



Master Thesis

**Struggles of Ugandan Adolescents
in Accessing
Sexual Health and Rights**

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Abstract

This master thesis addresses normative control mechanisms in Ugandan society that are affecting adolescents in their pursuit of sexual health (SH), and why these are causing a struggle for them in terms of mental health.

This study uses anthropological methods in collecting empirical data; participant observational studies, interviews and focus group discussions with Ugandan adolescents, facilitated through the local NGO *Reach A Hand Uganda*. Furthermore, we have incorporated document analysis of the National Sexuality Education Framework (NSEF).

The research design was built on the African concept of Ubuntu in order to decolonise our knowledge production and create space for Indigenous epistemologies, in respect of decentering African communal knowledge building. This was chosen from a methodological stance of Decolonial Feminist Ethnography.

With a critical decolonial feminist angle, based on the work of Sylvia Tamale, the data was analysed with various Foucauldian theories; *Governmentality*, *Biopolitics* and *Pastoral Power*, supported by Stella Nyanzi's theoretical and contextual understandings of these, to investigate macro- and meso-level normative control mechanisms. Together with Albert Bandura's Social Cognitive Theory of Self-Regulation and Merrill Singer's Syndemic Theory, we investigate dynamics and outcomes of this power on a micro-level.

The analysis is structured within five thematic chapters, based on empirical findings. The first chapter explores normative control embedded in the NSEF rooted in religious morals, and depicts how the framing of national values and dangers are used to legitimise institutional control and power. The second chapter focuses on the emphasis on women in intervention strategies, disregarding the role of men, especially in relation to gender equality and equity, impacting gender dynamics. The third chapter further explores this phenomenon. Here we show how gender power dynamics shape interactions of e.g. sexual negotiation, affecting young women's SH disproportionately leading to exploitation, gender-based violence and teenage pregnancies. The fourth chapter analyses how taboos, myths and misinformation, and the stigma of '*being spoiled*' affects adolescents and controls adolescent behaviour on a meso-level. This leads to the final chapter which analyses the consequences to mental health, as fear and confusion propels distrust across communities.

*Dedicated to all the brave adolescents in Kampala and Kasese
who chose to trust us with their stories*

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Abbreviations

ABC	Abstinence, Being faithful, Condomise
AIDS	Acquired Immunodeficiency Syndrome
AU	African Union
CSO	Civil Society Organisations
DFE	Decolonial Feminist Ethnography
F	Female (respondée)
FGD	Focus Group Discussion
FP	Family Planning
GBV	Gender-Based Violence
HIV	Human Immunodeficiency Virus
M	Male (respondée)
MoES	Ministry of Education and Sports
NGO	Non-Governmental Organisation
NSEF	National Sexuality Education Framework
PE	Peer Educator
POS	Participant Observation Study
RAHU	Reach A Hand Uganda
SCT	Social Cognitive Theory
SH	Sexual Health
SR	Sexual Rights
SGBV	Sexual Gender-Based Violence
STI/D	Sexually Transmitted Infection / Diseases
SRHR	Sexual Reproductive Health and Rights
UG	Uganda
UN	United Nations
WHO	World Health Organization

Table 1.

Introduction

This thesis explores themes of sexual and mental health, adolescent realities, normative power and control in a Ugandan context.

We are interested in understanding the lived realities of adolescents when accessing information on sexual health (SH) and sexual rights (SR) whilst navigating societal normative control structures, and the struggle they experience.

Here we utilise the concept of SH and rights from WHO and the UN where SH is defined as *“A state of physical, emotional, mental and social well-being in relation to sexuality [...] not merely the absence of disease, dysfunction or infirmity”* (WHO, 2006) and sexual rights as being the ability to decide *“free of coercion, discrimination and violence [...] including full respect for the integrity for the person, require mutual respect, consent and shared responsibility for sexual behaviour”* (UN FWCW, 1995).

Ugandan adolescents are particularly relevant in a research perspective, as more than half of the Ugandan population are below the age of 30, with 32,9% of the population aged between 10-24 years, making Uganda (UG) one of the youngest populations in the world (WHO, 2021). Furthermore, looking specifically on sexual and reproductive health and rights (SRHR), only 9,4% of female adolescents use birth control as a method of family planning (Sserwanja, 2021), resulting in high rates of teenage pregnancies where 19% of 15-19 year olds have given birth and furthermore 23,1% of sexually active females age 15-24 contract STIs (Masanja et al., 2021; RAHU, 2022). When mirroring these statistics up against African trajectories, we see an interconnection between early pregnancies and HIV with gender-based violence (GBV) (WHO, 2013), with an increased prevalence of ever-partnered women above the age of 15 in the African region having experienced physical and/or sexual violence (37% versus 30% in comparison to global prevalence) (United Nations, 2019).

We find it pivotal to explore life experiences, thus turning to anthropologically inspired qualitative research methods. This is carried out in two geographic locations across UG, Kasese and Kampala. These were chosen to include experiences from both urban and provincial settings, introducing part of UGs heterogeneity. Kasese is a town in Western UG of around 115.000 people, whereas Kampala is the capital, placed in the central region with a population of 1,7 million (Brinkhoff, 2020).

The interviews were facilitated with support from a local NGO; Reach A Hand Uganda (RAHU), which is a youth-led organisation working with SRHR.

Our primary source of empirical data is based on Focus Group Discussions (FGDs) with adolescents aged 15-19, we have also conducted interviews with RAHU volunteer peer educators (PEs) and staff members. Prior to our FGDs and interviews, participant observational studies (POS) were conducted as a part of our field work, in order to design our primary data collection tools.

Besides investigating micro-level outcomes of adolescents' experiences surrounding SRHR, we were also interested in understanding the impact of intermediary variables e.g. societal, cultural, historical and religious structures and normative frameworks that are rooted in meso- and macro level structures. For this we have conducted a document analysis of the National Sexuality Education Framework (NSEF) (2016). Interviews with RAHU staff were also initiated as they are actors on both meso- and macro- level; negotiating, advocating, defining, implementing and evaluating on SH and understanding societal structures.

The research design is based on the African concept of Ubuntu, an emancipatory Indigenous epistemology founded on the tradition of communal knowledge building, in order to decolonise our research. This is connected with a critical feminist perspective.

In our State of the Art section we start by mapping out the context of global health, how it has evolved and contemporary challenges, which spill over to the case of UG. We unfold the context of Uganda (UG), uncovering colonial heritage, political dynamics, women's political participation and how this inflicts on policies and views regarding SRHR. Mirrored up against Ugandan pre-colonial practices of sexuality, we begin to understand the magnitude of internal and external influences on Ugandan sexual politics and beliefs that persist today.

Our research reflects WHO's framework for multisectoral factors affecting SH (2010):

1. Laws, policies and human rights
2. Education
3. Society and culture
4. Economics
5. Health systems

In our analysis, we investigate how these factors have varying implications on the youth and in which way.

In order to identify and investigate recurring patterns in our data, we have operationalised different theories for different societal level analyses. At the macro- and meso-level Michel Foucault's; *Governmentality*, *Biopolitics* and *Pastoral Power* theories are used. These assist us in unfolding normative control mechanisms that are applied in Ugandan society. On a meso- and micro-level, Albert Bandura's Social Cognitive Theory of Self-Regulation (SCT) is applied along with Merrill Singer's modern Syndemic Theory to interlink aspects of power to mental health (MH) outcomes.

In order to apply these theories to a Ugandan context, we introduce two Ugandan afro-feminist scholars; Stella Nyanzi, with her contextual interpretation of Foucauldian theories, and Sylvia Tamale with her decolonial perspective on intersectionality of colonial, religious, patriarchal and capitalist power structures in UG.

These theories assist our investigation of normative control mechanisms in Ugandan society, and the intersecting consequences on gender equality, SH, power dynamics and communication surrounding SH and how this impacts adolescents MH.

This leads us to present the following:

Research Question

What kind of normative control mechanisms in Ugandan society are affecting adolescents in their pursuit of sexual health - and why are these causing a struggle for them?

State of the Art

In order to understand the field of SRHR, we start by examining its global context to identify variables that influence perceptions on health, as well as incentives, dominance and paradoxes on a political level. We then proceed to map the recent historical development in defining SH and SR, and how this has created political opposition across Africa, which can be interpreted as paradoxical seeing how sexualities were practised in pre-colonial time in contrast to modern African values and practices. In understanding the case of UG, we interconnect issues of SRHR with gender- and sexual politics, where women are unequivocally disproportionately affected by negative outcomes, and we demonstrate how opposing values and critiques create a battlefield, charged by history, colonial heritage, funding, power and political shortfalls.

The State of the Art presents the political and colonial context illustrating power struggles in which our empirical data is situated.

Mapping Global Health

The term ‘*Health*’ is a broad encompassing spectrum. In 1948 it was defined by the World Health Organisation (WHO) as:

“A state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity, is a fundamental human right” (Nutbeam, 1998, 351)

This was strongly reaffirmed in 1978 in the Alma-Ata Declaration (WHO, 1978). Although the concept of Health Promotion traditionally had a treatment oriented focus, it now encompasses various global policies that seek to create awareness and recommendations. Health promotion covers a wide range of social and environmental interventions in order to enable people’s control over their own health, with the premise of those individuals being able to identify their own and collective needs and ambitions in order to fulfil these. Health is in this sense not a goal as much as it is a means and a resource to enhance a good life (WHO Europe, 1986).

It has since been acknowledged that health and well-being across the globe has become increasingly interrelated and interdependent, and with the Millenium Development Goals

(2000) the UN highlighted health inequalities between the Global North and Global South and prompted a need to mobilise resources for health in poorer countries (Singla et al., 2022).

In addition to this, Michael Marmot's Social Determinants of Health pushed for a shift in focus to involve conditions that influence positively or negatively on people's health. These conditions are in which people are born, grow, work, live and their age, and the wider societal parameters that shape everyday life and health in it (Marmot & Wilkinson, 1998).

On this note we put forth the framework for '*Mental Health*', which is operationalised in this thesis.

“Mental health is a dynamic state of internal equilibrium which enables individuals to use their abilities in harmony with universal values of society. Basic cognitive and social skills; ability to recognize, express and modulate one's own emotions, as well as empathize with others; flexibility and ability to cope with adverse life events and function in social roles; and harmonious relationship between body and mind represent important components of mental health which contribute, to varying degrees, to the state of internal equilibrium” (Galderisi et al., 2015)

The definition of MH is separate from the WHO's, due to criticism of overemphasis on positive feelings and function, with the risk of excluding many adolescents, as human life can at times be either sad, frightening or dissatisfactory. But at the same time it acknowledges that MH is a pretext for fulfilling a potential, and poor MH is strongly related to other health and development concerns in young people, notably lower educational achievements, substance abuse, violence and poor SH (Patel et al., 2007)

The definition can be applied with differing cultural settings, because although it builds on the notion of absence of mental illness, the variety of emotional states for '*imperfect functioning*' varies from culture to culture.

'*Universal values*' refers to a respect and care for oneself and other living things, respect for the environment and respecting one's own and others' freedom. '*Dynamic state of internal equilibrium*' reflects different life epochs that require change in the achieved equilibrium. '*Basic cognitive and social skills*' refers to abilities (with or without mild impairments) to pay attention, remember and organise information, solve problems and make decisions. Finally, '*emotional regulation*' entails the ability to recognize, express and modulate one's own emotions, as a mediator for stress adjustment (Galderisi et al., 2015).

Getting back to the global evolution of health, in 2015, the UN delivered an overarching promise in the Sustainable Development Goals to ‘*Leave No One Behind*’ (United Nations, 2015). A holistic agenda which called for a renewed intersectoral action, recognising that global health encompassed processes, policies and programmes outside the health sector, and that social, economic, political and environmental determinants all had implications on health (Hussain et al., 2020).

There are however challenges to global health. Contemporary global health is rooted in epistemologies from the West, traced back to European colonialists where medicine functioned as a dividing force between superior Western practitioners and the savage diseased nonwestern patient. Those Western discourses still exist today as there lies an inherent expectation that Global South populations cannot manage Western medical practices and treatments to the full extent. Southern nations’ development have been directly disrupted by these narratives, as they have infused a sense of inferiority among the colonised, where legacies of mistrust still pursue global health efforts to this day (Singla et al., 2022).

Other challenges to global health also encapsulate aspects of health equity. Health equity is defined as the elimination of unfair and avoidable differences in health among population groups defined socially, economically, demographically or geographically, and equity is considered a prerequisite for health. Ensuring equity is also to acknowledge pluriversalism, allowing plurality of ideologies to co-exist with no dominant universalistic point of view. But as Singla points out; global health is rooted in its historical development and the narrative is therefore adjusted to dominant colonial interests, sustaining these very dominant approaches to global problems. The approach to global health has always been dictated by Western modernity. An example of this is the dominating neoliberal paradigm, that enables neocolonial tendencies in all levels of global health, sustaining health inequity (ibid), where international corporations are the main beneficiaries of globalisation and these hegemonic configurations continue to influence the global agenda serving the interests of elite actors and profit-driven organisations (Dutta, 2008).

Singla emphasises the need to re-think paradigms towards a more sustainable development approach (Singla et al., 2022).

Defining Sexual Health and Rights

Understanding how global health is perceived, also impacts SRHR. On an international scale, these terms are relatively new. SH was first incorporated into reproductive health in 1994 at the International Conference on Population and Development (ICPD). Prior to this, the focus had been on reproductive health alone due to population control, confining programming to family planning and safe motherhood. With the new addition to reproductive health the definition included aspects on sexuality, relationships and parenthood (EHF, 2015).

The term ‘*Sexual Rights*’ was negotiated and defined the following year, 1995, during the Fourth World Conference on Women (FWCW) in Beijing, which builds on the definition established during the ICPD where women’s reproductive health and rights were further strengthened:

“The human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence. Equal relationships between women and men in matters of sexual relations and reproduction, including full respect for the integrity for the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences” (UN FWCW, 1995)

Due to the need to define SH, the WHO published its current working definition of SH in 2006. A definition that this thesis bases its understanding on:

“A state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.” (WHO, 2006)

Despite the definitions within SRHR being adopted by 189 governments, various stakeholders still have different ways of viewing it. In Europe the movement for SR is focused mainly on sexual orientation, whereas in African the lack of SR stems from

inequalities and especially poverty. Additionally, culture, religion, politics and social diversities influence the differentiated interpretations of SR (Klugman, 2000; Amado, 2003). Some African delegations opposed the notion of SR all together at the FWCW, based on patriarchal and religious justifications, as well as criticising it for being Western-driven and away from the development centred priorities within the African agenda. Other Africans, however, advocated in favour of SR. This underlines the internal struggle regarding SRHR. Some African advocates have created movements towards achieving SR. The Maputo Plan of Action for universal access to comprehensive sexual and reproductive health services from the AU (2006) and the Yogyakarta Principles (2007) about sexual orientation and gender identity are both examples of this (Nyanzi, 2011).

The issue has created a battlefield. On one side, activists advocate for social justice and rights to freedom of sexual expression reflecting a heteronormative society, including homosexual and transgender people. The conservative side, however, insists on homophobic discourse, protecting '*African norms*' through religious platforms and state machinery, oppressing sexual minorities, thus creating internal struggle in Africa (ibid).

Sexualities in Africa

The conflicting views on SRHR represent a paradox, when viewing them up against pre-colonial African understandings of sexualities. Contemporary Ugandan values towards sexuality have been heavily influenced by Christianity's moral dictation during colonisation, which is critiqued by Tamale (2020) for being limited in their understanding of humanity outside constructed systems.

Prior to Colonisation and the enforcement of patriarchal binaries and heteronormative concepts, the organisation of gender in UG, as in many other African societies, were not limited as seen today. Instead gender and sexuality was understood within a nuanced framework. Tamale exemplifies this through the term '*mudoko dako*' which is an alternative gender among the Langi people in Northern UG. They were '*effeminate males*' who were allowed to marry men. This clearly falls outside the sexual understanding within colonial knowledge systems, which Tamale critiques. This critique is echoed by other African authors investigating pre-colonial sexualities, they too have found contradictions compared to indigenous understandings of genders and sex on the African continent. Oyèrónké Oyěwùmí

(1997), a Nigerian scholar, found that in Indigenous Yoruban society, their language reflected a non-binary, non-hierarchical understanding of gender which could not be limited to the biological oriented Western knowledge systems. In fact, she argues that in Yorubaland its social organisation was determined on the basis of age, prioritising seniority rather than gender construct when determining hierarchy and power (ibid).

Ifi Amadiume (1987), another Nigerian scholar, studied the Igbo gender arrangements, an ethnic group of southeast Nigeria. She introduces concepts of '*male daughters*' and '*female husbands*', as a way to describe these Indigenous genders, which did not fit within the hierarchical dichotomies of Western gender paradigms. Furthermore, she describes how gender roles were not inherent as with the rigidly defined masculine and feminine roles of the West. The gender system was more flexible than Western hegemonic, dualistic '*bio-logical*' sex categories (ibid).

These cases can be found not just within UG and Nigeria, but to a larger extent across the continent. Furthermore, sexuality was neither practised nor perceived as an individualised private matter, with the primary purpose of reproduction, such as it is presented today. Instead, it was linked to spirituality, an interaction on a communal, social, and religious level. This is not to generalise African sexuality into one innate homogeneous sexuality, but instead exemplify the richness and various ways in which African sexualities were expressed and enacted in pre-colonial Africa. These studies demonstrate how the imposed Western sex/gender concepts do not fit with the realities of the indigenous African sexuality arrangements and understandings of gender which were more accommodating, pluralistic and elastic (Tamale, 2020).

However, what is considered culturally acceptable has fluctuated over time affecting the political power play and dictated policies beyond the scope of sexuality. Contemporary Ugandan national power discourses dictate an abandonment of Indigenous sexual practices and understandings. These tactics are viewed, according to Tamale, as reproducing colonial tactics, attempting to delegitimize, alter and unsettle Indigenous knowledge governing the sexual aspects of African lives (ibid).

The Case of Uganda

UG has never had the financial power to earmark funds and integrate them into the broader development aid framework. Furthermore, according to Kumah-Abiwu et al., (2022) relics from colonial occupation reinforce a Eurocentric narrative surrounding Africa as a '*dark continent*' inhabited by '*primitive*' people, contributing to the justification of top-down and undemocratic policymaking (ibid).

In the sphere of health investment, these have been guided by donor priorities - authoritarian power of humanitarian organisations, pharmaceuticals and development partners on policy designs and implementation. An example of this was the persisting neoliberal strategies in the 1980's and 90's when African countries faced economic destitution. Under the pretext of weak capacity (economic debts and deficits, inflation and slow development), an influx of Western donor intervention surged in with loans and conditions, and ultimately drove social reforms and economic policymaking across the African continent, mainly shaped by these external players, identifying their clients' needs for them (Kumah-Abiwu et al., 2022 & Muhumuza, 2022). Afrifa and Ohemeng (2022) state that the promotion of foreign ideas can simultaneously harm Indigenous citizens due to the adoption of a 'one-size-fits-all' policy development without the necessary in depth understanding of the context in which they work, questioning whether African countries make their own policies (ibid). This is seen in the way many African countries have transitioned into neoliberal and market oriented development paradigms and abandoned their Inward Looking development paradigm, neglecting their sense of ownership and representation (ibid). With the intent of pursuing sizable loans from the World Bank, this has resulted in a displacement of funding at the expense of broader sustainable socioeconomic and political issues e.g. building a more robust health system, clean water, improved sanitation and housing etc. (Akello & Parker, 2022).

The criticism of lack of policy ownership is echoed to this day due to inherited colonial approaches interlinking authority and knowledge and ultimately separating policy guidelines from policy implementation. This is aggravated by the international donor community, as they often formulate public policy but have no competence in terms of implementation without the approval or support of local governments (Laakso, 2022). There has also since been echoed criticism of donors for using a pretext of policy reforms to globalise Western values and institutions and disregard contextual differences. It is still unclear to what extent

administration in Africa to this day still mirrors post-colonial policymaking (Muhumuza 2022).

In the case of UG, efforts have been made in the last decade to comprehensively understand public policy, addressing policy-research gaps, despite a continuous disregard for political participation and lack of available data, conceptual clarity, under-theorising and understudying (Onyango, 2022). Governments are however increasingly investing more resources in strengthening public policy research institutes (government think tanks), engaging in internal and external policy partnerships, training and creating policy advisory departments at the national and sub-national levels across Africa (ibid). The importance of the bottom-up approach and social networks involving civil society, family and local communities is furthermore echoed in the AU's Social Policy Framework (AU, 2008).

Throughout history, the sphere of sexual politics has also fallen short in terms of funding, policy agendas, ownership, perceptions etc, as it has been at the epicentre of religious, postcolonial and state anxieties for the past century.

Since the English colonisation, recurring moral panics have attached anxieties of economic neo-imperialism and postcolonial state sovereignty to the regulation of sex and sexuality. Once again, sex became the object of public moral discourse in the 1990s as UG was forced to respond to the devastating HIV/AIDS crisis, just as the country was undergoing broad-scale political, economic, social and technological changes (Moore et al., 2022). When Yoweri Museveni came into power in 1986, HIV was on the rise, nearing a prevalence rate of 15% of the national population in the early 1990's. Museveni's government implemented, with the involvement of Catholic, Protestant, Muslim and other religious leaders, a national HIV/AIDS prevention messaging, centred around concepts referred to as ABC (Abstain, Be faithful & Condomise). This was important as over 99% of Ugandans identify as religious affiliated (39% Roman Catholic, 32% Anglican and 14% Muslim) (Ssentongo, 2022, 1). Relying on centralised authorities to structure help, the government cemented condom-use as a vital part of the ABC strategy, chastising religious leaders when they refused to promote them, and embraced open dialogue surrounding SH. The government response to the epidemic was celebrated as a success and exported internationally by the WHO (Moore et al., 202). UG involved a range of complementary messages and institutions in reducing stigma,

bringing discussion of sexual behaviour out into the open, improving the status of women, involving religious organisations and much more (Cohen, 2003).

But in the decades that followed, the government approach to HIV prevention fluctuated in tact with the growing Evangelical and other social conservative movements in the US. International donors provided at the time 91% of UG's national budget to fight HIV/AIDS. In 2003, George W. Bush set up PEPFAR (The President's Emergency Plan for AIDS Relief), and thereby altered international funding priorities by channelling \$650 million to UG during a four year period, mandating 33% of funds directly to programs promoting abstinence, thus losing the 'C' approach. This is despite that no education program in the US, focusing exclusively on abstinence, has ever shown success when it comes to delaying sexual activity (Dallard, 2003). President Museveni insisted however after this, that condoms were unsafe and the First Lady, the minister of education, led a march for virginity through the streets of Kampala (Epstein, 2005).

This had repercussions on Ugandan SH in the years to come. In 2010 '*The Second National Health Policy*' (2010) witnessed an annual growth rate in UG at 3,2% due to a fertility rate of 6,7 births/woman, also contributing significantly to the maternal mortality rate at the time (ibid). Still to this day, it is estimated that 25% of adolescent women have begun childbearing, leading to 32,9% of the country's population being aged 10-24 years (RAHU, 2022). WHO has interlinked HIV and STI prevention to comprehensive sexuality education, as well as sexual and gender based violence with its overrepresentation of 37% of women over 15 years in low and middle-income countries in the African region having experienced it (WHO, 2013). WHO further contemplates how 17% of all women in Sub-Saharan Africa (and 23% of married women) still have unmet needs for family planning, arguing that in order to prevent unwanted pregnancies and empower women and adolescents in the region, women should be able to access family planning services, including counselling and provision of contraceptive methods (UN, 2019).

Despite this; in 2016 tensions came to an all time high when public outcry erupted over claims that local schools were being tricked by foreign NGO's due to curriculum distributed by the organisations portraying homosexuality and masturbation as biologically natural. Comprehensive sexual education was accused for having foreign infiltration, thus compromising national values, norms and morality. To understand this reaction, it is

paramount to understand that faith based organisations own 75% of primary- and 56% of secondary schools in UG.

Scholars (Irvine, 2006; Kendall, 2013) have since described these reactions as ‘*moral panics*’, fuelled by the religious right, mobilising carefully targeted, emotionally charged rhetoric to steer public anxieties.

The term ‘*moral panics*’ is derived from Cohen in 1972, encompassing a period during which a condition, person, or group of persons becomes identified as a threat to society’s morals and values (Moore et al., 2022). Rubin (1984) further describes how sex panics flair at moments of increased social and political stress, displacing anxieties of no intrinsic connection onto particular communities, demonising certain targets in the public imagination, and there by justifying an expansion of state power into areas of intimate behaviour. It exploits concerns over sex and sexuality as a strategic political power play and diverts attention from other issues (Moore et al., 2022). Tamale (2013) argues that the debate of sexuality beyond the heteronormative gender binary, has been instrumentalized in order to serve as decoys and dislodge democracy and strengthen dictatorships, by moving attention away from more significant socioeconomic and political crises within society.

Following these events; UG’s Ministry of Gender, Labour and Social Development issued an official ban on sex education in school and non-school settings after ordering officials to seize all offending materials in schools. This act ignited a fire to the battlefield of SH and ultimately led to the Centre for Health, Human Rights and Development, supported by several international NGOs, in filing a suit against the government (Moore et al., 2022).

In the midst of this, the government acknowledged a need for a unifying national policy on sex education and accepted funds from the United Nations Population Fund and the Embassy of Sweden. In 2018 the Ministry of Education and Sports (MoES) launched the NSEF, but was met with much resistance and framed as a violation of UG’s Christian values and cultural norms by religious institutions. For example, during a 2019 Christmas address to the nation, the Archbishop of the Anglican Church of UG, Right Reverend Stanley Ntagali asserted;

“We also have serious issues from the UN’s pro-promiscuity, pro-gay, pro-abortion sexual agenda that are trying to infiltrate Uganda. Such are sneaking into Uganda through rewriting

government policies as well as through UN funded NGOs. We continue to say 'No' to Comprehensive Sexuality Education" (Moore et al., 2021, 679)

By 2018, 70% of PEPFAR funding was going directly to local religious organisations, empowering non-state organisations and the shifts in government messaging was bringing state sovereignty over the health and wellbeing of its citizens into question (Moore et al., 2022). Even internally, advocates of the NSEF drew sharp distinctions between '*sexuality education*', which they supported, and '*comprehensive sexuality education*' which was perceived as an outside threat, as it included ideas of SR and a non-judgmental attitude towards any sexual orientation. This suggests that ideas of progressive gender and sexuality politics was seen as a product of Western sexual immorality and a threat to Ugandan values (ibid).

Ugandan Sexual Politics - the Case of Women's Participation

With reference to previously mentioned statistics and consequences from a lack of SH priority targeting women disproportionately, both to their overall health and with its negative socio-economic impact, the WHO emphasises the importance of comprehensive sexuality education for youths and adolescents. This is to promote positive sexual behavior, improve reproductive health and forestall critical gaps, prevent and respond to violence against women (physical, emotional, psychological and sexual) and counter denial of resources or access to services, that is based on gender norms and unequal power relationships (UN, 2019).

With this in mind, when SH is so intrinsically linked to the lives of women, i.e. gender politics, is health then regarded a feminine issue and how does women's political participation influence the topic?

Democratic equality leads, according to E. Botlhale (2022) to the notion of equal citizenship, which is premised on the assumption that all human beings are essentially equal. In Africa, and in particular UG, relations between men and women are characterised by many varied forms of inequality, particularly due to patriarchal powers in Africa - also within the political sphere. This is despite formal equality through a commitment to a wide range of policy

frameworks within Africa, e.g. the Protocol on the Rights of Women in Africa (Maputo Protocol), adopted in 2003 by the AU, the Solemn Declaration on Gender Equality in Africa (2004), AU Gender Policy (2009) and the AU Gender Strategy (2018–37). Despite African governments being parties to many international gender equality treaties to advance female participation in public affairs, the development has shown poor commitment to the ideal.

Dahlerup (2006) speaks of the importance of women being present, not only in numbers but also in terms of actual participation, as critical actors (i.e. those with legal authority) in order to create a critical mass of 30%, which can actualise significant policy change (Dahlerup, 2006). Chaney (2012) however, goes on to question who the critical actors are in reality, as the masculine nature of African politics means that women are burdened from acting as critical actors (ibid). Botlhale (2022) states that the political landscape is not accepting of women in general as they are regarded as meddling busybodies and vexatious in the political arena, having a negative impact on women's representation (ibid).

In 1989 UG introduced electoral gender quotas in order to address women's historical national and subnational legislative underrepresentation and enhance descriptive representation, meaning the number of women elected in parliamentary settings. Studies have shown that reserved seats within the political sphere may actually strengthen women's substantive representation (the form and content of policy making), even in semi-authoritarian settings. Empirical data has shown that gender representation has affected the extent to which legislators talk about issues that disproportionately affect women, breaking stereotypes about women's abilities and competencies. Examples from African countries, including UG, showed that women legislators made use of the little opportunity the legislature afforded them to advance their concerns, including legislation against GBV, inheritance and land rights, family laws etc (Clayton et al. 2017).

There is however, still an inability to act on critical women's bills in UG, showing that an increased descriptive representation doesn't necessarily create improvements for substantive representation. While fast-tracking women's access to Parliament through quota systems, equitable outcomes can be limited when restrictive gender roles and relations outside Parliament remain intact (Refki et al., 2014). According to Refki et al. (ibid), what is further interesting is the misconception that female ministerial politicians are required to leave their gender at the door in order to be fair to all their constituents, a requirement that is not targeted

at their male colleagues. This has resulted in women representatives being less likely to state their interest in gender issues.

This becomes relevant when approaching concepts as equality and equity, especially in developmental aspects in rural areas. It is imperative to make a distinction between equality and equity when addressing issues and policies with the biases that come with gender. Attempting to achieve neutrality in distribution of policies/services/interventions may theoretically preserve equality, but the neglect of gender bias can compromise equity at the same time, marginalising women even further (ibid.).

Issues of SRHR are however still criticised for promoting foreign agendas, not women's agendas. Progressive gender and sexual politics is seen as a threat to Ugandan values (Moore et al., 2021). This opinion is exemplified through the President M. Yoseveni and the First Lady, who argue that contraception promotes promiscuity, turning Ugandans into "*sex-crazed people who have sex, take pills, conceive and abort*" (The Economist, 2022). These examples show how dead ends leave issues of sexual- and gender politics constantly falling short in the Ugandan political arena.

Research Design

Ubuntu

Ladson-Billings (2003) argues that Western-oriented knowledge epistemology serves to reproduce the dominant worldview and knowledge production, and that ethnic epistemologies have long been subordinated. Western epistemologies focus on individual knowledge and thought patterns and are therefore a detriment to communal processes of knowledge-construction, which are often the focus of ethnic epistemologies (ibid).

In the eyes of knowledge decolonisation, it is paramount to build knowledge on Indigenous understandings and implement a decolonial research design that allows the researcher to reflect on why and on whose terms, research is conducted, hence reaping benefits from this knowledge. This interrogation works to identify the constraint of Western ideologies and create space for Indigenous epistemologies (Ndimande, 2012). Western epistemologies can

be linked to European Imperialism and Colonialism and are blind to ethnic traditions of knowledge building in Indigenous communities.

Tamale (2020) critiques the current impact of colonisation on knowledge creation and structures with its increasingly individualised practices, creating societal inequities as knowledge is stored for personal power and ownership. Instead she highlights Ubuntu as an effective tool to break with these structures and recenter African communal knowledge sharing tradition as a way to develop, retain and share knowledge for the benefit of wider Indigenous groups (ibid). Ethnic epistemologies are therefore imperative as they include local culture, contextual knowledge and Indigenous knowledge building practices within the methodology and can lead to change within political, legal, economic and social structure (Seehawer, 2018; Tamale, 2020).

In order to decolonise our research, this research project has been derived within the ideology of Ubuntu. Ubuntu is however not only a research paradigm, but comprises philosophical assumptions about the nature of social reality (ontology), ways of knowing (epistemology), and works as an ethics and value system (axiology), creating a framework to guide research and practice in the field (Seehawer, 2018).

Ubuntu can be interpreted within the phrase “*I am, because we are*” (Seehawer, 2018, 455), as it describes what happens to individuals, as a repercussion of what happens to the entire group, capturing aspects of ‘*humble togetherness*’ through communality. In this sense, Ubuntu centres itself around humans’ interrelationship, conditioning self-determination through the virtue of others. Knowledge is in this respect viewed similarly as it is not generated by individuals but through communal discourse, hence the imparting of knowledge through storytelling, reflecting the orality of many Southern African cultures. Storytelling is a key element of Ubuntu, as stories feature ongoing processes that do not terminate at any given point, but continue to unfold through the people involved. Individual contributions are relevant to the story, but however; only in the connection with the greater whole, creating shared assumptions about epistemology and ontology, thus serving as a basis for the methodology of Ubuntu inspired research (Seehawer, 2018).

Ubuntu is an ideology of justice and fairness, based on the philosophy of humanness, communitarianism, solidarity and interdependence with a transformative and critical potential as it encapsulates an inherent activist agenda in ‘*making a difference*’ in the present and

future (ibid). On a philosophical level, in many African languages Ubuntu is the closest equivalent to the term '*humans rights*' (Tamale, 2020), proposing an opposition to the colonial and neoliberalist idea of individualism. Despite the term coming from the South African language Zulu, Ubuntu is represented across other Bantu languages, in addition to other African languages at large. The appreciation of individual African cultural diversity is however not overlooked by taking on the ideology, as it is an emancipatory African philosophy which erases structural differences and is intersectional in its essence (ibid). Although special to Africa, Ubuntu is not regarded as limited to Africa. Excluding other continents from Ubuntu would in fact be anti-Ubuntu as it is a paradigm based on inclusion.

Theoretical Concepts

To investigate the power structures which govern sexuality in contemporary Ugandan society, we present theoretical frameworks from two scholars working within the field. The primary scholar Michel Foucault, a French philosopher, has constructed the academic foundation in relation to theories of power. We therefore present his concepts of Biopower, Governmentality and Pastoral Power.

The second scholar; Stella Nyanzi, a Ugandan anthropologist and Human Rights activist, modernises and situates Foucault's theories within the African context. She explores the concepts which are instrumental when examining the labelling of sexual hierarchies used in the regulations of sexual bodies and cultures (Nyanzi, 2011).

We also introduce two theories when addressing MH impacts of power structures on a micro-level. SCT by Albert Bandura focuses on how behaviour is regulated by a mix of intrinsic and extrinsic variables. The last theory is Theory of Syndemics by Merrill Singer which is a holistic approach that looks at the interactions between social and environmental factors and their effect on health outcomes.

Together; their combined theoretical concepts are made more potent when innovatively appropriated as analytical models in relation to our research question.

A Genealogical Approach to Understanding Mechanisms of Control

In order to address our research question, we introduce Foucault's Genealogical approach in analysing discourses. In Foucauldian genealogical studies, discourses are considered a product of power relations. According to Foucault, society is understood through power structures, explicitly employing phenomena of power and dominance in the formation of discourses, identities and institutions. These discourses ultimately shape individuals' perceptions and acknowledgement of reality and normality (Foucault, 1998). This is called the power-knowledge configuration. The Genealogical method utilises a critical stance in relation to this configuration, when attempting to illustrate and describe the spread of power and control in contemporary society and understand how mechanisms of regulation are at play (Howarth, 2000).

Biopower

By attacking our research question from a macro level, we gain insight into societal control mechanisms where discourses very much legitimise exertion of power. According to Foucault, Biopower has replaced the Sovereign Power in modern society with the purpose of administering, optimising and multiplying assets in the name of '*Enhancement of Life*'. The rationality behind Biopower is markedly different from that of sovereign power as a major consequence of its development is the growing importance of norms (Oksala, 2013). With Biopolitics there has been an explosion of techniques in order to subjugate bodies and control populations, e.g. policies, strategies and political tactics. These compile a rationalising mechanism which discursively instructs how to perceive normal behaviour, issuing mechanisms of power and control over notions of definitions of deviance, such as madness, disease, delinquency and sexuality (ibid). This mechanism has since been named Governmentality.

Governmentality

Foucault's concept of Governmentality is understood through the ensemble of power, where the population is the target. Governmentality considers social control through '*savoir*'

(knowledge) and disciplinary institutions such as schools, hospitals and psychiatric institutions (Nyanzi, 2011). Here, Tamale describes: “*Foucault insists that power shapes and legitimates knowledge, just as knowledge facilitates the exercise of power*” (Tamale, 2020, 95). Knowledge is embedded in the economical aspect and instruments used are apparatus of security. The centralised practice of power is founded on principles that are inherent in the state, which is with its own rationality and a plurality of aims. Governmental knowledge is here not neutral, but an element of government itself that supports the discursive field where power is accepted as rational in its circular relationship, referencing power and knowledge to each other (Oksala, 2013). Modern states exercise power not by meeting violence upon citizens but through the ‘conduct of conducts’, that is, by managing the total range of human behaviour among the populations they govern (Foucault, 1994). Nyanzi (2011) adds that this is both through direct government control and hierarchical state politics, as well as governing conduct through family- and parental-control, and self-control.

The notion of Governmentality becomes relevant in this thesis when illuminating aspects of power over the perception of SH on a macro and meso-level and interventions on this behalf. It opens up to dissection of what kind of rationalities, norms and perceptions of SH that pierce the political, cultural and religious spheres, filtering down through Ugandan society, setting up premises for Ugandan youth to navigate.

Pastoral Power

Where Biopower is understood as a macro level phenomenon, Pastoral Power is, in this thesis, understood as a meso-level source and instrument. This is because Pastoral Power has a contact surface that branches out to a multitude of individuals on a micro level. With its orientation towards individuals, it carries out an intent of ruling its subjects continuously and permanently - the ‘*conduct of conducts*’. It is however based on a completely different rationality than Biopower and is also known as a ‘*Power of Care*’. It requires obedience from its subjects and entails a detailed knowledge of those individuals and their conduct in order to protect, guide and lead in the name of well-being (Oksala, 2013). The pastoral focus on detail is very much, according to Foucault, connected to the individual body (Carrette, 2013), allowing it to extend into the domain of sexuality. Foucault interprets acts of guidance as a promise of salvation, prescribing advice as a way of inserting a law and teaching of

individuals, as a way of preaching its truth of own rationality, internalising truth to a constant self-examination and self-censorship (ibid). This exhaustive transfer is also perceived as acts of governmentality.

Exploring aspects of Pastoral Power is a way of investigating localised contextual power exertion. This is crucial to gain insight into the effects (both intended and adverse) this has on Ugandan youth.

The Case of Power and Control within Sexual Politics

Foucault sees children's sexuality in particular as a privileged point of control for the modern nation-state. Children are identified not only as heirs to their parents, but also to the national patrimony and to the race (Stoler, 1995; Moore et al., 2021). Discourses on children's sexuality viewed all children as prone to sexual dispositions, positioning them both as '*in danger*', but also as '*a danger*'. Children are able to compromise physical strength, intellectual capacity and moral fibre. There is an obligation to preserve a healthy line of descent for the future family and social class (Stoler, 1995). So from those fears, initiated by discourses, emerged a theory of degeneracy that socially and morally justified techniques of power to spot, classify and intervene in the lives of the abnormal. These abnormal beings were perceived as enemies within, centering children on both sides of the equation with their exposure to dangerous sexuality. As an example of this; Foucault highlights the emergence of a new meaning attached to masturbation, as this became a source of fear. Masturbation became perceived as an antisocial act and an exhibition of lack of self control, making it a sin to engage in a relationship with one's own body rather than others' (ibid).

Foucault underlines that the quest to make children into moral citizens was never an attempt to forbid sexuality, but rather constitute power over it. Children's sexuality became both a target and an instrument of power, turning from physical coercion to psychological manoeuvring. This ties Foucault's discursive genealogy on childhood sexuality to histories of national projects (ibid).

When tying aspects of governmentality to Nyanzi's (2011) Sexual and Reproductive Health (SRH) discussion, when sexual politics govern children and adolescents, Nyanzi highlights the opportunity to analyse the facilitation of interaction between external- and self regulation

regarding sexual conduct. It can therefore be used to examine the dynamics of power in sexual culture and relationships. It explains how socialisation is at play when normative behaviour is learned by individuals and groups, in specific social and cultural contexts, and how these norms are then collectively governed through social standards. This shaping of desired behavior and self-governing are universal social techniques which are applicable in an African context, especially through the social act of sexual conduct (ibid).

Mechanisms and structures which are used to govern, measure and evaluate the sexual behaviour of Africans are important to examine in order to understand how sexual culture is being controlled and regulated. According to Nyanzi (2011); across Sub-Saharan Africa, people are subjected to extensive mechanisms of monitoring, control and forced compliance, with the goal of improving performance indicators for SRH, e.g. birth-, fertility-, mortality rates, i.e. quantifiable statistical measures.

Public health advocacy is predominantly centered around safe sex practices in prevention of unwanted pregnancies and sexually transmitted infections. This is criticised by Nyanzi for its negative connotations narrowly focusing on risk factors, e.g. danger, death and disease, and neglecting other inherent diversities and complexities of sex, e.g. pleasure, well-being and non-reproductive sexual activities. Human sexuality is portrayed as a problem in need of control and governance in order to advocate for interventions of e.g. rescue, deliverance, elimination and change, thus creating a space for state intervention with biomedical- and public health interventions, blurring the boundaries between government- and private spheres (ibid).

Social Cognitive Theory of Self-Regulation

Bandura's SCT (1991) focuses on behaviour and how this is heavily motivated and regulated by a mix of self-generated and external influences. These influences impact the individual's causal agency through their ability to self-regulate.

According to Bandura, it is not possible to create change simply by desire, as they are conditioned by self-generated and external influences, impacting causal agency. People must develop capabilities to influence their own behaviour and motivation.

Self-regulative mechanisms work through three primary subfunctions:

1. Self-monitoring of own behaviour, its determinants and its effects
2. Judgement of this behaviour in relation to personal and environmental standards
3. Affective self-reaction

The first primary subfunction of self-regulation is self-monitoring -the ability to pay attention to one's own actions, the conditions which caused them to happen and the following effects from them. Pre-existing cognitive structures in social contexts have great influence on what aspects of one's behaviour is given attention externally, impacting internal cognitive processing and self-monitoring, shaping and potentially distorting self-perception and self-esteem through affective reactions (ibid).

The second primary subfunction of self-regulation is the judgemental function, which includes several subsidiary processes; development of personal standards, social referential comparisons, valuation of activities, and perceived performance determinants.

Personal standards are developed through the reaction received from others. Judgement of ourselves is thus impacted by the social evaluative standards by others, influencing self-approval through multiple sources.

Social standards can be experienced as complicated with much inconsistency and variation. These inconsistencies arise when peoples' personal practices cannot live up to the social expectation in their surroundings. Social referential comparisons vary but, more often people compare themselves to particular associates who are in similar situations as themselves. The level of judgement also depends on the valuation of the activities. The more relevant actions are to one's self-esteem, the more likely performance appraisals activate self-evaluations. Furthermore, self-reactions also vary depending on how people perceive the determinants of their performance. People become self-critical due to performances for which they hold themselves accountable (ibid).

The third primary subfunction; self-reaction, is influenced by abovementioned performance judgments. Self-regulatory control is achieved by the creation of incentives and external affective reactions, depending on social standards. According to Bandura, people pursue behaviour which results in positive self-reaction, as they motivate them to expend the necessary effort in a certain performance. Self-evaluation thus controls the satisfaction people

attain from their behaviour. This is done by both evaluative and tangible self-incentives (ibid).

Self-efficacy is an important determinant of self-regulation, as people's beliefs about their own capabilities, ability to handle and deal with events which affect their lives, impact thought, affect, motivation and action. Self-beliefs of efficacy greatly affect the operation of the subfunctions within the self-regulatory system, e.g. self-monitoring, as they impact cognitive monitoring of different performance aspects (ibid).

Where Foucault's notions of Governmentality, Pastoral Power, Biopower and Children's Sexuality sheds light on macro-level normative frameworks that encapsulates SH and control and surveillance mechanisms, SCT can help understand dynamics on the meso- and micro-level by uncovering how these external influences impact adolescent Ugandans by setting up social standards that judge them, and why the youth struggle in regards to their sense of causal agency, self-reaction and perception of self-efficacy.

Through the Lens of Syndemic Theory

The Syndemics Model of Health is a holistic approach that focuses on the biosocial complex, which consists of interacting social and environmental factors (including economic factors) that promote vulnerability to disease interaction (Singer et al., 2017). The Theory of Syndemics is an innovative way of understanding why diseases cluster together in populations disproportionately affected by e.g. poverty, social exclusion (here stigma), GBV, climate change, displacement arising from agricultural or industrial waste or pollution, and other forms of social and environmental stress (Mendenhall, 2017). As a result of this, many clinicians and public health researchers have made progress in moving beyond simple linear reductionist understandings of disease causation, and recognised the importance of multicausal models (Singer et al., 2017). The clustering of diseases and the vulnerability of populations to disease must be recognised to incorporate inherent social and environmental factors and integrate them into health promotion strategies on a policy and clinical level, addressing both the causes (inequality) and the treatment (Mendenhall, 2017).

In the case of SH in UG, Syndemic Theory becomes especially relevant, because it ties together the social, psychological and environmental variables (cultural, religious, political spheres) as precipitating outcomes for SH through psychological mechanisms that are triggered, all of which affect Ugandan youth navigating in terms of SH, increasing their vulnerability.

When conducting our interviews, the recipients provided insight and evidence of social conditions such as; poverty, violence, gender-based norms, misinformation and their psychological impacts, that have laid the foundation for our further analysis.

Although this thesis is not an interrogation of the variables in themselves or whether they inflict on navigational abilities, we can rest our analytical arguments on the premise that social conditions do impact physical vulnerability with consequences for disease (or any other physical condition) clustering within populations.

Philosophy of Science

Post-Structuralism & Social Constructivism

This thesis operationalises Post-Structuralism as an epistemology and Social Constructivism as an ontology.

The ontological understanding behind Social Constructivism is that truths are produced as discursive constructions with no universal character, merely a historical origin (Juil & Pedersen, 2012). The historical origin is especially significant because of its impact on the creation of the discursive field, and the rationality surrounding it as well. In the case of SH in UG, the historical origin is embedded in its cultural and colonial heritage, and this impacts perceptions of power, politics, norms, discourses, customs, belief systems etc.

Knowledge is therefore a social construction where emphasis is on interpretation and formation of meaning through discourses and italicization. Knowledge is based on the communicator's perspective and a result of an established knowledge-power relationship, as previously demonstrated in our theoretical presentation of Foucault's genealogical

power-knowledge configuration. Objective knowledge is therefore an illusion (Juil & Pedersen, 2012). Social Constructivism has attention toward how the social world is created through definitions and battlegrounds over power and knowledge. In the analytical agenda of Social Constructivism, it attempts to deconstruct existing belief systems and question established knowledge forms which are taken for granted (ibid).

This takes us to the epistemology of the project, about how we can know the nature of knowledge and how knowledge is produced. Post Structuralism is a critical perspective that seeks to unravel suppressive underlying structures that form reality and enhance collective emancipation. Structures are invisible and unconscious, they are not recognised directly, but must be uncovered by identifying recurring patterns. People are considered subject to structural conditions and the individual is a part of the collective whole. Structures can be expressed linguistically, economically or socially (Egholm, 2014).

According to Antonio Sandu (2011); there is no universality of language within discourses because interpretation is a game of deconstruction. Meanings are not derived from the properties of objects, but attributed through communication, composed by the needs of discourse. Furthermore, discourses are responded to by the interpreted reality of the individuals involved. Here, the idea of reality and description of reality correlates with the presence of intentionality of the observer, meaning that we cannot study an objective reality, but rather the result of an interaction between observer and observed (ibid).

This underlines the importance of deconstructing the discourse about SH in UG to interpret the reality communicated through them and the definitions brought forth by Ugandan values.

Methodology

Feminism

Within feminist methodology there is an inherent commitment to knowledge building with an emancipating agenda. According to Tickner (2005), feminism has no standard of methodological way, nor does it attempt to construct one. Instead; the methodological perspective is determined by the research goal in order to rethink and knowledge-build, trying

to understand and challenge often underlying androcentric biases in the way knowledge has traditionally been constructed. Feminists acknowledge the fact that it is not possible to separate thought from action and knowledge from practice. With this in mind, it is therefore not possible to separate the feminist researcher from the historical context, and this is why feminist research insists that the inquirer be placed at the same level as the subject matter. Feminists often begin their investigation at the microlevel as a dialectical process in order to understand the dynamics and lived experiences between individuals, especially those who identify as societally marginalised. For this reason, they often rely on historical, narrative, hermeneutic and case studies, and incorporate feminist critiques into their analysis. Throughout this process; objectivity is, according to Tickner, increased by using a continuous reflexive attitude, scrutinising own methods and processes (ibid).

Embarking on Feminist Ethnography

With no single and coherent definition to the term Feminist Ethnography, the discipline is met with much critique, as it spreads over a vast variety of definitions and goals. To illuminate these, Schrock (2018) investigates accusations made by ‘*Third World*’ feminists within the field. Also, what is noteworthy to contemplate is how feminism accounts for a commitment to social change while laying target to post structuralist critique of knowledge production (ibid). These critiques will be addressed in order to foster critical reflection on researcher position, knowledge production, research practice and representation and provide a transparent research process.

In 1990 Abu-Lughod writes of the dangers of feminist ethnographers who assume a universal ‘*woman’s experience*’. She describes that this assumption and portrayal masks power differentials between the more privileged ethnographer and the research (ibid). This is also exemplified through Lorde’s essay from (1984) where she criticises the contemporary women’s movement for having a blindspot for intersectional discrimination for e.g. women of colour. Schrock (2018) elaborates on the array of different struggles that women face, encompassing class, sexuality, ethnicity, ability, religious beliefs etc. The criticism depicts how Western feminists hijack the feminist agenda in setting the goal for development practice, which also applies to the Global South. The problem is particularly potent when the narrative reduces ‘*Third World*’ women to victims of their patriarchal cultures and traditions.

Ong (2001) questions in this regard the magical belief in the power of modernity to emancipate women from those oppressive gender roles, as modernity is here a matter of rhetoric disguising coloniality as a strategy of epistemological control and domination (Manning, 2018).

Mohanty (1984) elaborates on this criticism by arguing that Western feminists in this way reinforce colonial knowledge practice by setting up, what Said (1978) calls '*simplistic dichotomies*', reproducing notions of Western superiority in relation to '*other*' cultures. Building on this; Spivak (1988) argues that academics therefore cannot simply '*give voice*' to those who have historically been silenced - the '*subaltern*'. Instead, she argues, the subaltern's voice is secondary as it is recapitulated as the status of the subject, cementing the perception of '*other*'. These arguments demonstrate how an ethnographer's perspective and position can preserve a current status hierarchy, rather than dismantle it, with consequences to the level of representation.

Decolonising the Feminist Ethnographic Approach

With this in mind, questions of positionality and representation arise when embarking on a Decolonial Feminist Ethnographic (DFE) research process. The contemplation over complexities in positionality and representation becomes crucial throughout the empirical process as it encompasses aspects of power differentials, which needs to be transparent. In the following sections we will demonstrate how we have addressed these complexities in our research.

Researcher Positionality

In dealing with aspects of power; DFE is first and foremost a showdown with Western ontology, where modernity influences perceptions of positionality. Decolonial theory argues that Western ontology displaces actions, ideas and history of the '*other*', thus treating them with inferiority through knowledge-power relations.

In what way can we then invite the '*other*' to speak with respect for their perspective, without imposing our notions of westernised modernity? In relation to Ndimande (2012) this entails an attentiveness towards Indigenous participants, not to enforce dominant understandings of

what it means to conduct research. We also draw on Duttas (2008) Culture-Centred Approach, which is an alternative to the biomedical approach to health communication. Here, he advocates for health issues being value-centred in understanding that meanings of health are embedded within cultural contexts and their values are therefore deeply connected to them (ibid). In terms of this thesis project; understandings of SH are based on local participants' context specific understandings and needs in order to generate meaningful definitions and solutions. This, in itself, challenges established knowledge-power paradigms and notions of positionality, as it strives for context-specific Indigenous insight that foregrounds any Western claim to knowledge, that DFE also emphasises. Knowledge is then produced in '*humble togetherness*', as understood through Ubuntu, and power is then more evenly distributed countering claim to knowledge.

Another aspect of our research that counters power in positionality is through the fact that we situate the interview in its own habitual context. This means that we, as researchers, become the '*other*' and take a position of inferiority in terms of context specific knowledge. Our respondents become the centre focus point which stimulates self-reflection in us, in order to explore not differences, but commonalities between us and our respondents. This is not saying that power relations are instantly removed and any evidence of imperialist tendencies have evaporated. Nonetheless, the interview setting enabled reflection of our own adolescent experiences which were relatable to the youths' descriptions: feelings of insecurity, bodily changes, emotions, hormones, self-esteem, self-awareness and also in relation to being women, relating to gender stereotypical expectations in society. We are not stating that experiences across the Global North/South are compatible in regards to intersectionality, but commonalities were created between us as researchers and them as participants.

Power in positionality can also be present in how we as researchers are perceived externally, in the interview setting. Assets such as age, gender, race, educational level, profession, language skills etc. can influence the dynamic in the interview setting.

When interviewing the youth, there was naturally a difference in knowledge due to our educational level and earlier professions. Prior to the interview we presented ourselves and laid forth our experience with teaching sexual education and in nursing, with extensive insight into dilemmas regarding anatomy and physiology. The intention with this, was to offer beneficial knowledge in return for the participant's contextual knowledge, to minimise the unequal balance of Global North researchers reaping insight for our own benefit without

offering anything in return. This strategy was in line with the Ubuntu line of thought -the idea was that power in knowledge, when shared, could counteract power-destructivity and hierarchy and decolonise research in its entirety. This strategy resulted in the participants staying after the interview for up to an hour, asking questions that were relevant to their everyday problems.

Power in professional/knowledge positionality seemed however to be less explicit when interviewing NGO staff members, as they all had bachelor's degrees, and supplemented the research with professional insight into political-, theoretical- and macrolevel power dynamics on both national and international level.

Representation

In terms of representation; when data is processed by an external source (us being non-Indigenous researchers), the data can unintentionally become distorted resulting in a misrepresentation of participants. This is a complex and ethical issue which can happen, regardless of the amount of researcher-participant collaboration. In order to aid the empirical process to become more authentic and representative of the given context, we draw on Tickner (2005) and Manning (2018) in constantly reflecting on observations and why those observations are as they are. Unfortunately, even though field research was conducted in UG, the data processing and thesis formulation was not. We resorted, however, to other measures to help facilitate reflection. Prior to the interviews, preliminary field visits were conducted as one of the researchers was living in UG for seven months, during the time field notes were drafted. These were used to reflect upon the experience in UG and help understand the context. Furthermore, after the fieldwork had ended, we still maintained contact with local Ugandans, whom we consulted when attempting to understand e.g. Ubuntu, cultural practices and the underlying cultural meaning behind certain words that were used in the interviews, e.g. '*spoiled*'.

Methods

Abductive Method

This thesis project is conducted through a predominately abductive process. Part of the abductive process, has elements of inductive thinking in the initiation of the analysis process. This entails that the analytical framework was only loosely tied at the time of the interviews in order to limit any hegemonic preconceptions in the researcher positionality or having any preconceived notions or hypothesis'. This gives way to the voice of the '*subaltern*' in terms of agenda setting, honouring their testaments of lived experiences (Spivak, 1988). Theoretical underpinnings were further developed throughout the data collection and processing.

Abductive analysis underlines the importance of rather than setting all preconceived theoretical ideas aside during the research project, as through pure inductive research, researchers should enter the field with the deepest and broadest theoretical base possible and develop their theoretical repertoires throughout the research process. In light of this, we imposed a loose analytical framework prior to the empirical data processing, based on preliminary desk research findings, enduring constant reflection on a meta level on the subject field and the phenomena investigated. This approach is inspired by Timmermans and Tavory's article (2012). Instead of theories emerging from the data, new concepts were developed to account for puzzling new empirical findings. The strategy implies a continuous revisiting of the field work setting and reflecting on theoretical insights, patterns and outliers in the data (ibid).

As abduction starts with consequence and then constructs reason, this provides an ability to generalise between data as a way of making account of empirical findings in relation to already existing theoretical constructs. But besides understanding outcome and reasoning between causal variables, the approach also gives leeway to problem solving outlying variables as well, learning the way from old to new theoretical concepts (ibid).

Data collection

Preliminary Participant Observation Studies & Desk Research

Our field work was conducted in collaboration with the local youth-led NGO; RAHU, which works with SRHR in different districts across UG. Prior to pre-defining any aspect of the thesis project, one of the researchers conducted a participant observation study (POS), as a part of an internship with RAHU, to emerge herself into the field of SRHR and explore potential problem areas. This is a part of the Decolonial research design in order to counter Western epistemology and ontology. The POS involved informal conversations and observations with different stakeholders, including beneficiaries, medical workers, RAHU staff, PEs etc.

The POS was conducted across different areas of UG, before deciding the location to conduct our interviews and FGDs. Two areas of UG were chosen; Kampala, the capital situated in the central region, and Kasese, a smaller town in the western part of UG. These destinations were selected in order to capture part of the heterogeneity within the Ugandan population. POS was conducted in additional locations in the North and North West of UG. One cannot simply talk about one Ugandan culture with 54 tribes and ethnic groups.

The other researcher conducted a preliminary desk research from Denmark in order to explore the field of SRHR from a historical, global and political perspective in order to create an overview of the context. This laid the foundation for our State of the Art.

Groups of Respondents

For the data collection, we gained access to three levels of interview respondents through RAHU.

The first group of respondents contained staff members, who were considered experts in the field of SRHR, as they navigated on a political level (macro- and meso-level) with a birds eye view of how the sphere of SH had been/is evolving, and their knowledge of societal structures and have extensive experience working with the youth.

The next group of informants consisted of PEs, volunteers, aged 18-25 years and had undergone training and obtained information on SH. They conduct the interventions in the

local communities with the adolescent beneficiaries. What was interesting about PE insight, was that they navigated both as adolescents within their own communities, but also in a professional setting advocating for SRHR on an informed foundation. With staff members and PEs, we conducted individual interviews.

The last group of respondées, were adolescent beneficiaries, 15-19 years old, who helped us gain insight and learn about Ugandan adolescent lives. Here, we carried out FGDs.

FGDs reveal synergies, and conversations are more dynamic in flow. They allowed us to observe e.g. the interaction between participants, as knowledge and knowledge building can be defined, according to Romm (2015) as a relational activity where people collectively construct their understandings by experiencing their social being in relation to others, as is specific to Indigenous ways of knowing. Additionally, with different lived experiences having accumulated in the youth, the varied realities presented both disruption and commonalities. This also meant that we as researchers had to ensure that participants experienced the FGDs as a joint co-learning exercise, and here, Romm states feedback sessions can be a useful tool, especially in relation to practising Ubuntu.

Furthermore, it is considered within the Ubuntu line of thought that knowledge is produced through communal discourse, as individuals are only affected as a repercussion of what happens to the entire group (Seehawer, 2018). Using focus groups, building on Ubuntu, as the primary collection of knowledge has therefore been chosen to respect and appreciate the collective processes of knowledge and to decentralise the researchers from colonial knowledge building structures.

Participant Recruitment

The empirical data is based on four staff interviews, six PE interviews and eight FGDs (consisting of 30 adolescents in total).

The recruitment was based on E. Babbie's logic of sampling in qualitative studies (2014), and consisted of a mix of purposive sampling and reliance of available subjects. Purposive sampling is based on the knowledge of a population, here subjects were predetermined by us, as 15-19 years, evenly distributed between adolescent men and women. Since the site of

sampling in Kampala was at a school, the subjects were all students. In Kasese, the site of sampling was at an adolescent centre, which gave us a different group of young people, as the majority of them did not attend school, and several of them had children. The onsite sampling was done by local mediators, to eliminate researcher sampling bias, and was done according to the availability of subjects at the given time.

We only interviewed heterosexual men and women (as far as we know), as they answered within the heteronormative dichotomies. We decided not to actively seek youth of alternative sexualities, as it could be a security issue, as homosexuality is illegal in UG, and we could not properly guarantee their safety. This also means that we inquired into the heteronormative binaries, as this was the understanding the participants had.

Conducting FGDs and Interviews

Initiating the interviews and FGDs, we introduced ourselves and the project. We had anticipated apprehension due to the sensitivity and taboo of SH and that this could inhibit honest sharing specifically in a group setting. We initially outlined boundaries where we emphasised the use of anonymity and verbalised the expectation that all participants respect one another by showing discretion after the interview. We clearly stated that our motives were to learn about the lives of Ugandan adolescents.

In order to break the taboo surrounding the subject, we initiated with a Word Association Game, where the participants had to say words that came to their mind, when thinking about '*Sexual Health*' and '*Being Young*'. The concern over potential fear of sharing in the FGDs was quickly demolished, as the participants shared issues of immense sensitivity, e.g. sexual abuse, domestic violence, sexual coercion, oppressive gender stereotypes, devastating monetal deprivation, personal feelings etc.

We, as researchers, have since contemplated why and how trust was so easily established in such a compressed amount of time, especially since some FGD participants had verbalised an initial distrust prior to the interview. A conundrum we partly associate with our backgrounds; being from outside the community, from another culture with less taboos around sex and having NGO work-experience, as well as our openness to discuss SH on a positive, non-judgmental note.

The interview guides that we created for the interviews and FGD were all semi-structured based on themes within SH that were identified during preliminary observational studies and desk research. This also gave space to find and explore new topics that emerged during the discussions. The areas that we covered during the interviews varied depending on what the respondents were more engaged in, continuously trying to improve on the contents within the interviews and FGDs. In an Ubuntu research design, it is essential to co-create the research design and process with the local community to enable them to find benefits within research as well. There were variations in the interview guides according to our respondents and the purpose of the interviews.

During the interviews and FGD the respondents sometimes had questions for us, which were saved for after the interview, so as not to cloud their answers. After each of the FGDs, we found that the participants stayed for a while to keep talking about the topic and wanted to learn from us as well. The adolescents were very eager to stay and asked a lot of questions about SRHR, and so we spent a significant amount of time with them afterwards.

In the feedback, several of the participants mentioned that they were proud to have taken part in a talk about sex and SH, and had felt that this had helped them learn about themselves and their own competencies, breaking taboos on various topics. They expressed having found support, understanding through their co-experience in which they could relate to one another.

Qualitative Data Analysis

After the empirical data from our field work had been collected, we transcribed our interviews using an online program Otter AI, see appendices. Afterwards we uploaded the interview transcripts into NVivo, a computer software program which permitted a structured overview of our data. We read the interview transcripts and listened through our audio in order to correct all mistranscriptions, and at the same time we coded all the data.

We also conducted a document analysis on the NSEF to explore the macro-level political view and strategy in terms of SH.

In this chapter we will describe the operationalisation of our coding process along with theoretical underpinnings.

The operationalisation of our coding is based on Earl Babbie's (2014) four step strategy; *Conceptualisation, Defining Key Concepts, Finding Indicators and Scoring Cases*.

Prior to the coding process, Conceptualisation was conducted. Conceptualisation is interpreted as a reflection of an objective aspect of reality, based on specific empirical observations (ibid). Here, concepts were constructed within the analytical framework of the abductive line of thought. The interviews were set up to investigate various spheres that Ugandan youth navigated in; cultural-, religious-, social- and political sphere, on various levels of society (micro-, meso- and macro-level) depending on the respondée. Concepts derived from these interviews were constructed based on recurring patterns verbalised by our respondents. An example of a concept that arose on the basis of the interviews was *'power'*, it became recurring in different constellations, e.g. *'power & gender'*, *'power & money'* and *'power & knowledge'*.

Indicators are observations which are considered a reflection of a concept that is studied. The codification process was influenced by an abductive technique. Though inductive coding allows for a more explorative approach to the data with no hegemonic preconceptions to the interpretation, weaknesses however can lead to a less consistent coding process due to a lack of clear strategy prior to the coding process (Saunders, 2018). This is where the abductive aspect comes in. Abduction allows for an analytic framework with anticipations of theoretical affiliations, throughout the coding process. In relation to the above mentioned example, indicators are derived in order to reflect the given concept of *'power'* within the societal spheres.

Our setup of codes resulted in 70 *'child'* codes, grouped under 10 *'parent'* codes. See figure 1 for parent codes:

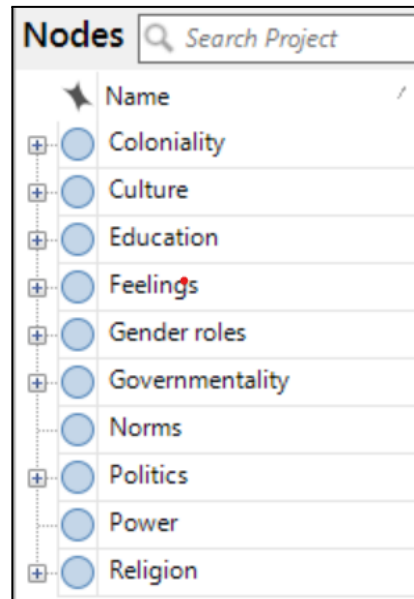


Figure 1.

The process of coding and pattern identification is conducted until saturation is met and a tentative hypothesis can take shape within the analytical parameters. For judging when saturation is met, Saunders (2018) articulates it as the point in coding where no new codes occur in the data.

The NVivo coding not only allowed for visualisation of the qualitative data, but also visualised patterns, interlinkages, probable causes and outcomes. It also enabled quantitative measurements, e.g. word frequency, which gave us a quick access to heavily emphasised concepts, tactics and arguments in certain documents.

Table 2 demonstrates a Word Frequency Query over relevant concepts within our document analysis over the NSEF to visualise prioritised thematic contents, which will later be incorporated into our analysis:

Word	Word Frequency	Specification
Behaviour	146	Not including Reference List and Table of Contents
Nation	120	
Uganda	108	
Values	97	
God	62	
Abstinence	59	
Self-Control	56	
Moral	53	
Pregnancy	53	
Purity	41	A value to be developed and a developmental message in sexuality education (as in sexual purity)
Refusal-skills	35	A life-skill to be developed
Prevention	34	
Virginity	32	
Faithful	26	
Mankind is Created and Purposed by God	21	As a value to be developed within the framework
Contraception/Contraceptive	2	
Condom	1	The framework does however state that there are alternative ways to avoid STI/D's, pregnancy and HIV/AIDS, but does not specify what these ways are
Mental Health	1	Annex 1: Sustainable Development Goals
Family Planning	1	Annex 1: Sustainable Development Goals
Consent	1	Annex 3: Eastern and Southern African Ministerial Commitment on Sexuality Education
Birth Control, Pleasure, Child Spacing	0	

Table 2.

We also made use of Timmermans' and Tavory's (2012) '*Revisiting the Phenomenon*'. When the phenomenon is revisited throughout the process, reevaluation takes place, theoretical and analytical assumptions can be reassessed, and reevaluated in order for new patterns and categories to emerge and outliers can be identified and recognized for further relevance (Timmermans & Tavory, 2012). Questions arose during the process, not only in regards to what empirical findings there were in the data, but also which empirical findings were absent, and why this was. An example of this was the concept of '*coloniality*', '*hope*' and '*pre-colonial practices*'. This prompted questions of why this was, and was contemplated throughout the research process.

Finally, Babbie (2014) addresses '*Scoring Cases*' as a final step in the operationalisation process. Here, interconnectedness and patterns result in the identification and categorisation of ideas and concepts, leading to theoretical reasoning as well as the formation of new tentative hypotheses (Saunders, 2018; Timmermans & Tavory, 2012). Here, e.g. an interconnectedness could be visualised between the NSEF's normative framing of concepts and problems and outcome on the meso- and micro-level of society.

Analysis

This analysis is structured around five main chapters, each depicting a central empirical finding, essential to answering our Research Question. We present our empirical data in relation to our theoretical concepts, to uncover underlying controlling societal normative variables and investigate why these pose a struggle for adolescent Ugandans.

We have found an intertwinedness in the control strategies and normative frameworks on all levels and spheres in society. This is expressed in an overlap in some chapters, where testimonies, control mechanisms and emotional impacts are addressed and re-addressed in order to uncover new insights and interactions.

The first chapter; '*The NSEF - Exhibiting a Normative Standard*' is a document analysis of the National Sexuality Education Framework. We start our journey here in order to explore the normative framework on a macro level, as this filters down through society and affects e.g. framing of problems, aims of interventions and perceptions of normality, legitimising certain institutions and control structures.

The second chapter; '*The Missing Man*' plays out on the offset of the first chapter, elaborating on the finding that there is an emphasis on targeting women in interventional strategies. We dive into this finding and investigate what this means for notions of gender equality, aims of interventions and strategies to obtain certain goals, as it affects how adolescents view themselves in comparison to each other.

The third chapter; '*Sexual Negotiation as a Play of Power*' demonstrates how gender inequality spills over to SH and how sex is viewed on a meso-level. We uncover aspects of power between men and women, disguised as normative standards, and how this power play is also a game of survival in the everyday lives of adolescents, navigating through sexual norms and negotiating bodily autonomy.

The fourth chapter; '*The Spoiled Children*' describes the normative control mechanism of public perception where surveillance and power over adolescent sexual behaviour is extended to the local community. We uncover other control strategies, e.g. myths, taboo and misinformation, that are utilised in order to influence them and we start to approach the essence of the very problematic outcomes these mechanisms have on adolescents.

The fifth and final chapter; '*Mental Health as an Aspect within Sexual Health*' is centred around the personal struggle that is experienced on a wide spread by adolescent Ugandans. We investigate how multiple, conflicting and ambiguous normative control mechanisms impact the adolescents on an emotional level to the extent that it affects their navigational skills in regards to SH and overall MH. Here we utilise arguments from SCT and Syndemics Theory.

The NSEF - Exhibiting a Normative Standard

We see the NSEF as a testimony of Governmentality and Biopower, as understood through Foucault (Oksala, 2013) and Tamale (2020). In its creation of its own discursive field surrounding adolescent sexuality, it produces a rationality where framing of problems and proposal of interventions refer back to own understandings of knowledge, thus legitimising itself.

Language

Dichotomies

When embarking on an analytical dissection of the NSEF the four key themes become interesting;

1. Human Development
2. Relationships
3. Sexual Behaviour
4. Sexual Health

Where theme one and four are based on health indicators and recommendations, theme two extends the governmental power into the sphere of interpersonal relationships, creating dichotomies, e.g. “*good versus bad relationships*” and “*Types of Love (versus Lust)*” (MoES, 2018, 7), thus creating what Said (1978) earlier referred to as examples of ‘*simplistic dichotomies*’ in its attempt to claim superiority in relation to the ‘*other*’. In this way the NSEF attempts to set a normative standard for desired outcome and manage the range of human behaviour among the population they govern. When viewing this in relation to Biopolitics, Foucault explains this as a strategy of subjugating bodies by normalising certain behaviour in a rationalising way, this is a mechanism of power that seeks to modify and optimise behaviour with an agenda of its own.

National Rhetoric

The NSEF is formulated around nationalist rhetoric in defending Ugandan values, presenting the framework as “*home-grown*” (MoES, 2018, ii) and referring to ‘*Uganda*’ 108 times during its 68 pages. Even the policy’s definition of ‘*sexuality education*’ is conceptually specific to the Ugandan context:

“A lifelong process of acquiring information and forming attitudes, beliefs, and values about vital issues such as sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image, and gender roles. It addresses the sociocultural, biological,

psychological, and spiritual dimensions of sexuality by providing information; exploring feelings, values, and attitudes; and developing communication skills, decision-making, and critical-thinking skills in accordance with the laws and policies of Uganda”

(ibid, x)

The policy explicitly underlines “*national unity*” and “*national consciousness and patriotism*” under the ‘*Ugandan National Ethical Values*’, that the policy promises to teach and uphold (ibid, 6). Alongside these ethical values, religious and cultural values are also summarised, making use of nationalist rhetoric, which can be seen through Foucault as an attempt to refer back to one's own perception of knowledge in further substantiating legitimacy.

The creation of Ugandan identity, the solidarity it entails, is closely linked to the morals and values it associates itself with, this is demonstrated by referencing normative attributes to; “*own individual and collective identity*” (ibid, xi). Through the lens of Foucault this can again be seen as a creation of a normative framework dictating attributes to a group of accepted individuals whose behaviours are approved, and the ‘*others*’, whose actions are not condoned, once again setting up dichotomies.

However, when the policy defines values as being at the centre of “*Ugandan communities’ survival*” (ibid, 6) it implies a need for saving and it inserts itself as the solution; “*the state shall promote and preserve those cultural values and practices which enhance the dignity and well-being of Ugandans*” (ibid). This strategy is well situated within Nyanzi’s (2011) understanding of how African sexual culture is controlled and norms governed. She sees the framing of negative connotations as a tool in order to legitimise regulation.

Religious Rhetoric

The NSEF sidelines religion with the state; “*The National Ethical Values Policy (2013) also identified the ethical values that are in line with religious values*” (MoES, 2018, 6). Therefore the policy framework works as a united front for both state and religious institutions, in stating that the framework will; “*promote the teaching and upholding of religious, cultural and national values that will enable learners make healthy choices in life*” (ibid).

The NSEF clearly ties religious values in relation to sexuality to attributes regarding purity, morality, virginity, faithfulness, responsibility and self control - words that are heavily cited within the document (see Table 2). These values reinforce the state's otherwise criticised strategy of 'AB' and continues to undermine the 'C', as we demonstrated in our State of the Art section.

By allying governmental and religious institutions, the amount of normative power gained is increased and the outreach potential from a macro-level to the meso-level is enhanced immensely. This can be interpreted as an aspect within Biopolitics where the extension of power of normative control and surveillance to the meso-level takes the form of Pastoral Power. Here the rationality of power and control infiltrates individuals at a closer proximity by inserting localised middlemen. These middlemen are persons of authority; religious figures in the community, local leaders and family members of a specific authoritarian character. Furthermore, Tamale also highlights how the influence of religion on policies can also be seen as a coloniality of power, as colonial religious values continue to impact governmental strategies.

Framing of 'Danger'

In the NSEF "*Deviant Sexual Behaviours*" is framed as a danger to SH (ibid, 23). It is highlighted as a specific area of concern within the third key theme, "*Sexual Behaviour*" (ibid, 7).

The NSEF does not elaborate on the definition behind this terminology, merely that the framework outcome designs "*interventions to counter the Arts/Media and peers influencing sexually deviant behaviour among young people*" (ibid, 9), hence insinuating a distrust to perceived negative influence of media, arts and peers. This resembles Foucault's framing them as an enemy within, and alienating them in the process. The NSEF further emphasises that '*Deviant Sexual Behaviour*' is to be communicated as a predisposition to harmful or destructive behaviours, and is in itself predisposed by sexualisation early in life, whereas the framework strives to intervene, under the justification of: "*build young people's ability to manage the influence of the media in a healthy manner*" (ibid, 8).

The framing of a certain focal point and its risk factors, as a point in need of intervention is, as previously stated, known within the work of Nyanzi (2011). This is seen as an attempt to

instil fear within the population, create othering and legitimise and uphold the state's authority to regulate sex and sexuality, as exemplified here; "*The importance of early and timely interventions as soon as sexually deviant behaviour and attitudes are noticed*" (ibid, 31). Governmentality is expressed through the modern state's authority to exercise power and control through the '*conducts of conducts*' of its national population, even when the threat is only vaguely defined and not completely comprehensive.

Strategy

Foreign Infiltration as a Danger

Noting the government's strategy of pointing fingers at '*dangers*', the NSEF expresses a specific discontent directed at CSOs and NGOs:

"CSOs have been delivering sexuality education without proper guidance from government. Hence, the CSOs/NGOs will be required to align their curricular, cocurricular and extracurricular programmes and activities, materials etc. with this framework for approval by MoES before usage [...] Appropriate sanctions will be imposed on any Non-State Actors that engage in delivery of Sexuality Education outside this Framework" (ibid, 41).

This expression of disapproval is used as a vindication for the state's increased surveillance and discredits opposing views from CSOs and NGOs. This can be seen through Foucault as an attempt to enhance state legitimacy and oppress '*other*' (and more uncontrollable) sources. This statement is further substantiated by understanding the events leading up to the ban on sexuality education in 2016, as CSOs/NGOs were accused, due to their foreign affiliations, as pushing the '*Western agenda*', which at first glance challenges the power, control and legitimacy of the nation state.

Principles, Values and Life Skills

Throughout the document MoES refers to sexuality education as being based on principles, values and life-skills, meaning that SH is an outcome of these attributes. Two of the five intended policy outcomes advocate for abstinence through "*commit to premarital sexual abstinence and marital faithfulness*" and "*practice skills that will enable one to avoid any*

form of premarital sexual activity” (ibid, 7). In other words, the framework exercises what Pastoral Power calls a ‘*conduct of conduct*’, instructing a desired normative behaviour, which in this circumstance entails a practise of ‘*AB*’ and still leave out ‘*C*’.

In terms of principles, the policy places “*God-fearing*” as guiding for a “*nation with morals and virtues of an African setting*” (ibid, 5), explicitly interlocking its association with religious institutions. With notions of ‘*abstinence*’, ‘*African virtues*’ and ‘*God-fearing*’, it also cements its fundamental principles in opposition to the ‘*Western agenda*’.

The term values signifies the centrality of teachings of the Bible and Quran, with attributes of honesty, integrity, reverence for the sanctity of life, accountability, love and care for others, solidarity, morality, forgiveness, justice and reconciliation. These values signify attributes with such heavy euphemistic qualities, that their comparability to buzzwords is rather conspicuous (Cornwall, 2007). To see this through Foucauldian lenses, the use of buzzwords help portray the document’s intention in a positive light in order to gather momentum and create a rationale that is easy to communicate and understand.

Life skills are defined as abilities and proficiencies, and illustrate variables that are measurable and evaluative for the government. The life skills are also individually based, instructing behaviour and placing the responsibility on the individual for their own SH; self-awareness, self-control, self defence, help-seeking, conflict resolution, assertiveness etc. There is an emphasis on asserting guidelines on certain behavioural patterns which can be interpreted into SH actually not being the main focus of the policy’s interventional strategy, but rather an outcome. This indicates an emphasis on controlling aspects of behaviour beyond the realm of sexuality, substantiating Foucault's claim that power over children’s sexuality is both an instrument and a target. Seen through SCT, this shows how the policy’s strategy is directed toward the individual's self-regulation, to influence children's judgement of their standards of behaviour and ensure actions aligned with government values. This claim is further substantiated within our Word Count, where ‘*Behaviour*’ scored highest with 146 hits, highlighting the emphasis on this aspect within the policy.

Focus on Individuality contra Collectivity

But why is there this emphasis on individual responsibility in the NSEF's normative framework and intervention strategy? What we will re-address and further substantiate in a later chapter is that by extending normative power of governmentality to the meso- and micro-level in society, the state can first of all liberate itself of public scrutiny for execution of direct power on its national population, and instead places the responsibility on the individual, despite being an interest of the state. Meso- and micro-level points of surveillance encapsulates institutions of family, religion and local communities. This sets up conditions for Pastoral Power, with the intent of ruling individuals in a continuous and permanent way. The surveillance mechanism is passed on to local communities to reproduce actions of power and control.

SCT can furthermore help us to highlight how this strategy then coerces people to judge themselves by the evaluative standards reflected in the social sanctions of others (Bandura, 1991). What is interesting about this strategy is that when a normative behavioural standard is dictated, a checklist for how to evaluate yourself and others is instilled. This is also in direct relation to Nyanzi's (2011) writings on how norms are collectively governed through social standards, and the public perception of one's self becomes crucial in order to live up to moral expectations of good conduct.

This becomes problematic for adolescents because they are then dealing with surveillance and control mechanisms at every level and sphere within society with fear of external judgement. We will demonstrate how this plays out in closer proximity to Ugandan adolescents in a later chapter.

What is also interesting is the framing of SH as an individual phenomenon, not a collective one, neglecting the social aspect in sexuality, which is paradoxically anti-Ubuntu. Social life skills are untraceable in the policy e.g. consent, awareness of gender power dynamics, family planning, child spacing, how to be respectful of each other's sexual boundaries, how to keep others safe, sexual and inter relational communication, how to respect each other's autonomy etc. These are all skills that bind humans together in the interaction that surrounds sexuality. Instead the individual is isolated in their inward focus on sexuality and own behaviour. To view this in a historical light and understand how this shift in perception of sexuality came about, Tamale sees this as a result of Christianity's moral dictation during Colonisation. In

pre-colonial understandings sexuality was connected to spirituality and formed an interaction on a communal, social and religious level.

It may be argued that the state's strategy of individualisation can be regarded as an intent to order more efficiently exercised governmentality when individuals are isolated. This can be seen as a tactic within Pastoral Power as it is directed at individuals in order to rule them in a continuous and permanent way through 'care', requiring obedience from its subjects through detailed knowledge of them.

Framing of Youth as a Problem and a Solution

The Minister of Education & Sports remarks in the foreword;

“Children are not born with integrity or the behaviours associated with it, such as honesty, honour, self-respect, respect for others, social responsibility and the courage to stand up for what they believe is right. It is formed in them from a process of cultural socialization”

(ibid, ii)

Here, children become a point of control through disempowerment, resembling Foucault's work on Children's Sexuality. This view on children can be interpreted as spilling over to adolescent Ugandans; *“moral decadence is rampant among the population and is slowly spilling to the young people”* (ibid, 2). The key solution to this is through the proposed life skills 'self-control' which appears 56 times throughout the policy, along with virtues of virginity, purity and morality (see Table 2), again an emphasis of responsibility placed on the individual. The policy ultimately proposes to rectify moral decadence by cultivating a love of God and country and a fear of sex. In this way, the NSEF posits adolescent Ugandans as both a problem and solution, as Foucault portrays in the Theory of Degeneracy. The NSEF goes on to utilise them as pawns against the economic threat of unsustainable population growth, justifying state authority as an act of governmentality and a justification to intervene in young people's sexuality.

Gender & Equality as Culturally Determined

As an extension of the previous section, the policy emphasises virtues of virginity, purity and morality. With this in mind, when examining the intended policy outcome of: *“Appreciate*

how sexual behaviour is influenced by perceptions of gender and power”, it entails a natural approach to sexes being controlled by differing societal and cultural perceptions and expectations, reflecting religiously rooted beliefs in binary gender norms.

The policy puts forward the learning objective to: “*defend acceptable cultural gender roles and beliefs*” and “*appreciate that gender beliefs influence one’s choice of relationships*” (ibid, 28). This exemplifies how gender norms are defined and confined within cultural, historical and religious parameters, confining gender equality and equity definitions within the very same limits. This understanding of gender norms, is dictated on a macro-level and filters down through society to the meso- and micro-level. This view has implications for the further operationalisation of equality and equity on an NGO level, as it encompasses a different end goal in its entirety, although RAHU uses equality as a word within the global aid dictionary.

To understand this from Tamales (2020) decolonial lens; cultural gender binary norms are part of the colonial construct that suppresses pre-colonial cultural and religious gender practices, imposing a hierarchical power structure subjugating women to men.

However, the definition of gender equality is also problematic, as it has been created in the Western World in opposition to the Western Patriarchy, not the Ugandan, and therefore it cannot be truly emancipatory to the Ugandan woman, as it lacks cultural sensitivity. Instead, more participatory and African notions of values such as Ubuntu and equity resonate deeper with traditional understandings.

Concluding on the NSEF as a Normative Power

The NSEF is the sole guiding principle in the sphere of sexual politics, which is used as a compass for religious institutions, schools, communities and the family. As we have demonstrated, through its rhetoric and outing of ‘*dangers*’, it creates a normative framework in creating life skills in order to belong to what is defined as ‘*Ugandan*’ in opposition to the ‘*others*’. These life skills are behavioural modification interventions, where categories of acceptable behaviour, based on values, are dictated. By doing this through a normative approach it extends its power of governmentality to a meso- and micro-level, installing surveillance and control mechanisms in closer proximity to its subjects, judging adolescents according to standards of moral conduct. This process entails an isolation of the individual,

both in the way control is executed in the judgement of individual behaviour, but also in the framing of sex and sexuality as a non-social act, which can be seen as highly anti-Ubuntu. What is also interesting is that norms governing conduct seem to differ for men and women, as an expression of gender binary norms of colonial construct.

The Missing Man

This chapter has its jumping off point in the NSEFs differing culturally defined gender norms and its denial of SH as an inter relational act. We dive into the differing normative frameworks for Ugandan men and women, uncovering women as a particular point of intervention in terms of behavioural modification. We investigate what this means for the understanding of gender equality and its repercussions for intervention goals as an NGO, and try to understand why this is problematic for adolescents in their pursuit of SH.

Women as a Focus Point for Intervention and Control

Instead of focussing on collective aspects of SH and interaction, the NSEF focuses on individual life skills to limit self endangerment by avoiding/abstaining from drugs, alcohol and bad company and complying with ethical morals in line with religion, through e.g. virtue, purity, refusal-skills, self-control and self-defence.

By focussing on the individual, behaviour is then dictated by self-regulation, a process that can be viewed through SCT. The heavy emphasis on morals, is enforced to push individuals to internalise these morals with their own personal standards, with the purpose of foregrounding self-judgement and self-control. However, when adolescents don't have actual self-control because agency is dictated by external influences and judgements, they dissociate from these standards as they become less attainable. Furthermore, this individualised focus is anti-Ubuntu, as it removes the collective responsibility in obtaining SH, leaving the individual isolated.

Denying the social aspect, places the responsibility on the receiving end, both in regards to acting and reacting to external variables. The receiving party can be interpreted as women, as most of the above mentioned attributes are stereotypically associated with femininity. When associating responsibilities of life skills and morals to the receiving party, the blame is also

placed here. This refers back to our previous burden of sexuality being deemed an individual act and not a social one. When attempting to understand this one sided strategy within SH, we discussed government priority of SRHR with organisational staff members:

“Uganda doesn’t even put a penny in [...] a lot of essential commodities for SRHR are 99% donor funded [...] Because the burden of SRHR is on a woman. What are men interested in? War? Buildings? [...] It’s regarded as a feminine issue. But mostly because there is ignorance” (Staff 3a (F), 2022, 11:55, 13:50 & 14:19)

As women carry most of the burden of the consequences from lack of SRHR, it seems clear that they also carry the majority of the responsibility in order not to be burdened by them.

Understanding Gender, Power & Equality

Drawing on the NSEF we now understand that gender equality is conditioned by culturally defined gender norms and that there is a lack of political priority on the subject. However, gender equality is instead prioritised by donors through recipient NGOs programming. When investigating how gender equality then is operationalised, we interviewed the staff members, as they are actors within both the ground- and political arena; negotiating, advocating, defining, implementing and evaluating on SH. What we found was that the operationalisation was based on very technical aspects of equality:

“for equality, they believe if a man does this, a woman must do this [...] if a man says this, then a woman should be in position to say that (Staff 1 (M), 2022, 35:25).

The notion of gender equality is put on quantifiable measures in everyday life such as gender roles, duties, capabilities and knowledge. But it does not dive into the deeper level of gender valuation, acknowledge the power dynamics in society that perpetuate gender inequality nor question where the patriarchal hierarchy originates from. As previously presented, the rigid binary gender norms didn’t originate from Africa, but were exported from the West during Colonisation via religion. So when the promotion of gender equality by NGOs is executed, it is still embedded in religion through coloniality of power, hence reproducing stereotypical patriarchal views on gender. This exemplifies why Tamale (2020), proposes a focus on equity

and Ubuntu instead, as they're not entangled in patriarchal colonial structures. This is however not the case in the current circumstance.

Exemplifying the above, we can draw on when RAHU incorporates equality into their sexual education, we found that there was an overwhelming simplistic emphasis on the '*liberating role*' of information, applying it to everyday technical dilemmas, without applying it to the bigger picture of gender and power;

“If you told them maybe having early sex is bad. You have told the woman, but you not yet empowered the boy that having early sex is bad, and this woman not have sex alone. This boy will come, if she tells him alone, having sex is bad. He will force you, will forcefully have it done. Why? Because for him he thinks it is supposed to be done. He hasn't been given the information” (Staff 1 (M), 2022, 42:04).

This simplistic understanding of the liberating role of information alone, is also evident in the way, women are expected to conduct themselves on the basis on this information:

“... long ago, women didn't have a say [...] if a man comes to you, and he's like, I want to sleep with you. You just submit and he sleeps. But today, if you go to a lady, or a girl who has this information, and she knows having sex with different partners is not good. It leads to diseases. STIs, like pregnancy, to negativeness. And this girl is not ready for all this. [...] She's not going to accept it today, and goes no - is a no. Because they have this thing of; I can say no, you can't force me to do what I do” (PE 5 (F), 2022, 18:12)

Throughout many of the interviews, there was a common understanding that the simple distribution of information could insert a sort of mechanical equality, e.g. that information alone can alleviate rape and decrease GBV, and that distributing everyday tasks and rights; e.g. the right to speak and earn money, would be comparable to gender equality.

What we as researchers found problematic, was the unawareness of the power dynamics that infiltrate gender norms and gender perspectives in society. This stemmed first and foremost from Christianity's moral dictation and since reproduced in the NSEF, setting rigid guidelines for NGO promotion of gender equality.

Viewed through Foucault, this means that normative conditioned discrimination, which is embedded in its Biopolitical strategy, goes undetected and the operationalisation of gender equality is then oblivious to underlying androcentric biases, a view that is also well situated within Tickner's feminist theory, as these biases infiltrate societal norms and are then reproduced, even when NGOs attempt to rectify gender inequality.

The advocacy strategy, for both NSEF and NGOs, seemed mainly focused on empowering women, but at the same time did not question the notion of superiority of men that is historically and culturally embedded in a sense of self-perception, hence re-instilling notions of inequality. It testifies to oblivion of the role of men in regards to the reproduction of the very power dynamics that sustain gender inequality, as well as inequality within SRHR. Furthermore, Tickner elaborates on the importance of emancipatory teachings when working on feminist agendas such as gender equality. So, a one-sided strategy targeting women alone on risk avoidance and power exploitation would neither be called an Ubuntu strategy nor a feminist one, as only half of the problem would be tackled.

Sexual Negotiation as a Play of Power

This chapter demonstrates how gender equality spills over to SH, and how sex is viewed on a meso- and micro-level. We uncover aspects of power, and how this power play is a game of survival in the everyday lives of adolescents, who attempt to navigate through sexual norms, negotiating bodily autonomy as a reaction to causal agency.

Money as a Source of Stability

During our field work we found that gender expectations are seemingly rigid and hierarchical, embedded in colonial roots. Women are overall linked with domestic labour and of inferior status to their husband. Varying tasks were identified depending on location and tribe, but men were generally responsible for providing financial stability assigning him with the responsibility of managing family finances;

“sometimes women can work but even if you have a lot of money that money will not belong to the woman, will be taken to the husband because he is the head of the family” (FGD 2 (F), 2022, 1:06:29).

Due to the overall scarcity of employment and labour instability, it was observed that money dominated human interaction, making it a game of financial survival. Throughout the interviews it became evident that decisions were not based on long term strategies, but short term needs. This spilled over to disfavoured adolescent women in terms of SH and overall equality, because families lacked financial capacity to support daughters, either in providing e.g., sanitary products, or prioritising the education of them. This was especially evident in rural areas where some families utilised their daughters as commodities in marriage agreements in exchange for a bride price, on the offset of e.g. incest, defilement, rape etc. When asked whether this practice (along with sexual violence) was common, an adolescent answered:

“very common. Yes, here in Kasese it’s common especially defilement and incest is a very common thing. Because if you see my culture, if you get married to your uncles son, is not a problem. They will say that they will kill a big goat to oversee” (FGD 2 (F), 2022, 50:50).

Sex as a Commodity

We saw multiple accounts on how financial needs impacted the dynamic between the sexes setting certain gendered expectations. Many of our respondents reported on how they were necessitated to go outside the home in search of financial fulfilment of basic SH needs, negotiating and compromising on equality in favour of immediate requirements.

An example of this was when dating and courting; adolescent men were expected to supply adolescent women with financial assistance for e.g. sanitary pads and school books, as they more often had a job at an earlier age, thus becoming financially independent. When asked about gender expectations in relationships, our adolescent respondents answered that men should show their appreciation through gifts or provision of basic needs. Though results didn’t vary exceptionally between Kampala and Kasese, it was clear that there was an increased vulnerability with adolescent women in Kasese, which can be interpreted as a result of their families being poorer, which led to the women being less educated.

This financial support however was rarely an act of charity. We received multiple accounts from our FGDs about adolescent women paying back their ‘loans’ with sexual intercourse. In this sense, sex often becomes a trade commodity, even for adolescent women who were often too young to understand the hidden agenda behind the deal. One young female responded having no understanding of sex before becoming a teenage mother at the age of 14. She was not able to understand the circumstances either, which the following quote demonstrates:

“I think it was accident. Yeah. I was not the one who decided to have a baby. Yeah. But someone touched me [...] Then he did what he did [...] they brought for him a police and they caught him at the police station [...] Yes. They paid my parents. Yeah. Sorry. It's not normal. But I think my parents were annoyed. Yes. That's why they did that. And I was still young”
(FGD 4a (F), 2022, 07:37, 08:19, 09:07)

When attempting to view sexual negotiation and submission in a theoretical light, we turn to SCT. We see that sexual ignorance, stereotypical gender norms and financial power create a voltage field of powerful conflicting external influences determining causal agency within the youth.

According to SCT, gender norms can be seen as impacting the social context and cognitive structures where the youth navigate. According to Bandura (1991) this affects self-perception of the youth, as they are a part of these structures. Female inferiority and financial dependency is therefore considered as standard. These inequalities are embedded in the society as a result of patriarchal capitalist structures (Tamale, 2020). They facilitate better financial positionality for men, thus gaining power over the women by creating dependency and subjugation.

When addressing their judgemental functions, this means that they socially compare themselves to fellow adolescents, who are in the same powerlessness, reinforcing the sense of inferiority. When valuing bodily autonomy by engaging in sexual activities, this is deemed less relevant in order to gain financial stability, as it is a game of survival, hence their causal agency. This is despite the potential cost to self-esteem when negotiating bodily autonomy, although sexual ignorance makes them unaware of these consequences in the long run. However, the affective self-reaction to this creates dissociation between the cultural norms and changing personal standards, when left with the following consequences of teenage motherhood, due to feeling neglected by the community.

The Unrecognised Power between Women & Men

The young men in the FGDs seemed unaware of the power imbalance in these exchanges. On the contrary, they often expressed a feeling of being taken advantage of, that female adolescents only sought their company in pursuit of economic benefit. For them it seemed as a rightful claim in exchange for the inconvenience of having to support her financially. Sex here becomes an interaction of negotiation, fulfilment of duty, and not necessarily an act of intimacy. The unrecognition of power dynamics shows how power distribution is perceived as a natural phenomenon between men and women, demonstrating how androcentric biases can go undetected, as Tickner states.

Our field work also uncovered how this unrecognition spills over to GBV. Several adolescent respondées testified to being observers of GBV in their homes and local communities. One of the young men added how this has inflicted on his own conduct in relationships, that he had been violent towards his partner (FGD 1a (M), 2022). Many referred to it as being a common practice, culturally dictated:

“sometimes the men they normally say that what if what if I kick my wife - I was advising her. So their culture will dictate that was not violence” (FGD 2 (M): 2022, 1:01:19)

The culturally legitimised notion of male superiority permeates all levels from macro- to micro-level. As demonstrated here: *“Men, they consider themselves as empowered. They feel a lot of power upon you”* (FGD 3 (M), 2022, 41:05). This masquerades the devastating impact of GBV as it is perceived as being legitimate, neglecting the potential devastating impacts on women's health. To draw parallels to Bandura's SCT, we argue that the legitimisation of power and GBV impacts social structures of acceptable behaviour and the development of personal standards, shaping self-perception as a person and as a woman.

Furthermore, due to the normalisation of GBV in family relations, it was linked to expression of caring:

“some women think if a man beats me, it means he loves me. If it doesn't [...] it means, yes, someone else he's seeing [...] he has another lady. Now, that comes from how we have been grown up.” (PE 4 (F), 2022, 1:05:26)

Again, SCT sheds light on how cognitive structures in the social context can shape internal cognitive processes inflicting on (and possibly distorting) self-perception of both women and men.

Consent & Coercion

To showcase how power dynamics go undetected due to a lack of insight into androcentric biases that permeate through gender perceptions, we highlight how the understanding of consent varied immensely and how it was communicated, when talking to adolescents. There was a very superficial understanding of consent from the PEs, entailing the women's right to say no, which would then automatically be respected:

“Because they have this thing of; I can say no, you can't force me”
(PE 5 (F), 2022, 18:12)

In the FDGs, many of the adolescents had never been introduced to the term '*consent*'. This does not mean that they were unaware of what the concept of '*giving permission*' entailed (seeing as '*consent*' is a concept derived from Western terminology). However, it showed a gap in the discussion surrounding consent and forced/coercive '*yes*', and demonstrated the partial blindness towards power positions within these interactions.

Though there was an understanding of what '*no*' means, there was likewise a lack of understanding towards power dynamics urging a forced '*yes*' in matters of survival, where cultural expectations, the exchange of commodities and feeling of obligation can make a '*no*' hard to verbalise.

As previously demonstrated, SCT shows how causal agency is based on cognitive structures in the social context. So when gendered power dynamics are embedded in these social structures, this impacts one's self-perception and ability to react, for women this can lead to non-reaction. For men this means that if they are inclined to believe that women can '*just say*

no' and are not confronted with nuances of reality where power dynamics infiltrate women's self-perception and sense of agency, it perpetuates a stereotypical understanding of consent and continues to draw responsibility from men, allowing SGBV to go undetected.

We heard examples of men who took advantage of this forced 'yes' when coercing young women into having sex, where men were very much aware of the scheme:

“Going to visit someone who is sick, you will see someone who is very okay. And he will caution you that, you know, I was sick because of you. I will think about you so I felt like [...] I should see you. So you played sex without knowing that there was going to play sex and no protection measures” (FGD 2 (F), 2022, 50:50).

In these circumstances women were regarded as having “*a little brain*” for falling for such tricks (FGD 2 (M), 2022, 56:42), hence placing the blame on women once again.

Everyday Sexual Violence

In our FGDs, we were also confronted with testimonies of a more deliberate and violent nature:

“So we made that party at school [...] They gave me a lot of alcohol. I thought it is Lucozade but they had added some other drugs that made me sleep for the whole night. That's what I knew about” (FGD 1a (F), 2022, 18:35)

This anecdote is about the drug rape and pregation of a female adolescent by her boyfriend. After she was exiled from home by her father, it was agreed that she would stay with her boyfriend's family, where she is now raising their son. This showcase of lived experience was unfortunately not unique, but demonstrates a continuous violation of women's SR and links financial instability as a direct pretext for it to flourish.

Incest was also a very present dilemma in the lives of the adolescents in Kasese:

“I have seen because there is a man who saw his daughter has big buttocks. But then his wife, so he seen his daughter a bit. So he called her (to) the room [...] So he confused that girl, his daughter. So he played sex” (FGD 2 (M), 2022, 41:49)

The following story exhibits how the establishment of trust is a direct strategy targeting women:

“You see the man is like 30. The girl is 15 and innocent girl. After taking her to school, I'll be dropping you from school, home from school [...] but the next time just he will say, the boda boda [taxi motorcycle driver] said that I'm going to pick something at my house come and go because that girl is used to the man. He say come and go together after reaching the house. The man will lock the room without informing the mother, they go. This innocent girl will say this is the boda boda man from our village, he will not say, because the people saw her taking the back to school, taking to home. Now the girl will get confused [...] the boda boda, this old man who said if you tell anybody I'll kill you. I will go and the unsafe medication from the witch doctors will kill you, and listen, very innocent the girl just keep quiet that in case of dying at this early age, they may keep quiet” (FGD 2 (F), 2022, 45:01).

These testimonies bear witness to the ongoing struggle for Ugandan youth. Where adolescents with a lack of power are sexually violated. To view this according to SCT, adolescent agency is here based on survival. What SCT calls judgemental function is explicit in social reference comparisons, where they mirror themselves in the countless accounts of incest and SGBV, developing personal standards which match their submissive positions in the continuous power struggle in and outside the realm of SRHR. It is clear that the adolescents find these settings problematic, which they verbalise on several accounts during the FGDs. But what can also become problematic in the long term is the lingering internalisation that awaits them when continuous displays of destructive sexual violations can gaslight and deceptively convince them to accept them as being normal, internalising these structures and standards, as these inflict on what SCT calls their self-evaluation and sense of self-efficacy, perpetuating a continuous inaction as a result of powerlessness.

The Spoiled Children

This section intersects the deeper layers surrounding SH. We found in our empirical data a recurring expression; the fear of being ‘spoiled’. ‘Spoil’ is seen in opposition to e.g. ‘virginity’, as a contamination and ruin of innocence, and can be interpreted as stigmatising. When investigating this concept, we found that the fear of ‘spoiling’ adolescent minds was steering in designing an array of strategies in order to suppress adolescent sexual curiosity and hunger of knowledge, e.g. framing SH, inserting myths, misinformation and taboo. This chapter investigates these strategies in the local context.

Framing Sexual Health

Already on a macro-level, the NSEF links dangers of disease and death with SH. This is well situated within Nyanzi (2011)’s writings, where she highlights the utilisation of risk factors to instil fear within the population, legitimise power and control and justify macro-level intervention. But this also rubs off on advocacy for SRHR in UG, as that too becomes reactionary towards potential health threats:

“Don't beat your wife, why can't you say "love your wife", "respect your wife" [...] Where are you saying harm reduction? Why can't we use a positive word and still mean harm reduction. Why can't it be harmonious like love enhancing? [...] Do not beat! Perpetrator! With words that we have, we are struggling with messaging, framing for sexual reproductive health. And I dare say it's a big hindrance in acceptance that has hindered the acceptance of SRHR”

(Staff 3b (F), 2022, 08:43 & 10:37)

What also posed a problem in the communication of SRHR was the simple translation and the foreignness of the meanings within SRHR:

“I'm trying to explain to the young people what sexuality education is, the struggle is real. And if you can struggle with it even at language level, then why wouldn't someone question me and say, she can't put it in your language [...] Terms like vasectomy. We don't have a word for it. The only words we have are very offensive [...] A word that we have for vasectomy means castration. How are you going to sell something that you can't even say? How are they supposed to buy it and own it if they can't articulate it in their language?”

(Staff 3b (F), 2022, 08:43)

Framing is a big part of communicating to the public, and the problem arises when states continuously portray SH as being linked with danger, then CSOs/NGOs ultimately use the majority of their strength addressing these, instead of addressing more positive aspects of the topic, e.g. love, respect and pleasure, as Nyanzi also asserts. It ultimately inserts fear into the Ugandan youth and prohibits other sides of the topic to come forward, impacting their ability to make rational well-informed decisions within SH.

The Power of ‘*Spoil*’ and Taboo

The reactive framing of SRHR strategies with focus on dangerous outcomes, creates negative associations to sexual activity, which promotes the view that it should be avoided. This also creates grounds for taboos to flourish, due to fear of ‘*spoil*’. When asked where the youth went when they sought information on SH, the youth responded that they were not able to ask questions to their relatives nor to their local religious leaders;

“First of all, religion attaches the worst meaning to sex. Sex is bad. And it is against God's will [...] So you find you can't prepare yourself to have sex because it's a sin. So you're going to do it and you're not prepared [...] you're not prepared for the outcomes. So you find it is causing the problems because of those restrictions” (PE 2 (M), 2022, 1:06:37)

With the negative associations and taboos, the connotation of sex and sexual education is deemed ‘*spoiling*’ the minds of the youth. Investigating the local perception of the term ‘*spoil*’, its dichotomy can be seen in opposition to e.g. ‘*virginity*’, a term used 32 times in the NSEF. ‘*Spoil*’ can be seen as the contamination and ruin of innocence (also in the religious sense), and can be interpreted as a very final stigmatisation.

This is well in line with Foucault’s writings on Children’s Sexuality, where children are in danger of becoming immoral citizens, justifying actions of power and surveillance. In these circumstances, actions of surveillance fall into the category of Pastoral Power, where surveillance of the individual is conducted in order to ensure continuous and permanent ruling over subjects.

'Spoil' can be viewed in relation to the NSEF's appliance of 'Life Skills', and the way they set up regulating mechanisms in close proximity to young Ugandans. These collective governing of norms, combined with a fear of public perception, can explain the privacy surrounding SH and the taboo of it.

SCT elaborates on how this collective governing of norms can result in external- and self regulation, as behaviours are monitored and altered according to reactions from the social environment. Especially people who are deemed of high importance, e.g. religious leaders, teachers, parents and elders in the community can become judges of one's sexual conduct, influencing one's perception and self-image. So when these figures articulate fears of 'spoil', it impacts youth to internalise these fears.

However, the adolescent respondées also replied that the taboos surrounding SH had an adverse impact on them. As they didn't have a concrete notion of what 'spoil' actually entailed and how to navigate and avoid e.g. pregnancy, which resulted in even more public scrutiny.

"But then when you get pregnant, they keep quiet [...] they did not tell us. After they blame us that we have got pregnant. But to me, I feel, if I was told before, I would not be having a baby. I would be in school by now" (FGD 1a (F), 2022, 37:50)

"when you become pregnant, they expel you from school [...] They like you're teaching others bad ways to behave [...] they segregate you from the rest as if you're, you're a criminal, you've done something very bad" (PE 4 (F), 2002, 14:16)

This shows that despite the youth internalising the fear of 'spoil', navigating in society without necessary capabilities, creates negative outcomes risking dissociation and distortion of these values of so-called 'virtue'. According to Bandura (1991), these reactions often impact self-esteem negatively, as external influences coerce adolescents into actions that go against their internalised norms due to ignorance of sex and 'spoil', lowering self-efficacy, as they experience incompetence in exercising control over their own level of functioning.

Suppress Suppress Suppress

With abstinence being the sole life skill taught about sex, the strategy to achieve this is suppression of feelings and needs. This is evident in the extension of governance that the NSEF exerts into “*Dating and Courtship*” (MoES , 2018, 29) and outlines acceptable “*types of love (versus) lust*” (ibid, 7). It emphasises the notion of ‘*Self-Control*’ by repeating it 56 times, implying a suppression of SH needs, impulses and curiosities. It thus delegitimises these natural tendencies.

When battling aspects of negative framing, fear, taboo, and the use of myths, it poses questions of why the denial and suppression of adolescent sexuality? This is well situated within the Foucauldian understanding of Power of Children’s Sexuality, where children are posed both as being in danger, but also being dangerous to the ‘*innocence*’ of other children. There seems to be a constant apprehension of premature exposure with the risk of ‘*spoiling*’ them. Nyanzi (2011) also addresses this topic about de-sexualizing certain population groups who are not befitting of sexuality. Here children and adolescents are found as one of these groups together with the elderly, people with handicaps etc. These contrasts are used to delegitimise sexual conduct within certain population groups.

The NSEF exemplifies this by underlining the need for civil socialisation of children through age-appropriate information out of discomposure of them being treated as “*small adults*” (ibid, 5), which can be seen as a tool of disempowerment.

“There are some parents who are fearful to their children. That may be if I talk to her she will get exposed to, and some children, they felt that you will be exposed. Yes, they’ll get exposed”
(FGD 7 (F), 2022, 1:31:22).

The constant fear of ‘*exposing*’ children to information is justified, through the constant risk assessment. There was a continuous underlying apprehension in relation to triggering a chain of events leading to sex, which is perceived as a predisposition for death. This is exemplified through the following:

“...youth fear getting pregnant in the school setting [...] you’ll be chased out of school. And imagine you’re just out of school, look at your background. The parents aren’t going to let you enter their home when you’re pregnant. So you’re going to go on the streets, you will

suffer. The fact that you're still a young girl. Your bones are not fine for producing. So in the process, you die” (PE 5 (F), 2022, 40:57)

There is a constant risk assessment, where sex (or sexual education) ‘spoils’ the minds of disempowered adolescents, leading to pregnancy, STDs, HIV or death. There is no consideration for intermediate variables that influence the process. Therefore sex is feared and tabooed. This was also the case with masturbation and pain medication for menstrual aches.

Because children are perceived as asexual until their exposure to sexuality, according to Foucault, it moves them from one side of the equation, of being in danger, to the other, becoming dangerous to others. This socially warrants adolescents to suppress developing urges and needs. The promotion of emotional suppression by monitoring bodies in the community (e.g. previously mentioned religious leaders, teachers, parents and elders in the community) is an aspect within Pastoral Power where emphasis is on self-regulation due to the fear of ‘spoil’, being judged and excluded socially. This urges the youth to suppress, suppress, suppress!

Myths and Misinformation

As a consequence of the limited information available on SRHR, it has also given way to myths and misinformation. The distribution of myths and misinformation can also be seen as a tactic of Pastoral Power, taken on by local monitoring bodies. ‘Myths’ was coded 42 times in the interview transcripts. It was evident that desperation for knowledge made it harder to evaluate the credibility of the information, resulting in further distribution of the myths.

“family planning kills the eggs in their stomach [...] you'll be barren, you can't produce when you use family planning. Yeah. Actually, even leaders, they talk about, the church leaders, that family planning kills eggs” (FGD 3 (M), 2022, 1:16:35)

“They used to say, family planning isn't good [...] Yes, I think like when condoms being bad, giving cancer” (PE 4 (F), 2022, 09:41)

The use of myths is seen as an effective strategy in order to instil fear in subjects and discourage them from sexual conduct.

“When we stayed out, they say that if you come at night maybe you may be playing sex. So they tried to confuse us. So they say that at the main road from the centre, if you come at 4 at night, there is a devil. So we feared he could stay at our home” (FGD 2 (M), 2022, 04:51)

But when inquiring on behalf of SH information in order to navigate in counteracting unwanted outcomes, the adolescents felt they were rejected and preached to practise abstinence. This has led to a great deal of misinformation and misunderstandings for the youth. These were respectively identified 21 and 25 times throughout our interviews, demonstrating how widespread misinformation and misunderstandings are in the sphere of SH, impacting the adolescent abilities to contract reliable information in order to navigate.

“My mother told me that [...] if you sleep in one bed with a boy, he can impregnate you or he can make you sick. But she didn't tell me how do you sleep with that boy? [...] And I feared sleeping with a boy, even my brother I was fearing him [...] I will say; what do you mean? I asked her but she didn't tell me.” (FGD 1a (F), 2022, 13:25)

The problem also lies in parents not having received sexual education themselves, leading them to avert responsibility. The adolescents spoke of the inherent expectation of schools' responsibility for distributing SH information. Paradoxically, schools are also limited in the information they are allowed to provide due to policies, leading to both parties distancing themselves from SH education.

Here, cases from Kasese and Kampala differed. Although abstinence was also widely promoted in Kampala and there were still many myths surrounding SH, there was more openness stemming from families, schools and NGOs, who distributed more accurate information, leading to less confusion, reported from the youth. There was however still fear, but fewer reports.

Masturbation - Enemy of the State

As we've seen, '*Self Control*' is heavily weighed upon in the NSEF. A target of '*Self Control*' and suppression, appeared as a finding in the empirical data - the act of masturbation. The act of self pleasuring has become a target to erase, and was evident in all interviews regardless of otherwise scientific insight into the field of SH. Self gratification, the *raison d'être* of masturbation, was by all viewed as sinful, shameful and dangerous.

In opposition to the other areas discussed, there didn't seem to be disassociations to religious beliefs on this topic. All respondées gave accounts of associated fear with triggering a trail of events leading to addiction to masturbation, low self-esteem and introverted behaviour. We identified the source of these fears situating mainly within myths and misconceptions:

"For masturbation, they call it a sin. Especially for, even men doesn't like masturbation. They always say it weakens your system. When you do it every time. You may not be able to have sex again, don't satisfy your woman when you do masturbation. So some people they fear it"

(PE 3 (F), 2022, 49:25)

"In the sense of discouraging it. Saying it's not good. Because it has effects. So it can lead to addiction. If you continue masturbating, you're going to become infertile"

(PE 5 (F), 2022, 37:43)

Despite many scientifically documented positive health benefits e.g. lowering of stress, menstrual pain and risk of prostate cancer, and improvements of sleep, self-esteem and mood due to hormone release (Levin, 2007), neither PEs nor staff members mentioned having the knowledge of these benefits. This shows how deeply ingrained in the culture myths about masturbation are.

Fear of masturbation aligns with Foucauldian view, where masturbation is considered dangerous, because it exemplifies a lack of self control. Furthermore, it is perceived as an antisocial act, facilitating individualisation and focus on own needs rather than on the dependencies within the reproductive framing, and thus excluding others from the equation of sex.

Masturbation creates a mass of paradoxes for Ugandan youth, packaged in an enormous amount of acts of suppression and denial. The adolescents are met with conflicting myths and normative expectations from society, religion and cultural practices. The FGD respondées shared that religion sees ejaculation in the non reproductive manner as child murder, and people are instructed to fill the world with children, but at the same time religion surrounds the topic of SH with taboo and myths and names premarital sex a sin.

Culture dictates that if men have not reproduced before they die, there will be a stone placed on their grave and society ensures fear in order to control sexual behaviour. Young women in Kasese were told that they should have sex before they reached menarche, in order to become fertile in the future, despite abstinence being preached at the same time (FGD 2 (F), 2022, 13:54). And finally we have sexual violence as an ever present threat, and masturbation as a relief of sexual tension, but the biggest sin of all.

Tamale (2020) explains the stigmatisation of self pleasure by the colonial insertion of religion. There seems to be a near-to-complete erasure of African sexualities prior to colonial rule, where pleasure was a central aspect. Ironically, Christian religious values and practices have since been internalised to the degree that it is considered Ugandan, while topics such as masturbation and pleasure are perceived as being Western and foreign. As Tamale also points out when stating; “Internalized colonization is so deeply embedded and our contexts so enlivened with colonial logic that our intuitive responses to change are usually negative” (Tamale, 2020, 37)

Despite macro-level religious and political beliefs about masturbation, sex, LGBT+ etc. being viewed as foreign and Western, it must be noted that when engaging in conversations in our FGDs and PE interviews, there was an openness to new insight and curiosity in order to counter one’s own ignorance and myths. The youth were very aware of their own ignorance and were exceptionally willing to hear and learn on that behalf. Expressions of curiosity were coded 12 times, and otherwise, their curiosity was accommodated after the interviews, and these conversations were therefore not recorded. Ignorance seemed to be a push factor to obtain information that could lessen confusion and fear. In accordance with SCT this can be seen as a strategy of instilling self-agency to counter chaotic internal cognitive processes that have been created by fear and confusion.

Mental Health as a Part of Sexual Health

Throughout the analysis, we have demonstrated how societal, cultural and religious control mechanisms have emanated into strategic use of myths and misinformation, taboo and external validating systems. Instead of effectively reducing rates of teenage pregnancies, STD/Is, and HIV, they have instilled fear and confusion in the youth, and as a result of this, counteracted the very goal they claimed to have set.

When addressing why the above mentioned analytical points are a problem for our adolescent Ugandans, we turn to Syndemics Theory and SCT. By uncovering fear and confusion as outcomes of opposing normative frameworks, we begin to interconnect these outcomes with MH and SH. This is what we would like to argue in this final analytical chapter.

Fear & Confusion

When talking to the youth in our FGDs, we uncovered many emotions that were on a daily basis otherwise suppressed. The youth talked about their fear, confusion, regret and distrust in their surroundings. Confusion and fear were coded respectively 16 and 46 times throughout our interview transcripts.

As previously mentioned fear was reported due to misconceptions regarding SH, power relations, potential misuse of power, financial devastation, external perception and the risk of being categorised as '*spoiled*'.

Fear was predominantly a product of ignorance - not being able to fully comprehend, stand by and explore one's own sexuality, because of the demand to deny and suppress. With the constant framing of danger in relation to SH from a macro- to a meso-level, the youth often found themselves struggling to navigate, while at the same time being blindsighted by misinformation, taboo and myths.

Mal informative strategies also often left adolescents confused, as previously addressed. They often felt that they could not make well-informed decisions due to the lack of credible information. This level of confusion was more pronounced in Kasese than in Kampala, possibly due to educational level and openness to talk about SH in the home and community.

But the fear was still present in all cases. Fear was not only targeted sex, but also each other - fear of violence, fear of power, fear of men, fear of owing men anything:

“Like sometimes I fear [...] Okay even though that person doesn't have that further intention, but I myself, I fear, so I'll be like what will I give this guy. So when someone start giving me [...] maybe a bracelet, I buy for you a bracelet, so that when you come and tell me to repay, I'll tell you that I give you a bracelet” (FDG 7 (F), 2022, 1:13:57)

Fear was more pronounced with the female respondées, as they were more often left with the consequences of e.g. teenage pregnancies and higher ratios in STD, HIV and GBV statistics. They are also the ones who are disproportionately burdened with financial deprivation and therefore more prone to subject themselves to power play with sex as a commodity as a sheer act of financial survival, as earlier addressed in the analysis.

Confusion was associated with the lack of available credible information, due to taboo, and the contradictory narratives behind myths and misinformation. It seemed evident to the youth that the information they received in their society was unreliable, giving them reason to doubt their surroundings in a play of gaslighting, but this recognition however didn't make them any wiser, as they still struggled to find truthful information.

By uncovering how fear and confusion are outcomes of opposing normative frameworks, we can begin to understand the impact on MH. In terms of MH; fear and confusion impact basic cognitive and social skills and the ability to modulate one's emotions, leaving them unable to obtain a harmonious relationship between body and mind (Galderisi et al., 2015). MH is the dynamic state of an internal equilibrium and is intertwined with SH, as it's defined as encompassing aspects of mental-, social- and emotional well-being, making it an integrated component within SH (WHO, 2006).

Not only are young Ugandans not able to make well-informed decisions regarding SH, but this, along with conflicting norms and subjection to power dynamics are impacting their ways of entering into social relations - as peers, societal citizens and as religious subjects. The social aspect of SH is in this sense an aspect of being human and this impacts their self-perception and ability to create a sense of self-agency.

It is however important to note that adolescent women in our FGDs, especially the teenage mothers in Kasese, were motivated to break taboo and talk about SH in their local communities, in order to prevent them too from falling into the same situation. This shows how the adolescents were able to create self-agency, despite social context countering this.

Distrust

Fear and confusion was experienced as triggering factors for distrust. There were numerous interconnections between the concepts throughout the interviews. ‘*Distrust*’ was coded 23 times, found in all eight FGDs and 2/3 of PE interviews. This included e.g. distrust in each other, in the government and government officials, in religious leaders, family members, and health professionals. We draw on previous findings in the analysis, to address why distrust poses a threat to Ugandan adolescent SH. When investigating this, we apply SCT, and intersect SH and MH using the argumentative logic within Syndemics Theory.

Distrust in Government and Religious Leaders

The Government's normative standpoint on the sphere of SH has always been fiercely communicated (see State of Art). The distrust therefore was often directed at them, due to counteracting political messages. This is illustrated through the example of public distribution of free condoms. What we found from our preliminary research was that the general attitude towards free commodities distributed by governmental authorities including condoms was considered not to be trusted. This was not helped by president Museveni had in fact stated back in 2005 that condoms did not work, making the contradicting statements and actions untrustworthy (Epstein, 2005).

In terms of trust directed at Religious leaders, although Ugandans have strong religious affiliations and religious institutions therefore hold immense normative power over local communities as previously demonstrated, adolescents expressed a distrust of religious leaders. Adolescents expressed discontent and distrust due to the myths that were preached by religious leaders, when addressing SH:

“In churches, they don't talk about, they don't teach about sex, No. They normally lie about that. What if you use a condom? It causes cervical cancer. This is what they do, they lie to us.

And those contraceptives, they normally say that they can remain in your body and they produce skin cancer” (FDG 2 (F), 2022, 23:32)

Myths seemed to discredit religious leaders all together. None of the adolescents that were interviewed sought guidance from religious leaders, deeming them either not knowledgeable or untrustworthy.

According to SCT, if the public does not deem activities or information as being relevant, then they do not take these views into account in the social comparison of the judgement and development of personal standards during self-regulation, meaning that they hold no accountability.

Distrust in Each Other

The communication surrounding SH also seemed to feed into a distrust of fellow peers, deeming them a potential source of temptation, hence Foucault's portrayal of adolescents on both sides of the equation as '*in danger*' and '*dangerous*'. The adolescents expressed in the FGDs a vigilance towards potential negative influence that could emanate from peers, thus inserting a sort of apprehension. This can be seen as a reaction to the fear of the '*enemy within*' as Stoler (1995) refers to.

This was further substantiated in circumstances of e.g. sex as a commodity and the power dynamics perpetuating this scenario. The respondents expressed a mutual feeling of distrust. The power distribution, due to economic dependability, was experienced as a violation of the adolescent womens' autonomy along with the anticipation of misuse of this financial power, and the adolescent men felt that they were taken advantage of for their financial support.

Why is Fear, Confusion & Distrust a Problem for Sexual Health?

The interconnection of fear and confusion as emotional variables, affects MH and social well-being. These are preconditioning factors for SH, as understood through WHO's definition of SH; "*a state of physical, emotional, mental and social well-being in relation to sexuality*" (WHO, 2006).

In terms of Syndemics Theory; we can argue that interacting social and environmental factors promote vulnerability to (sexual) diseases, as many Ugandan adolescents are, as Singer et al. (2017) puts it; disproportionately affected by multicausal factors. Factors such as poverty, social exclusion (or fear of), GBV and other forms of social and environmental stress have a negative impact on the social well-being and MH of Ugandan adolescents.

When uncovering how this is and why adolescents are struggling, we turn to SCT, as external influences (e.g. societal, cultural and religious control mechanisms and conflicting normative frameworks) impact cognitive structures in the environment surrounding adolescents, Bandura (1991) explains that this results in causal agency with very little space for self determination, as they are constantly navigating blind (due to taboo) and in fear and confusion (due to myths and misinformation).

Fear and confusion can be seen as contributing to chaotic internal cognitive processes, which as SCT describes; shapes how they see and evaluate themselves, hence pretexting their belief in their own capabilities - their self-efficacy.

This impacts MH, as from what we saw in our FGDs, the adolescents did not have much confidence in their own capabilities due to limited self determination over agency in regards to SH. They expressed hopelessness, feeling depressed and having low self-esteem, as is seen in MH as the inability to recognise, express and modulate one's own emotions (Galderisi et al., 2015). These findings were more pronounced in Kasese, as those adolescents experienced increased vulnerability due to financial instability, submission to gendered power dynamics, more accounts of GBV, lack of education (future prospects), but these findings were however not limited to Kasese.

Distrust is seen as further propelling this process of downward spiralling MH. As Bandura (1991) explains; the dissociation between external structures (norms and expectations) and internal personal standards widens and as accounts witnessed; adolescents distanced themselves from other peers and institutions. Institutions and social networks that would otherwise be deemed legitimate societal support structures, as these have, according to Marmot and Wilkinson (1998) a protective effect on MH.

Discussion & Conclusion

Throughout the analysis we have presented various normative frameworks from differing societal levels and institutions, and investigated how these filtrate local communities, creating power struggles for adolescents who attempt to navigate these control mechanisms which impact gender dynamics, leading to an agency of survival due to GBV, teenage pregnancy, with detrimental impact to their MH and SH.

When describing these power structures and associated struggles, we do not wish to present the youth as mere recipients, unable to create self-agency. They have shown a high motivation towards knowledge seeking in order to counter negative impacts on their MH and acted as active agents in redispersing information in their communities, as is also seen through PEs.

In our conversations as extensions of our FGDs, we offered the respondées to stay and ask whatever they wanted to know regarding SH. We experienced genuine interest and curiosity from the adolescents, leading to conversations on e.g. FP, abortion, female sexual dreams, LGBT+ etc. SH was also portrayed in a positive light when discussing relationships, intimacy and pleasure-based perspectives. This shows that the youth do have positive connotations to sex, but that there are many hurdles to overcome in the process in terms of fear and distrust.

In regards to SCT, this underlines how powerful sexual education can be in impacting MH positively, as positive associations can be utilised in minimising fear and confusion and building self-efficacy with the potential to rebuild self-esteem. Furthermore, several participants mentioned a hope that our research could help gain support in their fight for SRHR.

When asked about personal strategies for communicating SRHR with their own children one day, they expressed an eagerness to address it at an earlier stage, indicating a more open and destigmatising approach for the future. This signifies a generational shift, valuing information as a source of empowerment.

Despite having highlighted some dominating struggles within the realm of SRHR, we do realise that our thesis does not construct a complete picture as Ugandan youth is very diverse.

However, identifying and understanding some of the major struggles and their origins as well as outcome, can hopefully open the field to understanding underlying dynamics in the pursuit of SRHR. Furthermore, although these themes are regarded as overarching dilemmas in Ugandan society, all themes are multifaceted and interact with external variables in different ways, creating new outcomes - dilemmas and possibilities.

During our research several other areas also surfaced and are relevant to mention for future investigation, including:

- Pleasure-based sexual education
- *'Okuzina'* and *'play sex'* - translation and connotations of sexual vocabulary
- Views on LGBT+ and sexual inclusion
- Ugandan black markets on e.g. abortion pills and sex toys
- Differences in culture and cultural practices in tribes across the country.
- Colonial impact on current Ugandan laws and policies
- Post-Colonialism through donor policies e.g. American influence on ABC

These and more topics would serve to further understand the dynamics in the sphere of SRHR.

The issues we've addressed are not isolated to UG, but can be seen in variations across the world. This thesis is therefore not intended to be presented as exclusively Ugandan, but intended to understand specificities in a Ugandan context. With the rollback of abortion rights in the US, the Indonesian criminal code penalising sex outside of marriage and Iran's *'Woman Life Freedom'* movement, the topic can be extended to all corners of the world intertwining with aspects of gender equality and MH, with a tsunami of external variables inflicting interactions and outcomes.

In regards to this thesis in specifics; on a macro-level, the NSEF has uncovered societal normative control mechanisms and revealed how the Ugandan state exerts power over conduct through a rationality based on norms, subjugating adolescent bodies. Using rhetorical strategies based on dichotomies, framing of dangers and identifying actions in accordance with religious values it allies itself with religious institutions. The NSEF sets up threats and solutions to apparent adolescent moral decadence and inserts rectification through a

cultivation of devotion to religion and religious values, ostracising deviance, which is framed as dangerous, connecting sex with negative connotations and dangers.

In this way the state legitimises itself in exerting normative power over adolescent behaviour, which can be seen as the primary objective of the policy framework, where SH merely is an outcome. This demonstrates how adolescent sexual behaviour is both a target and an instrument in conducting conducts.

By pivoting its normative strategy around self-control, self-awareness and self-defence, it reorients focus to the individual rather than portraying SH as a collective responsibility, hence placing the blame here as well. This is paradoxically anti-Ubuntu, demonstrating how internalised Western notions of Individualisation has become, but it is also beneficial when extending normative state power to the meso- and micro-level. The alliance with religion permits an extension of state power into local communities, by transferring power and surveillance to local authoritarian figures.

Both surveillance and intervention is conducted through the external validation of adolescent behaviour, here it is seen that especially women are targeted. Understandings of gender are crucial as they spill over to NGO operationalisation of equality and equity. Gender norms are, by the state, culturally conditioned and differ between the sexes, applying two different sets of expectations. Women therefore become a target of normative modification and male conduct goes unquestioned. NGO promotion of gender equality and SH is therefore based on these androcentric biases and gendered power dynamics, and these biases are then reproduced on all levels in society. The lack of understanding of deeper lying issues behind gender dynamics leaves a superficial operationalisation of gender equality. Especially in terms of gendered financial dependency and deprivation which leaves adolescent women vulnerable to compromise on bodily autonomy in a play of power, in order to survive on a daily basis, exposing them to GBV and sexual violations.

On a meso- and micro level, FGDs revealed how the collective concern of being labelled '*spoiled*' in the local community worked as a control mechanism on adolescent knowledge and conduct. These contributed to widespread taboo on issues regarding SH, and the utilisation of myths and misinformation in order to insert fear into the adolescents and prevent them from having sex. The reasoning behind this was the apprehension towards

triggering a chain of events, where insight to SH information would inadvertently lead the youth to have sex, which is linked to dangerous outcomes such as pregnancy, disease and death. The youth are left to suppress, deny and abstain from any natural sexual inclination.

Strategies of taboo, myths and misinformation seem to instil fear and confusion within adolescents. Combined with opposing normative frameworks, not only are adolescents unable to make well-informed decisions, but chaotic cognitive structures shape outcomes such as distrust and distancing to what could otherwise be supportive structures, leaving them with a sense of lack of self-esteem. This emotional and chaotic impact on basic cognitive and social skills and abilities to modulate emotions (as understood through the definition of MH) inflicts devastating consequences to their sense of self-determination and self-agency, further inflicting on overall MH.

When understanding SH as encompassing these predeterminants; physical-, emotional-, mental- and social well-being, these multicausal factors then promote adolescent vulnerabilities in terms of SH.

Thus, we've seen how normative control mechanisms expressed in NSEF, based on religious colonial moral values, are reflected in the culture and expressed by suppressive hierarchical structures. These structures enforce the binary gender divide, causing gender inequality, and the suppression of adolescent sexuality. Tactics e.g. individualisation, negative framing, surveillance, taboo, misinformation and myths are a strategy of '*conducting conducts*', causing struggles for the adolescents. This impacts MH by disrupting their internal state of equilibrium and impair cognitive and social skills due to fear, confusion and distrust, spilling over to SH as they struggle to obtain a state of physical, emotional, mental and social well-being in relation to sexuality.

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