rural areas of the Eastern Cape?; how much
knowledge amakrwala have regarding safe sex in rural areas of the Eastern Cape?, is there any indigenous knowledge on the notion of ukukhupha ifutha among the traditional surgeons?. These questions have captured the essence of the phenomenon under study from the respondents.

THE MOTIVATION OF THE STUDY

The main purpose is to correct the misperception about the notion of ukukhupha ifutha, which is believed to lead to woman abuse and rape, and to change the beliefs of the amakwala towards the opposite sex. This will help in curbing the spread of HIV and STI in the Eastern Cape, and accumulated knowledge of sex education in young Xhosa males who are practising the notion of ukukhupha ifutha. To restore the appropriate primordial astuteness about the notion of ukukhupha ifutha as this will assist in changing the behaviour of amakrwala. This will also restore one of the most important functions of circumcision school which is to prepare young males for manhood.

Amongst other rationalisations, this study aims to address the gaps in knowledge as far as this phenomenon is concerned due to sensitive nature of the study. Reports on ukukhupha ifutha remain inconclusive and the link between this practice and forced sex remain unclear. It is because there have not been studies conducted on this phenomenon and how it is related to the issue of Sexual Transmitted Infections (STI) and Human Immuno deficient Virus (HIV) in the rural areas of the Easter Cape. Thus it is very imperative to investigate the incidence of this phenomenon and how it contributes to the spread of HIV and STIs. There is a limited data on the area of study particularly to the circumcision schools and how they facilitate the spread of HIV/AIDS amongst the young men who attends the traditional circumcision in the Eastern Cape. Many studies conducted in the Eastern Cape and in South African generally focused on the death amongst amakwala; the practice of traditional circumcision and little attention was paid on the sex education of newly initiated men and how they tend to have unprotected sex as means of ukukhupha ifutha. Little attention has been paid in literature to sought an intention to curb the contradiction and the spread of STIs and HIV amongst Amakwala. The researchers also noted a gap in methodological. Most studies engaged qualitative method whereas the present study utilised a mixed method and subsequently a triangulation of data collection methods to augment the limitations and to provide an extensive rich data.

RESEARCH METHODOLOGY

The researchers used an exploratory design for this study. This design helped the researchers to collect the qualitative and quantitative data in order to develop an in- depth understanding of the notion of having unprotected sex by newly Xhosa circumcised men (ukukhupha infutha amangst makwala) in rural settings in the Eastern Cape. Although various research has been conducted on male circumcision, little is known about the notion of ukukhupha ifutha amongst amakwala. Little attention has been paid to study this phenomenon and how it is related to the issue of Sexual Transmitted Infections (STI) and Human Immuno deficient Virus (HIV). Thus it is very imperative to investigate the incidence of this phenomenon and how it contributes to the spread of HIV and STIs, hence the undertaken study was carried out. This research design selected by the researchers is appropriate for this study as it provided an
in-depth data on the spread of STIs and HIV amongst newly graduated initiates from ignition school.

SAMPLING

When the researchers were proposing this study, they were of the opinion to sample 200 amakwala (newly initiated men), however due to sensitiveness of the study, most amakwala declined to take part in the study, most decline during the process of collecting data, they were not comfortable in answering the sensitive questions that questions their manhood. Therefore, the study comprised of total of 120 respondents, one-hundred (100) being amakwala and twenty (20) being traditional surgeons (Incibi) in Mthatha. These respondents were chosen according to their knowledge of the research content and their experience in the context studied. These one hundred (100) amakwala respondents had to satisfy the following conditions: reside in Mthatha rural area, be between the ages of 16-20, had come from initiation school in less than six months, and still attending high school, and from any racial and socio-economic background and the traditional surgeons were selected based on 8 years of experience being a traditional surgeon to perform a traditional circumcision and to have been registered with the department of health in the Eastern Cape.

For this study, the researchers made use of two sampling techniques i.e. stratified sampling and purposive sampling techniques. Stratified sampling technique was used to sample the one-hundred (100) of amakwala respondents, then a purposive sampling technique was used to sample the twenty (20) traditional surgeons (Incibi). These techniques were appropriate because they helped in choosing the most relevant or knowledgeable respondents with regard to the topic under study. The stratified sampling was used in high schools setting to select the one-hundred (100) amakwala respondents. Upon receiving the consent from the principals, the researchers sampled the respondents from grade 11 and 12 in two schools from Mthatha. The researcher divided each grade into two strataums, making sure that each strata has a representation of the said desired criteria and within each stratum, the researcher performed a simple random selection to select 100 respondents, the researcher selected 25 respondents grade 11 and 25 respondents grade 12 in one school and again performed the same method in another school to have a total of 100.

Each rural high school contributed 50 of amakwala. On the other hand the researchers used purpose sampling to sample twenty (20) traditional surgeons (incibi). The researchers used purposive sampling to understand the meaning of the phenomena under study from traditional surgeons’ perspective. All the traditional surgeons are registered under in the Department of Health. The researchers approached the department of health under KSD (Kind Sabatha Dalindyebo) municipality and were provided with all the names and contact details of the traditional surgeons, then the researchers used above mentioned criteria (i.e. the researcher wanted a surgeon with 8 year experience of being traditional surgeon and who is registered with the department of health) to select them, then contacted them to arranged for the interviews. All twenty (20) surgeons agreed to take part in the study.

DATA COLLECTION
A questionnaire and in-depth interviews were used to collect data. The questionnaires were used to collect the data from amakwala whilst the in-depth interviews were used to collect data from the traditional surgeons (incibi).

**Self-administered questionnaire for Amakwala (initiates)**

The questionnaire were used to collect data from amakrwala (initiates) who recently graduated from the initiation school in rural areas of Eastern Cape because it enabled the researchers to overcome pitfalls such as disclosure of sensitive personal information and experiences regarding circumcision of which is a sensitive issue amongst the Xhosa tribe. The questionnaires were distributed to each respondent in exactly the same way to minimize the role and influence of the researchers to enable a more objective comparison of the results. The questionnaires were distributed and collected personally by the researchers after they were filled out ensuring a maximum return of the questionnaires. This data collection technique has assisted the researchers in achieving research objectives. The questionnaires contained open-ended and close ended questions. This was necessary to probe more data that solicited respondents to dwell openly on the issue asked.

**Interviews with traditional surgeons (incibi)**

Semi-structured, one-on-one interviews with the traditional surgeons was conducted to collect data. Semi-structured interviews were suitable for the exploration of the perceptions and opinions of traditional surgeons (incibi) on circumcision customs regarding complex and sometimes sensitive issues and enable probing for more information and clarification of answers. The researcher used semi-structured interviews to study the meaning or essence of a lived experience among amakrwala’s sexuality and acquiring of HIV/AIDS after the initiation school. Semi-structured interviews permitted a face-to-face contact with respondents (i.e. traditional surgeons), and provided an opportunity to explore topics under discussion in depth, and afforded an ability to experience the affective as well as cognitive aspects of traditional surgeons in the Eastern Cape. Semi-structured interviews were suitable for this study because they are more flexible and more likely to yield more information from the respondents (traditional surgeons) about the circumcision customs and the acquisition of HIV/AIDS by newly graduated initiates from the initiation school. Interviews allowed for more flexibility and freedom (Lofland & Lofland, 1995), because there were no strict one-answer questions. The researchers wanted to understand the respondents' point of view on the phenomena since they work closely amakrwala (initiates).

**DATA ANALYSIS**

The quantitative data from amakrwala was analyzed by using tables and graphs and narrative writing where open ended questions were asked and the qualitative data from the traditional surgeons was analysed thematically and narratively. Before the researcher transcribed the interviews data, the researcher studied the field notes to verify the recorded information. The researcher did not alter respondents’ responses when transcribing the interviews data. There were some challenges of language barrier when transcribing the interview data and this was addressed by proper translation without tampering and/or altering the content of the respondents’ responses.
RESULTS AND DISCUSSION

The results will be presented in two sections, section A focusing on data from initiates (Amakrwala) and section B focusing on traditional surgeons (Incibi).

Section A: Perception of amakrwala on the notion of ukukhupha ifutha

The Amakrwala respondents were asked their perceptions on the notion of ukukhupha ifutha (having unprotected sex) and who tends to tell them to engage in unprotected sex to test their manhood. Before they were asked this direct question, the researchers wanted to find out if they understood the meaning and the purpose of circumcision. The researchers asked open-ended question what is the purpose of circumcision? The respondents provided a range of responses to this question which will be discussed below:

Amakrwala perceptions on the Purpose of traditional circumcision

The respondents provided series of their understanding and perception of what is the purpose of circumcision and what it means to them. Majority of respondents had an understanding of what circumcision was and why they needed to undergo it. From the responses, they alluded that the purpose of circumcision serves as a transition/transformation from childhood to manhood and upholding the principles of being a men whilst safeguarding the culture, customs and taking a responsibility as a men to protect women, provide for the family and confirm to the values and norms of the society. Other respondents alluded that the purpose of circumcision is to reduce the acquisition of HIV/AIDS and combating the spreading of HIV/AIDS. Some were of the opinion that circumcision is an old traditional practice that was practised by their forefathers to demonstrate an overcoming of hardships of being a man. The following is the verbatim expressing the respondents views on the purpose of circumcision.

‘AmaXhosa mark the transitions from childhood to maturity by circumcision’.

‘Circumcision is a way of transformation from childhood being a man, leaving childish behaviour and taking manhood’.

‘Upholding the principles of a man, safeguarding the culture, customs and taking responsibility in the society’.

‘The reduction of HIV/AIDS by being circumcised, has it showed the health benefit hence it was re-introduced in Zulu nation as a way of combating the spread of HIV/AIDS’.

‘Circumcision is a tradition that was done by forefathers and every Xhosa male is expected to undergo’.

Amakrwala were also asked an open-ended question soliciting them to provide their own understanding of “ifutha” and what it means in the context of initiation.

The meaning of ifutha (white clay)
The participants’ alluded ifutha as the white clay smeared on the bodies of initiates’ while they are at the initiation school. This signifies the protection the ancestors afford them during the period. They further stated that it provides luck to initiates if the white clay is smeared properly by the initiates and should be smeared on the whole body to be white. Other respondents asserted that ifutha is excreting sperms by having unsafe sex when you coming out of initiation school. Other participants view ifutha as a fat substance, smeared on the initiate on the day of anointment to confirm manhood.

‘ifuthais white clay, white clay which is mixed with water into paste that is smeared on the bodies and faces of circumcision initiates’
‘ifutha as a fat or Rama or petroleum jelly which is smeared on new initiates when coming out of initiation school as a way of anointing’
‘ifuthais related with excreting sperms by having unsafe sex when you coming out of initiation school’

The respondents were asked, how ukuthipha ifutha performed and the following diagram illustrates the views of amakrwala (initiates).

![Pie chart](image)

Figure 1: The notion of ukukhupha ifutha

Pie chart 1 indicates different views on how ukukhupha ifutha is performed, the 70% (n=70) of the respondents say that ukukhupha ifutha is performed by having unprotected sex to test their penis if it is still working normally by engaging in sexual intercourse without a condom. First sexual encounter after coming from initiation is mandatory to complete the healing process, of which they view it, as ukukhupha ifutha. Therefore 30% (n=30) of the respondents mentioned that ukukhupha ifutha is performed by fully washing at the white clay after there is the smearing of red ochre by elders. It evident from the data that the majority of the respondents were told to perform ukukhupha ifutha (have unprotected sex) to test their manhood. This is done soon after they return to their homes from the initiation school which is held in bushes. This is done whilst they are not properly healed and this lead to the acquiring of HIV virus and STIs.
The researchers were interested to find out, who tell these teenage boy to have unprotected sex soon after coming from the initiation school. Who is the person responsible for communicating the notion of ukukhupha ifutha to amakrwala. The diagram following depicts the person that is likely to tell the young boys to test their manhood without protection.

**Figure 2: A responsible person communicating a notion of ukukhupha ifutha to amakrwala**

![Pie chart](image)

Pie chart 2 above depicts a person(s) who tends to communicate the notion of ukukhupha ifutha (to have unprotected sex) to initiates during the initiation school. Various individual (such as traditional nurses (amakhankatha), relatives/elderly brother(s) of the newly initiated or the initiates’ themselves (bakwetha)) plays a significant role in communicating this notion. The 50% (n=50) of the respondents mentioned that they were told by their traditional nurse’s about notion of ukukhupha ifutha and to practice it to test their manhood. Then 50% (n=50) of the respondents mentioned that elderly brother(s) communicated notion of ukukhupha ifutha to them and 10% (n=10) of the respondents mentioned that they heard from other amakrwala they were with, in the initiation school. These findings presents a likelihood that, amakrwala they are told during the process of their transition in the initiation school to perform unprotected sex to test their pennies to check if they are working fine. This needs to be done as soon as possible after being released from the mountains back to their homes. Normally when they perform this ukukhupha ifutha (unprotected sex), most of them are not properly healed since they only stay 3 weeks in the mountains.

The Amakrwala were asked if they had performed and/or practised ukukhupha ifutha (to have unprotected sex as instructed by their brother(s), or traditional nurse (Ikhankatha)).

**Table 1: The practice the notion of ukukhupha ifutha (practising unprotected sex as instructed)**

<table>
<thead>
<tr>
<th>Answers</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>80 %</td>
</tr>
<tr>
<td>No</td>
<td>20%</td>
</tr>
</tbody>
</table>
Table 1 above indicates that 80% (n=80) of the respondents mentioned that they did practice ukukhupha ifutha soon after being realised back to home from the initiation school in the mountains and they have done it, (having unprotected sex) with unknown female. Then 20% (n=20) of the respondents mentioned that they did not practise notion of ukukhupha ifutha. The respondents mentioned that the notion of ukukhupha ifutha is promoted because if you have not done the notion of ukukhupha ifutha (to have unprotected sex) you are a less men to them and unaccepted fully to the manhood. This indicates that, amakrwala (initiates) strongly believe to the notion of ukukhupha ifutha (to have unprotected sex) and those that do not subscribe to the notion of ukukhupha ifutha and/or does not perform the notion, is treated lesser than a man even though circumcised. This ukukhipha ifutha serves as a final stage of the circumcision rite of passage. To be fully recognised amongst other amakrwala, you need to perform ukukhupha ifutha, soon after graduated from the initiation school.

The following diagram illustrates the benefits of having unprotected sex soon after coming from initiation school.

**Figure 3: The benefits of ukukhupha ifutha to amakrwala (having unprotected sex by initiates)**

Pie chart 3 indicates that 60% (n=60) of the respondent is of the view that the benefits of ukupha ifutha (to have unprotected sex) helps to remove bad luck or impurities from the initiation school, they were convinced that by having unprotected sex with unknown female serves as a cleansing process of the impurities of the initiation. whilst 20% (n=20) alluded that the benefits are to be accepted fully into manhood because you have fulfilled the last stage of becoming a man, it completes their transition to manhood, and they even go an extent of paying to have unprotected sex with the unknown female to complete their manhood and another 20% (n=20) of the respondents alluded enjoyment as one of the benefits, they enjoy sex because their foreskin is removed.
Amakrwala (initiates) were asked about sex education in the initiation school, whether they receive it or not and who is responsible for teaching them. Now that initiates are told to have sex to test their manhood (penises) to have been working, the researchers wondered if they are taught about sex education and how to protect themselves.

The below diagram illustrates if the initiates (amakrwala) receives sex education in the initiation school.

**Figure 4: Sex education given to amakrwala**

<table>
<thead>
<tr>
<th>Yes; 10%</th>
<th>No; 90%</th>
</tr>
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</table>

Pie chart 4 above illustrates that 90% (n=90) of the respondents reported that, there is no sex education given at the initiation school and only 10% (n=10) respondent mentioned there is sex education given at the initiation school. The majority of respondents agreed that there is no form of sex education given to them at the initiation school. The only sex education they receive is to have unprotected sex (ukhupha ifutha) with the female stranger that they are not in the intimate relationship with to test their manhood and to cleanse the impurities/ bad luck.

**Knowledge of amakrwala concerning sexually transmitted infections**

<table>
<thead>
<tr>
<th>Question</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Having unprotected sex with an infected person increases chances of acquiring STIs?</td>
<td>True 90</td>
</tr>
<tr>
<td></td>
<td>False 10</td>
</tr>
<tr>
<td></td>
<td>Total 100</td>
</tr>
</tbody>
</table>

Table 2 indicates that 90% (n=90) of the respondents agree that having sex with infected person is just one way of getting sexually transmitted infection, this shows that there is a clear knowledge and understanding that having unprotected sex can put someone at risk of getting STIs/HIV, even though there is such a realisation, unsafe sex is still promoted at initiation school. Only 10% (n=10) of the respondents said, it is false, you would not get the sexual transmitted infection by having unprotected sex with an infected person more especially when circumcised.

**Table 3: Multiple partners and contracting STI**
Table 3 indicates that 80% (n=80) of the respondents mentioned agree that having multiple sexual partners increases chances of getting sexually transmitted infection, of which that show their knowledge on practice of safe sex but still chose to listen to their traditional nurses, brother and other former initiates to perform the notion of ukukhupha ifutha. Therefore 20% (n=20) respondents mentioned that it is false you cannot get the sexual transmitted infection by having multiple partners.

Table 4: Safe sex practices reduce the risk of getting a sexual transmitted infection

<table>
<thead>
<tr>
<th>Question</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practising safe sex/protected sex reduces the risk of getting STIs/HIV?</td>
<td>True 80</td>
</tr>
<tr>
<td></td>
<td>False 20</td>
</tr>
<tr>
<td></td>
<td>Total 100</td>
</tr>
</tbody>
</table>

Table 4 indicates 80% (n=80) of the respondents’ mentioned practising safe sex reduces the chances of getting sexually transmitted infection, this shows that amakrwala are having good knowledge of how sexually transmitted infection can reduced but they deliberately chose to engage in unprotected sex to prove that their manhood functions, to be accepted as a true man and to cleanse the bad luck and because it is expected of him to have unsafe sex. Then 20% (n=20) respondents mentioned that safe sex does not reduce the chances of being infected by sexually transmitted infection.

Table 5: Worry about getting sexual transmitted and HIV infection

<table>
<thead>
<tr>
<th>Question</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you worried about getting STIs/HIV when practising the notion of ukukhupha ifutha (having unprotected sex)?</td>
<td>Yes 30</td>
</tr>
<tr>
<td></td>
<td>No 70</td>
</tr>
<tr>
<td></td>
<td>Total 100</td>
</tr>
</tbody>
</table>

Table 5 indicates that 70% (n=70) of the respondents are worried of getting a sexually transmitted infection, however, they worry more of bad luck, if they do not have unprotected sex soon after graduating from initiation school. Having HIV is nothing compared to the notion of bad luck they assume they will obtain by not performing ukukhupha ifutha. Only 30% (n=30) of the respondents indicating that they worry about being infected, even though they get worried, they must obey their cultural beliefs and do as they are told, otherwise, they will never be declared and/or regarded as complete man and they will forever be cast aside with discrimination.
The following section pertains to the interpretation and analysis of the results from the traditional surgeons. Traditional surgeons were interviewed to share their knowledge on the circumcision process and how unsafe sex is promoted and who is responsible to communicate that notion.

SECTION B: Interpretation and analysis of traditional surgeons (incibi) results concerning the notion of ukukhupha ifutha

The tradition surgeons (Incibi) were asked to provide their informative knowledge on the purpose of traditional circumcision and for what purpose should one decide to embark on such a journey. They were further asked about the notion of ukukhupha ifutha (having unprotected sex) and what is meant by ifutha (white clay) and ukulikhupha (extracting white clay).

The following are the traditional surgeons’ views on the purpose of circumcision.

Traditional surgeons’ perceptions on the purpose of traditional circumcision

Most of the traditional surgeons (Incibi) alluded that traditional circumcision is performed for traditional and customs purposes, to transform uncircumcised males to be man and to learn to take a leading role in the society. Other respondents were of the opinion that in order for a male person to do an ancestral ceremony, he must have undergone initiation by going to mountain to be circumcised. Others were of the opinion that circumcision purpose is to transform young males to manhood, which brings responsibilities to provide assistance and support in the community and to run societal daily functions. Others alluded that, traditional circumcision, just like any other circumcision it help in the reduction of acquiring HIV/AIDS. Following are the verbatim of the respondents:

‘Circumcision is for traditional in purpose, to transform uncircumcised males to be man and take the leading roles in the society’.

‘In order for a male person to do an ancestral ceremony he must have undergone initiation by going to mountain to be circumcised’.

‘To transform young males to manhood, which brings responsibilities to provide assistance and support in the community and to run societal daily functions’.

‘Meant for reduction of HIV/AIDS’.

The traditional surgeons were asked to share their perspectives on what is meant by ifutha and what is the purpose of ifutha (white clay) and how the notion is practised/performe.
manhood. It is a substance that is honoured and sacred. Traditional surgeons also mentioned that ifutha (white clay) camouflage'umkhwetha (initiate) from the evil spirits when in the mountain undergoing the rite of passage to manhood. They further postulated that white clay is smeared during the seclusion period to bring the initiates closer to their ancestors and distinct them from ordinary persons.

Most of the traditional surgeons asserted that the performance of ukukhupha ifutha (having unprotected sex) is done by having sex without a condom with a girl that is a stranger. However ukukhupha ifutha (unprotected sex) is a practice that is communicated secretly, its purpose is to test a penis during intercourse since the removal of foreskin. Other traditional surgeons stated that the performance of ukukhupha ifutha is by washing the white clay in the river by initiates at the end of the initiation process/phase school. It serves as a termination of the period of seclusion and integration back into society, it commences when the boys are urged to run to the river to wash themselves. After they have done washing away the white clay, the anointment process starts (ukuthanjiswa) in which Rama or Vaseline and fats are smeared with red clay. Their hair is shaved, thereafter are given individually new blankets and stick and are accompanied back to their villages as men.

Communication of the notion of ukukhupha ifutha to amakrwala

The traditional surgeons’ perspectives on who is responsible for communication of ukukhupha ifutha was instigated. Most of the traditional surgeons alluded that elderly brother(s) tends to communicate the notion of ukukhupha ifutha (having unprotected sex). Since elderly brother(s) have a close relationship with initiates. The traditional nurse(s) (ikhankatha) also communicate to amakrwala to practice the notion of ukukhupha ifutha. Traditional nurses are seen as people that possess the knowledge of manhood therefore, whatever they advise the amakrwala is adopted without question. The traditional surgeons stated that new initiates do communicate the notion of ukukhupha ifutha amongst themselves. This is influenced by former initiates who come to visit them in the mountain during the process of initiation.

The traditional surgeons were also asked about sex education in the initiation school. Who is responsible to inculcate the initiates about sex and whether it is promoted to alarm the initiates to be safe when performing the notion of ukukhupha ifutha.

Sex education given to amakrwala (initiates)

Many of the traditional surgeons reported that there is no sex education given to amakrwala during the initiation process. The only sex talk that is happening, is when they are told to embark on unprotected sex to test their manhood and that serves as a final stage to be accepted to manhood. Other traditional surgeons alluded that the sex education offered to amakrwala is to be respectful and not to be promiscuous, respect and never abuse women sexually.

DISCUSSION OF FINDINGS

The following discussion pertain to the findings of the study:

Purpose of traditional circumcision
The purpose of circumcision serves as a transition/transformation from childhood to manhood and upholding the principles of being men whilst safeguarding the culture, customs and taking responsibility as a man to protect women, provide for the family and confirm to the values and norms of the society. In order for a male person to do all of the mentioned above and to do an ancestral ceremony, he must have undergone initiation processes by going to the mountain to be circumcised. Traditional circumcision, just like any other circumcision, help in the reduction of acquiring HIV/AIDS.

**The meaning of ifutha (white clay) and the notion of practicing ukupha ifutha amongst amakrwala**

Ifutha (white clay) is white clay smeared by abakwetha (initiates) in the initiation school during the process of being initiated to manhood. It is a substance that sacred as it camouflage’umkhwetha (initiate) from the evil spirits when undergoing the rite of passage to manhood. While abakwetha (initiates) are in the traditional initiation school ifutha (white clay) separate them from the society, and this brings them closer to ancestral worship. Initiation into manhood was a form an integral part of culture where ancestors are involved throughout the period of initiation. During the seclusion the abakwetha are smeared with white clay Ifutha and the clay is washed after the seclusion period. The notion of Ukukhupha ifutha is having unprotected sex with a woman that is promiscuous whom will never refuse to intercourse. This notion it is communicated to the initiates during the process of manhood. Elderly brother and traditional nurses and other men who went through the same rite of passage are the ones who instil the notion of having unprotected sex to test a penis if it is still functioning as intended now that the foreskin is removed. 80% of initiates alluded that they performed unprotected sex to test their penis if it is still working normally by engaging in sexual intercourse without a condom. First sexual encounter after coming from initiation is mandatory to complete the healing process, of which they view it, as ukukhupha ifutha. This is done soon after they return to their homes from the initiation school which is held in bushes. This is done whilst they are not properly healed and this lead to the acquiring of HIV virus and STIs.

**Sex education in the initiation schools**

The majority of respondents agreed that there is no form of sex education given to them at the initiation school. The only sex education they receive, is to have unprotected sex (ukhupha ifutha) with the female stranger that they are not in the intimate relationship with to test their manhood and to cleanse the impurities/bad luck. This was reinforce by the benefit they will receive by performing unsafe, unprotected sex. Inter alia the sex education talk include the benefits such as having unprotected sex (performing the notion of ukupha ifutha) will remove bad luck or impurities incurred during the process of the initiation school. This will be carried out by having unprotected sex with unknown female as a cleansing process of the impurities of the initiation. Another benefit will be the acceptance into manhood as this marks the last stage of becoming a man, it completes their transition to manhood. Basically that is the only sex education the initiates receive which makes them vulnerable to contracting infectious diseases such as HIV. This was also emphasised by the traditional surgeons during the interviews that there is no sex education given to amakrwala during the initiation process. The only sex talk that is happening, is when they are told to embark on unprotected sex to test their manhood and that serves as a final stage to be accepted to manhood.
CONCLUSION

In conclusion it is evident from the findings that, the lack of sex education in the initiation school plays a significant role in contributing to the spread of HIV and STIs amongst young men coming from the initiation school. The only sex talk that is facilitated, is when they are told to embark on unprotected sex to test their manhood and that serves as a final stage to be accepted to manhood. This sex talk encourages these young men to be reckless and engage to unprotected sex and to some extend encourage sexual violation of women in the name of testing manhood. These young men are encouraged to test their manhood to a woman that they do not have a romantic relationship with, because as much as they are testing their manhood, they are also cleansing themselves from the impurities of the initiation process. The removal of impurities can only be done through testing manhood (i.e. ukukhupha ifutha/having unprotected sex)These young men usual engage to unprotected sex soon after coming from initiation school whilst their wounds are not properly healed due to initiation duration and that exposes them to vulnerability to contract infectious diseases.

RECOMMENDATIONS

The researchers recommends that the sex education should be provided in the initiation school with an intention to limit the spread of infectious diseases such as HIV/STIs. The initiation period should be extend to at least 2 month in the mountains, so that the wound could completely heal. Department of Health should be involved more in the process of initiation to provide health assistance to those initiates who might experiences infections and never heal in time. The notion of ukukhupha ifutha (promoting unprotected sex) should not be communicated to these young men, a person found to be communicating such a notion should castigated not to visit young men in the mountains anymore and a fine in a form of a cow should be pronounced.

REFERENCES


