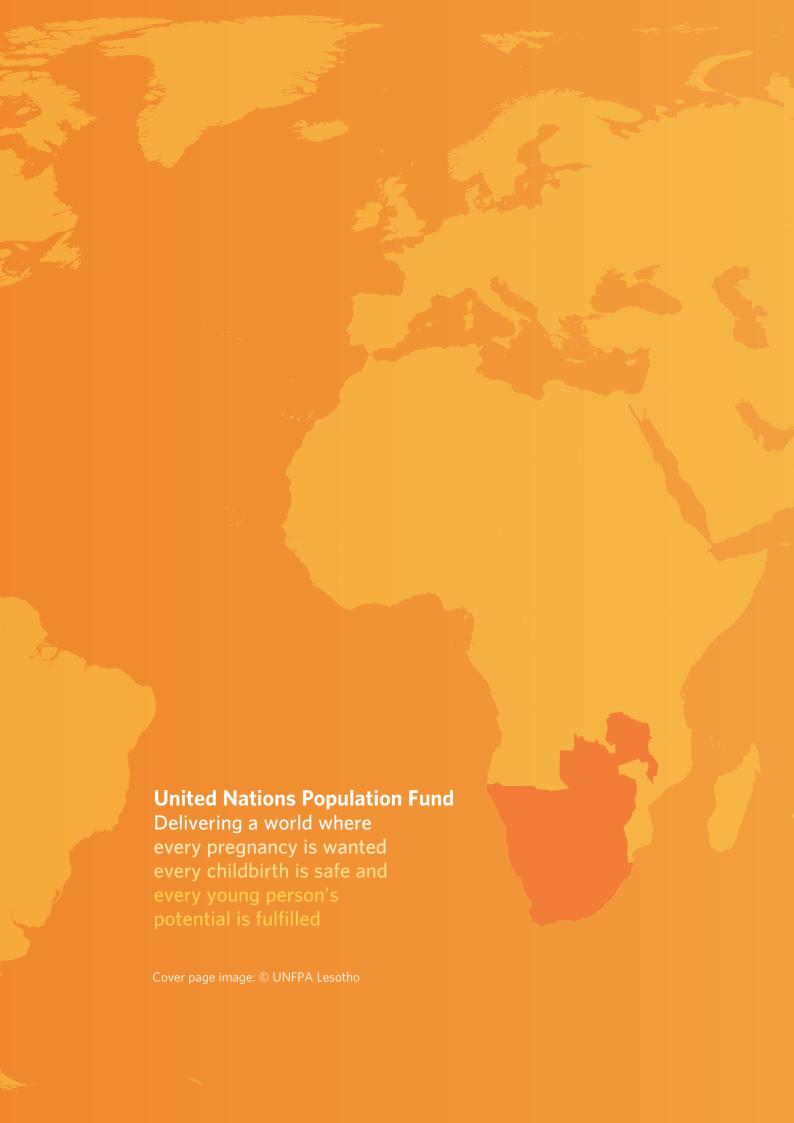
THE IMPACT OF RITES OF PASSAGE AND CULTURAL PRACTICES

on Adolescents' and Young People's Sexual and Reproductive Health in East and Southern Africa -A Review of the Literature







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ACRONYMS AND ABBREVIATIONS

CSO Civil Society Organization
ESA East and Southern Africa

FGM Female Genital Mutilation

HIV Human Immunodeficiency Virus

LME Labia Minora Elongation

OECD Organization for Economic Cooperation and Development

STIs Sexually Transmitted Infections

SYP Safeguard Young People Programme

UNFPA United Nations Population Fund

WHO World Health Organization

DEFINITIONS OF KEY TERMINOLOGY

Abakwetha Xhosa male initiates who go through *Ulwaluko*.

Alangizi The guardians of cultural traditions, such as chiefs, headpersons, and others, such as the

initiators during chinamwali, in Zambia.

Anamkungwi Initiation ceremony counsellors in parts of Malawi.

Chikenzi Traditional performer of male circumcision as part of *Mukanda*.

Chinamwali Female initiation practices observed by the Chewa people in Zambia and Malawi (and

Mozambique, although not discussed in this document). Also called *Chisungu*.

Chisungu Female initiation practices observed in ESA; also called *Chinamwali*.

Cindakula The second of two adolescent female rites of passage, which takes place after menses and

msondo in some parts of eastern Malawi.

Egumeni A place where younger girls sit with older women, to receive wisdom and advice in Eswatini at

the onset of puberty for girls and the signal that they are ready for marriage.

Esangweni A place where younger men sit with older men to receive wisdom and advice at the onset of

nocturnal emissions; in Eswatini, considered to be the onset of puberty for boys and the signal

that they are ready for marriage.

Eswatini Country formerly known as Swaziland.

Female Unless otherwise specified, someone who was assigned female at birth and who also identifies

as female (cisgender).

Female Genital Mutilation (FGM)

As defined by the WHO (2008), "all procedures involving partial or total removal of the external

female genitalia or other injury to the female genital organs for non-medical reasons."

Fisi Term translating to "hyena" in English; can be used to describe the adolescent sexual cleansing

ritual in Malawi and/or the adult man who is paid to have sex with young girls who have completed the ritual. A *fisi* may also be hired to be part of other rites throughout a life cycle, all of which involve that person (always male) having sex with a girl or woman (Warria, 2018).

Intonjane Xhosa rite of passage for girls practised in the Eastern Cape of South Africa.

Jando Circumcision performed on a penis.

Kudonza The practice of pulling on the labia minora during adolescence in an effort to elongate them

(labia minora elongation).

Kwendziswa The practice of marrying an underage girl to an older man.

LABIA Minora Elongation, also known as malepe or kudonza, which can be done by oneself or

with the help of others.

Male Unless otherwise specified, someone who was assigned male at birth and who also identifies as

male (cisgender).

Malepe Labia that have been elongated through the practise of *kudonza*.

Matrilineal Passed down on a mother's side of the family vs. a father's.

Medical circumcision

Circumcision on a penis that is done by a medical professional using surgical tools.

Menarche Used to describe the first menstrual period.

Msondo In some parts of eastern Malawi, the first of two female adolescent initiation rites, which takes

place before menarche and cindakula, and is designed to break the hymen by inserting a boiled

egg into the vagina.

Mukanda Male rite of passage practised by groups.

Ngaliba Male initiation official at boys' Jando initiation.

Spermarche Refers to when sperm production and nocturnal emissions begin.

Thedzo Initiation camps in Malawi, usually in isolation from the community.

Traditional circumcision

Circumcision performed on a penis in a non-clinical setting by a traditional provider who has no

formal medical training.

Ulwaluko Xhosa adolescent male rite of passage.

Umcwasho The expectation placed on girls in Eswatini to abstain from sexual activity until marriage.

Virginity testing The practice of determining whether a hymen is intact, and consequently attributing or

removing virginity status; does not consider other ways of hymenal perforation.

INTRODUCTION

UNFPA-ESARO contracted with an independent consultant to review the existing literature relating to adolescent rites of passage and initiation ceremonies in four countries in Southern Africa (Malawi, Eswatini, South Africa and Zambia), to assess the impacts of these rites on young people in those countries, and propose alternatives for those found to be harmful physically, socially and/or emotionally. UNFPA-ESARO chose to focus on these countries because they are implementing countries of its Safeguard Young People (SYP) Programme. This Programme was developed in 2013 to scale up comprehensive interventions in East and Southern Africa (ESA) for young people ages 10 to 24 to protect themselves from STIs (including HIV), early and unintended pregnancy, unsafe abortion, early marriage, gender-based violence, and harmful cultural practices; while promoting gender-equitable norms. These countries, as part of their participation in SYP, have undertaken reviews of their rites of passage, and in some cases have begun implementing programmatic and policy changes. This document is a review of the existing literature relating to adolescent rites of passage in these four priority countries.

APPROACHES AND METHODOLOGIES FOR THE LITERATURE REVIEW

Formative research was conducted between January and April 2019. Searches were conducted through Google Scholar, Google and the Widener University (USA) database for articles pertaining to adolescent rites of passage in ESA and the four focus countries. Initial search terms included the following (some of which were combined – such as "adolescent rites of passage" + "Malawi"):

- · Adolescent rites of passage
- Adolescents
- Eswatini
- Initiation rites
- Malawi
- Puberty
- Puberty rites
- Swaziland (for any relevant resources written prior to the country's name change)
- South Africa
- Southern Africa
- Zambia

After this preliminary search, additional search terms were added to subsequent searches to help home in on the research relating to practices. This included, but was not limited to:

- The names of various practices described in the preliminary literature (e.g., intonjane, jando).
- The names of communities in connection with language pertaining to rites of passage (such as "adolescent rite of passage" + "Chewa").

As relevant resources were found, an additional review of each article's reference section was done, and articles pertaining to the literature review topic were reviewed for relevancy and considered for inclusion.

For the international leadership and framing of the various practices, Boolean searches were done either in connection with international organizations (e.g., "rite of passage" + "World Health Organization") as well as searches on individual organizational websites using the terms "adolescents" and "adolescent rite of passage" and "initiation rites." In many cases, these searches yielded links to reports relating to the work individual organizations had done relating to the topic, rather than research about the practices themselves or the impact they have. Special attention was given to ensure a majority of researchers and articles were from ESA countries; as a result, a number of published dissertations and Masters' theses were included.



ADOLESCENT RITES OF PASSAGE: EAST AND SOUTHERN AFRICA

Adolescence, which typically refers to a developmental period during which youth begin to transition between childhood and adulthood, is defined differently in different countries. It is, at the same time, a biological construct because it marks the beginning and duration of puberty, and a social construct, because of the ways in which cultures around the world respond to a young person once puberty has begun (Ember, Pitek & Ringen, 2017; Mngadi, 2007). There are many similarities in how cultures around the world categorize and recognize adolescence, and many differences. These can include what is actually considered "adolescence," the duration, societal expectations around social and other behaviours, and special rites of passage (Ember, Pitek & Ringen, 2017).

Adolescent rites of passage exist in and are valued by virtually every culture and country around the world, including in nearly every community in every African country (Kangwa, 2011; Pemba, 2012; Markstrom, 2011; Ramokgopa, 2001; Vincent, 2008; Siweya, Sodi & Douglas, 2018; Skinner, et al., 2013). These rites, which again often differ from community to community or country to country, are designed to officially mark a transition from childhood to adulthood by offering a ceremony, ritual or other experience that is intended to either prepare young people for the roles and responsibilities of adulthood or simply officially declare that the young person is now an adult (Ekine, Samati and Walker, 2013; Maluleke, 2001; van Rooyen & Hartell, 2010). In particular, cultures around the world teach children and adolescents how they are supposed to behave based on the sex they were assigned at birth, which contributes to gendered roles and expectations (John et al., 2017). Rites of passage are valued deeply by the cultures observing them and are key to passing down cultural, social and sometimes religious teachings and traditions - including about gender, relationships and sexuality (Mutale, 2017; Kamlongera, 2007; Skinner, et al., 2013; Kangwa, 2011).

A significant number of societies use biological markers, such as menarche and spermarche, to signal readiness to participate in the rites of passage (Ember, Pitek & Ringen, 2017; Munthali & Zulu, 2007; Padmanabhanunni, Jaffer & Steenkamp, 2017; Siweya, Sodi & Douglas, 2018). In these situations, completion of initiation ceremonies also indicates being ready for marriage, regardless of the adolescents' ages (Johnson, 2018; Mavundla, et al., 2015).

In much of East and Southern Africa, initiation ceremonies and adolescent rites of passage discussed in the literature were found to have numerous similarities:

- Adolescents receive strong pressure to go through an initiation rite and there can be serious social consequences for those who do not (Johnson, 2018).
- All of the rites of passage in ESA are deeply rooted in a cisgender¹ gender binary. Adolescent initiates are separated by gender, based on the sex they were assigned at birth. Gender role stereotypes are emphasized and reinforced.
- Initiates are secluded from the rest of the community in single-gender groups (Johnson, 2018; Kangwa, 2011; Siweya et al., 2018).
- Initiation practices assume and reinforce an expectation of heterosexuality, particularly for boys.
- Lessons about sex and sexuality are an important part of most of the rituals, including information about how to please a partner within the context of marriage (although the latter depends on gender) (Sotewu, 2016).

"Rites of passage are valued deeply by the cultures observing them, and are key to passing down cultural, social and sometimes religious teachings and traditions."

^{1 &}quot;Cisgender" refers to being assigned a sex at birth based on genital appearance. When a person is old enough to have self-awareness, and their feelings about their gender matches the sex they were assigned at birth, they are called "cisgender."

- Boys are circumcised, but not all girls undergo female genital mutilation (FGM). Male circumcision is emphasized in part because of cultural values, and partly as a component of a country's HIV reduction strategy.
- Infliction of pain is more characteristic of ceremonies for boys, as is the pressure to endure the pain without crying or complaint to display masculinity (Siweya et al., 2018; Nkosi, 2008). Boys who are circumcised medically in hospitals may not be considered "real men" because they did not learn to tolerate pain (Barker & Ricardo, 2005). Men who undergo circumcision are seen as dominant over women and uncircumcised men, and there are social consequences and discrimination against boys who choose not to be circumcised (Banwari, 2015).
- Some girls are subjected to virginity testing, which can include a physical examination to determine whether the hymen is intact, or intense questioning every month during menses (Padmanabhanunni, Jaffer & Steenkamp, 2017; Kang'ethe, 2013).
- Shaving of the head, arms, legs, genitals, regardless of gender, is common but not universal (Bullock, 2015).
- Either a single adult or group of adults is/are charged with the initiation ceremony and their specific role/roles is/are to maintain the cultural traditions.
- Food, dress, dance and songs are part of the rituals (Kangwa, 2011; Sotewu, 2016).
- Secrecy is encouraged and expected. It is considered taboo/inappropriate to discuss the ceremonies. This

secrecy contributes to the inconsistent information that is available about them (Hauchard, 2017; Sotewu, 2016).

It appears the farther south and west one goes in the region; the more similarities appear in the adolescent rites of passage between the countries and communities and among the four focus countries of this literature review. An example is Ngoma and Vukhomba initiation rites for, respectively, male and female adolescent Vatsonga, who can be found in Mozambique and Zimbabwe, as well as in South Africa and Eswatini (Mapindani, 2018; Maluleke, 2001).

As one moves farther north and east, rites tend to change more from the four focus countries. For example, in Kenya, Tanzania and Uganda, female genital mutilation (FGM) is practised, while it is not in Eswatini, Malawi, South Africa or Zambia. As with other rites of passage, girls receive strong pressure to go through FGM, and there are serious social consequences for those who do not (Pesambili & Mkumbo, 2018; Graamans, et al., 2019). In all of the countries that are practising FGM, there are also efforts to find alternative rites of passage, with varying levels of support and successes (Droy et al., 2018).

 Post-circumcision, boys are expected to demonstrate an interest in girls and women, including having sexual intercourse once they return home (Ahmed, 2014; Mkandawire et al., 2013; Siweya, Sodi & Douglas, 2018).



ADOLESCENT RITES OF PASSAGE: FOUR PRIORITY COUNTRIES

Common Adolescent Rites of Passage: Eswatini

Determining the current adolescent rites of passage in Eswatini is challenging. Several sources assert that there are no actual transitions between childhood and adulthood, that even if one is an adult, one is a minor for as long as one's parents are still alive (Mavundla, et al., 2015; Mngadi, 2007). The most current statistics from the government do not mention rites of passage at all, and the existing literature speaks much more to historical observations, although it appears *lisango* and *liguma* are still being practised to a certain extent today.

Lisango and liguma is when younger men sit with older men, and younger girls with older women, to receive wisdom and advice (Mavundla, et al, 2015). Lisango and liguma are also designed to reinforce different gender roles, responsibilities and status between boys and girls. Girls are expected to remain abstinent until

marriage (umcwasho) and to wear tassels indicating they abstain from sex. The tassels change from powder blue and yellow from puberty up to age 18; red and yellow for women ages 19 to 24 (The New Humanitarian, 23 August 2005; van Rooyen & Hartell, 2010). Once a girl reaches the age of 18, she is allowed to engage in non-intercourse shared sexual behaviours (van Rooyen & Hartell, 2010). Boys and young men are taught about what it looks like to be a leader and in control, and girls and young women are taught to be more submissive and what it means to be a good wife and daughter-inlaw (Mavundla, et al., 2015). In the past, Eswatini's male initiation rites included traditional circumcision, but in recent years the practice has been connected more to HIV prevention and transmission-reduction efforts than to any non-health-related cultural relevance (Maibvise and Mavundla, 2014; WHO, 2009; Avert, 2017).

Sample Initiation Rite: Eswatini

Lihawu ("shield"), is a three-day camp where 25 to 30 adolescent boys and young men aged 15–29 years are guided, mentored and encouraged to hold open and honest discussions about sexuality, sex and sexual health, relationships, gender equality and respect. The camps promote the Swazi cultural heritage of ubuntu. They take part in challenges, games and goal-setting, as well as talking openly about the values of traditional and modern practices. The camps also provide the opportunity for the men and boys to talk about HIV and participants are offered voluntary HIV counselling and testing. Voluntary medical male circumcision is also offered to participants should they wish to undergo the procedure to help protect them against HIV infection." (UNAIDS, 2016).

Common Adolescent Rites of Passage: Malawi

Malawi is a country with over a dozen documented individual ethnic groups (Dionne, 2015), and so the types of and frequency of participation in initiation ceremonies depend on the region and the ethnic groups represented in each (Skinner, et al., 2013). The majority of the adolescent rites discussed in the available literature focus on the three largest of these ethnic groups - the Chewa, the Lomwe and the Yao - and therefore cannot be generalized to the entire Malawian population. As members of the Chewa people are found in several ESA countries, some of their traditions relating

to adolescent rites of passage will be discussed below in the section on Zambia. Among the Chewa people, rite of passage ceremonies can happen between the ages of 8 and 18 although, as in other countries, most tend to take place around the onset of puberty (Mutale, 2017).

Although initiation can take place anywhere in the country where members of various ethnic groups that observe these rites have settled, they tend to be concentrated in the south and in rural communities (Ahmed, 2014; Glynn et al., 2010; Ekine, Samati and Walker, 2013). In the

southern region, one study reported that more than 57 per cent of girls (75 per cent of Yao and 60 per cent of

Lomwe) between the ages of 12 and 19 went through an initiation process (Warria, 2018).

RITES OF PASSAGE FOR GIRLS:

There is a range in what is reported on the rites of passage still being conducted in Malawi. While there are similar overall themes – for example, the timing corresponding to the onset of menses and the lessons being taught to prepare them for adulthood and marriage (WLSA Malawi and SARDC WIDSAA, 2005) - there is some variety from community to community.

Some of the lessons taught to female initiates include:

- They are old enough to have sexual intercourse, but they should not have sex before marriage to avoid pregnancy. Doing so could bring shame on their families and, if a pregnancy occurs, could put their health and safety at risk both during the pregnancy and during childbirth.
- They should avoid associating with girls who have not yet undergone an initiation rite.
- They should not eat eggs, as this could affect their ability to become pregnant in the future.
- They should avoid entering their parents' bedroom (Malawi Human Rights Commission, 2006).

Some girls do not go to an initiation camp but instead are sent to an aunt or other adult female relative for their instruction on how to be an adult woman (Kangaude, 2017; Munthali and Zulu, 2007).

There are numerous descriptions of where and how puberty initiation rituals are reported in Malawi. The most commonly documented practice in Malawi (and Zambia, discussed later) is *chinamwari*. Documented *chinamwari* practices include teaching girls about menstruation, "good morals," HIV and AIDS, and gender roles, as well as labia minora elongation (LME) (discussed later), and virginity testing (Gondo, 2017). Another important part of *chinamwari* is teaching girls how they are supposed to move during sexual intercourse so they can pleasure their future husbands

(Kangaude, 2017; Munthali and Zulu, 2007). There are varying descriptions of how long the isolation from the community is, but it generally lasts anywhere from one week (the duration of menses) to several weeks.

During the initiation, the songs that accompany the sex-simulating dances are filled with sexual innuendo and explicit language. The girls dance naked and anyone attending can pay a small fee to be allowed to touch the breasts of any girl (MHRC, 2006). A commonly-reported practice is the use of a *fisi* ("hyena"), who is an older man who is paid to have (usually unprotected) vaginal sex with initiates to determine whether they have learned all they need to learn to please their future husbands (Munthali & Zulu, 2007; Skinner et al., 2013; Butler, 2016; Ahmed, 2014). The *fisi* may be hired by a girl's parents or secured through the leader of the initiation rite (Ayikukwei et al., 2007). After her sexual experience with the *fisi*, a girl is considered to be, and presented to the community as, an adult.

Some of the research that included reports from NGO and CSO professionals in Malawi assert that graduating initiates are no longer encouraged to have ritual sex, but to take traditional medicine instead (Pemba, 2012), especially since the *fisi* practice was outlawed in Malawi in 2013. At the same time, however, many girls in the qualitative literature still report being told they needed to have unprotected sex with a *fisi* at the end of their initiation experiences (Hauchard, 2017).

Initiation rites in the eastern and southern regions of Malawi, *msondo* and *cindakula*, are usually performed before and after menarche. *Msondo* involves inserting a boiled egg inserted into the vagina to break the hymen. *Cindakula* takes place after menarche and includes teaching girls how to move their bodies sexually to please their future husbands (Kamlongera, 2007).

RITES OF PASSAGE FOR BOYS:

Boys' rite of passage tends to be far simpler than what girls experience (Malawi Human Rights Commission, 2006). Traditional circumcision has a long history in specific ethnic groups that traditionally circumcise, such as the Yao. Historically, Yao boys have been circumcised in isolation, then when they return to the community they are seen as "men" (Mkandawire et al., 2013). More recently, circumcision has also been practised to reduce HIV and other STIs.

The circumcision practice differs from one locality to another. In some areas, the frenulum is cut; in other areas, all of the foreskin is cut off using a knife. In still other areas, it is reported that the initiation ceremony leader, or *Ngaliba*, cuts off the foreskin using his fingernails (Mkandawire, et al., 2013). This and other community-based, non-medical circumcisions are neither designed, nor have they been documented to

have, similar impacts on reducing HIV transmission risk as surgical circumcision (Burge, 2012).

The initiation lasts for an average of four weeks, in part to let the circumcision sores heal, but it can also go beyond four weeks. The language used during the initiation rite is sexually-explicit (some of the literature refers to it as "obscene") and the focus is on sex and sexuality (MHRC, 2006).

Munthali et al. (2004) also report that boys are encouraged to have sex at the conclusion of the initiation since they are now considered men. The morning after the ceremony, the initiation graduates are shaved and bathed at the river, after which they are treated to a

celebration feast and are given new names as a symbolic change of status as adults who are to be respected by the society (MHRC, 2006; Pemba, 2012).

In addition to learning basic information about girls, such as when they should not have sex with a woman (during her period, or after she has given birth or terminated a pregnancy), the boys are taught more general life lessons, such as:

- They should not fear dead bodies and should start to attend funerals.
- They should respect their elders.
- They should take care of the sick and the aged (Mkandawire et al., 2013).

Sample Initiation Rite: Malawi

In Mzimba, on attaining puberty, the girl usually informs an aunt or grandmother about her new experience. The girl is then taken for confinement for the entire period of her menses (usually a week). Elderly women counsel the girl in many matters including how she should take care of herself during her menses. For example she is advised not to put salt into food, to regularly wash herself and her underclothes, and on the proper way of sitting in the presence of other people. The girl is counselled on good manners, especially when interacting with adults. She is expected to show respect for elders. She is told to avoid sexual relationships with men and boys before marriage or risk pregnancy out of wedlock. She is also told to stop playing with girls that have not yet attained puberty to show that she is now grown up and must therefore begin behaving like an adult by associating with fellow grown-ups. The girl is taken back for confinement on commencement of second menses. The elderly women continue with the instructions. She leaves the house of isolation after a week and after being shaved of all hair, including pubic hair, to show that she has completed initiation (Malawi Human Rights Commission, 2006).



Common Adolescent Rites of Passage: South Africa

FOR GIRLS:

Intonjane is an adolescent rite of passage among the Xhosa people that begins with menarche (Padmanabhanunni et al., 2017). As with rites of passage in other ESA countries, girls are secluded from others in their communities, during which time they learn about their bodies, hygiene, menstruation and more. At the conclusion, there is an elaborate celebration with dancing, singing and offering of gifts to the initiates'

ancestors (Padmanabhanunni et al., 2017; Malisha, Maharaj & Rogan, 2008). Initiation ceremonies in South Africa are often performed at initiation schools, which "remain one of the strongest domains of traditional rule;" as a result, young people say they often feel pressured to attend in order to show their respect for traditional authority (Malisha, Maharaj & Rogan, 2008).

FOR BOYS:

Ulwaluko, traditional circumcision and initiation into manhood, is an ancient initiation rite practised (though not exclusively) by the amaXhosa (Nkosi, 2008; Banwari, 2015). Bullock (2015) is the only research found as part of this process that documented the fee parents must pay in order for their sons to be part of the initiation: roughly ZAR10,000 (or US\$900, as of 2015) per boy. This covers the cost of any animals that may be slaughtered, traditional blankets, a month's worth of food, traditional surgeon fees, overseer fees, and food and drinks for parties. In addition, because the boys' clothes are shredded as part of the process, parents must also be able to buy replacement clothes for them.

Among the lessons boys are taught include demonstrating their strength, willingness to take risks and rejection of all things feminine (Siweya, Sodi & Douglas, 2018). The emphasis on these stereotypically masculine traits is designed to prepare young men for the expectation of protecting their family and being contributing members of their community.

Circumcised men in South Africa are expected to take on greater social responsibility in their communities, acting as negotiators in family disputes, weighing decisions more carefully and cooperating with elders (Ramokgopa, 2001; Vincent, 2008; Siweya, Sodi & Douglas, 2018).

They are given gifts at the conclusion of initiation/circumcision to represent that they are now men who are capable of receiving property independently, without any involvement from parents (Siweya, Sodi & Douglas, 2018; Vincent, 2008).

Among the Venda, initiation of adolescent boys usually lasts for three months and, as in other areas, begins in isolation so they can demonstrate their survival skills. Circumcision is an important part of the initiation process so the boys can officially transition from childhood to manhood (Malisha, Maharaj & Rogan, 2008). Adolescent rites of passage that include traditional male circumcision in South Africa tend to take place in "initiation schools." Some schools are run by trained leaders and some are bogus and maintained by individuals seeking to make money off of unsuspecting parents. Over the years, there has been documentation of several hundred boys who have been injured or have died because of the unsanitary, unsafe conditions of male circumcision done at the schools. In 2018, a bill was introduced to regulate the initiation schools in South Africa (SABC, 28 August 2018) to regulate the harmful practices in some of the bogus initiation schools. As of the writing of this document, the bill has not yet been voted on by the National Council of Provinces. If it is approved there, it will then go to the President for signature.

Sample Initiation Rite: South Africa

The initiates... surrender their names. Their clothes are shredded in the days leading up to their exclusion, and they carry a short stick with a white cloth tied to one end. Women cut dry grass for thatching while men chop down flexible saplings. Dressed in traditional clothing, the adults construct a domed dwelling called *iboma* that will serve as home for the *abakwetha*. Each of the customs is intricate and detailed, but there is no instruction booklet, so the men constantly remind each other of the many important details as the preparation continues. The structure is surrounded by a symbolic barrier of thorn branches with a single entry and exit point (Bullock, 2015).



Sample Initiation Rite: South Africa

A day before the boys go to *thedzo*, their parents prepare a chicken, money and some flour for the village head as a way of asking for permission for the initiation to take place. They also prepare money and flour for the *Ngaliba* and *Nakanga* (counsellor), who is the overall person-in-charge for the period of confinement. When the date and time for the initiation has been set, the boys' parents are advised to abstain from sex for the whole period that their boys are at *thedzo*. Even the village head suspends sexual activities for this period (Mkandawire, et al., 2013).

Common Adolescent Rites of Passage: Zambia

FOR GIRLS:

It is unknown exactly how many individuals in Zambia have participated in adolescent rites of passage, due to the challenges of collecting data and the social admonishment to not speak publicly about these practices. From older research, data showed that "in urban towns, about 87 per cent of women undergo initiation rites at puberty and about 78 per cent prior to marriage" (Kapungwe, 2003).

Because Zambia, like Malawi, has a significant population of Chewa people, the adolescent female initiation ceremony is also called *Chinamwali* or *Chisungu*. It is also designed to teach girls about what is expected

of them as adult women, both as individuals and as members of their community (Mutale, 2017). Wali is the girls' puberty ritual, which is designed to "turn girls into women" (Mutunda, 2016; Mutunda, 2016a). Chinamwali or Chisungu is an initiation ceremony of dichotomies, good and bad, and hot and cold. A girl who experiences Chinamwali is a "good" Chewa woman (Minton and Knottnerus, 2008) and, by default, someone who does not is "bad" and is not fulfilling her duties as a female member of her community. The other dichotomy, hot and cold, refers in part to anything having to do with sexual and reproductive functioning and behaviours. For example, sexual fluids that are

connected with sexual arousal, as well as menstruation, make someone "hot." Hot is connected to being mysterious, and therefore potentially "dangerous" to the initiation ceremony and continuation of traditions (Mutale, 2017). To be "cool," girls are expected to be sexually abstinent before *Chinamwali* in order not to spoil or "endanger" the ceremony or other initiates.

A focus in Zambia among the Chewa is related to menstruation and, in particular, the power of menstrual blood, which is considered sacred by the Chewa. Whoever notices a girl's menarche is to inform her mother immediately, who in turn informs the girl's grandmother. The chief is then informed, and the person who is responsible for the girls' initiation is informed through his *Anamkungwi*. While the girl menstruates, her parents are to remain sexually abstinent. Once she completes her menses, she receives instruction about how to manage menstruation, and rituals involving stories, dancing and songs are performed (Mutale, 2017). Menstrual blood is handled cautiously, due to the perception that coming into contact with it is connected

to witchcraft and could lead to infertility. The initiate is also taught that sexual intercourse should not take place during menstruation, and that a menstruating woman is not supposed to cook for others or put salt on her own food (Kangwa, 2011).

The initiation is designed to teach the girls about reproduction, and to formally introduce the girls to adult life. There are lessons on portraying good behaviour towards parents, neighbours and elderly people, and about not emulating negative role models. The lessons are delivered through songs, dancing and marriage emblems (Kangwa, 2011).

More specifically, the initiates are taught by adult *alangizi* how to have sex by showing how they should move during sexual activity. After the three-month period, they are sent to an older man in the community to show what they learned. If they were not sufficiently trained in the eyes of the tester, the girl has to return for additional training (Labous, 2015).

Sample Initiation Rite for Girls: Zambia

Wali goes through distinct stages. First, the preparatory stage, followed by seclusion, after which she has graduated. In the preparation stage a special shelter known as *litungu* is erected next to a particular type of ficus tree called *muulya*. The second phase is when instruction begins; this is provided by an appointed female instructor who should be experienced in this type of teaching. Each girl spends the first day of seclusion making a girdle (*zeva*) that she will wear for the duration of the *wali*. Seclusion lasts between four and six months and includes all aspects of women's work, womanly arts and crafts, with emphasis upon how to please one's future husband sexually and on being an obedient and hard-working wife and mother. It should also be mentioned that, during seclusion, the girl has to observe certain rules such as not running quickly, lying on her stomach and avoiding being slapped on her buttocks. She has also to avoid eating certain types of food. By graduation, the young woman is ready to re-join her family and the community in her newly acquired role (Martinez Perez et al., 2013).

Labia Minora Elongation (LME)

Of the four countries researched for this document, Zambia was the only one that had literature discussing labia minor elongation (LME). LME is "the expansive modification of the inner lips of the female external genitalia, or labia minora" by elongating them through pulling, oils, creams or by using other instruments" (Martínez Pérez, et al., 2013). Among the Bemba people, having elongated labia (*malepe*) is believed to be visually attractive, to enhance sexual pleasure for girls' and women's male partners, and to help open up the vagina to facilitate childbirth in the future (Perez et al., 2015; Kaunda, 2013). Other girls and women may participate in a type of genital cutting (not FGM), in which they make razor cuts around their genitalia and apply *umuthi*, a root that creates a pigment to dye the

scars made by the cuts, which they are told will enhance their male partner's sexual pleasure (Perez et al, 2015; Mutale, 2017).

Some girls will organize secret "pulling parties" to assist their friends in this process, which is, according to women interviewed in the existing research, often rough and painful (Perez et al, 2015; Martinez Perez et al., 2013). Other methods for aiding in labial pulling included wooden clamps that would either be used in the pulling parties or worn out in public so that the pulling would continue over time (Perez et al., 2015). Part of the *Chisungu* initiation includes inspecting girls' vulvas to see whether they have practised LME (Kangwa, 2011).

FOR BOYS:

While girls are initiated individually in their village, boys are initiated in groups in the bush. While girls tend to be pampered a bit, boys are challenged to prove their strength and masculinity through more "harsh" activities (Martinez Perez et al, 2013).

As in other African countries, the male rite of passage in Zambia is linked specifically to circumcision, a practice that, although more recently connected to reducing HIV transmission, is still practised less frequently in Zambia (Waters et al., 2012).

Sample Initiation Rite for Boys: Zambia

There are three distinct stages, the first being preparation, which usually begins when a village headman (*chilolo*) or important elder, having reached consensus with the families of young uncircumcised boys, publicly announces that the time for the *Mukanda* has come. The candidates are then gathered together at the *Mukanda*, where they are circumcised using a special knife designed for the ceremony (Mutunda, 2016). Boys and young men are taught that circumcision increases virility and sexual performance, their attractiveness to girls and women and their dominance over youth who are not circumcised and therefore seen as "weaklings." The second stage is the seclusion, during which the initiates (*vatundanji*; sing. *kandanji*) are taught skills such as *makishi* (masks) making, wood-carving, basketry, smithing and other practical skills. They are allowed to play games and engage in sports. The curriculum includes cultural training and instruction in the ancient form of design and calculus known as *tusona*, which is a tradition of ideographic tracings that are made in sand. The third and final stage is graduation, or *kulovola*, which is marked by various activities as the boys are welcomed back into their community, where they are received joyously as newly born and real men (Mutunda, 2016).

IMPACTS OF ADOLESCENT INITIATION RITUALS

The literature has documented a range of impacts on adolescents who are taken to initiation camps for weeks or even months at a time as part of their rituals. It is tempting to home in on altering practices exclusively within the context of HIV/AIDS, due to the disproportionately high incidence in these countries; and indeed, numerous NGOs cite HIV rates as a motivation for concern and rationale for proposed changes (Kamlongera, 2007; Pemba, 2012). At the same time, however, proposing changes only with HIV and health in mind - for example, that sexual initiation rites can continue as long as a male partner wears a condom to reduce the chances of HIV and/or other STI transmission and unintended pregnancy - ignores the social and emotional impact of a girl (or a person of any gender) being required to have sex with an older man she does not know and does not have a choice over whether she has sex with him (Kamlongera, 2007; WLSA Malawi and SARDC WIDSAA, 2005). It is imperative, therefore, that professionals and community members look at not only the physical impacts of initiation rites, but also the psychological, emotional and social impacts.

It is challenging to categorize the rites of passage in the four countries discussed in this document as exclusively positive, negative or neutral, as some of the practices have both positive and problematic or challenging aspects. An example of this dichotomy is connected to the fact that lessons about sexuality are included. In all four countries, it is considered taboo to speak about sexuality (UNFPA, 2019), and so it is positive that the rite of passage ceremonies create a space in which sexuality can be spoken about freely (Kangwa, 2011; Warria, 2018). At the same time, however, the extent of the lessons is limited, and the accuracy of what is shared inconsistent. In addition, with no oversight, it is not known whether the information is delivered in a way that builds positive self-esteem and self-efficacy, rather than using fear or shame to reinforce what are often limiting or harmful gender role stereotypes.

The impacts of adolescent rites of passage are not exclusively physical. Social and emotional impacts are related to self-esteem, and self-esteem is related to positive sexual decision-making and health outcomes (van de Bongardt et al., 2016; Ethier et al., 2006; Kerpelman, et al., 2013). For example, while some girls report they enjoy going through the rites of passage - that they like and feel empowered by being seen as women and by receiving the lessons on sex and sexuality - the gendered message is that their value as girls and women is based on how feminine they are, or how attractive they are and how much they can attract and please men sexually (Ekine, Samati and Walker, 2013). In the available research some girls shared that participating in rituals brought self-consciousness and embarrassment due to either requirements to dance partly or fully naked in front of others, or to the fact that their menarche status was being discussed publicly rather than kept private (Padmanabhanunni et al., 2017). There are some conflicting feelings among community members in all four countries on the value vs. negative impact of a number of the rites of passage discussed in this document.

Socially and emotionally, the positive impacts of and rationales for adolescent initiation ceremonies and rites of passage are connected to contributing to young people's identities and giving them a more respected social standing in their communities. For example, generally speaking, the impacts and outcomes of adolescent rites of passage in this region are more positive for boys than for girls. Many rites of passage – but not all have strong gender role components that are designed to keep men strong and women subservient.

RITES OF PASSAGE WITH NEGATIVE IMPACTS

Negative Physical Impacts

Much of the negative consequences of rites of passage in the literature relate to girls. This may be due to the limited focus of the practices for boys vs. girls, as well as the accompanying gendered expectation that boys are expected to endure any physical trials without complaint. The greatest concern with boys that has been documented repeatedly in the literature is the negative health consequences and risk of death from infection from cultural circumcision and/or from injuries/ dehydration as a result of practices conducted in initiation camps (Nkosi, 2008; Banwari, 2015; Kang'ethe, 2013). In addition, when surveyed, Malawian males who had participated in an initiation rite were more likely to report early initiation of shared sexual behaviours as opposed to those who had not participated in a puberty rite (Stephenson, Simon and Finneran, 2014; Munthali & Zulu, 2007; Pemba, 2012). Early sexual onset is linked repeatedly in the literature worldwide to negative health outcomes, such as a greater number of sex partners, higher risk for STIs, including HIV, and unintended pregnancy (see, for example, Shrestha, Karki & Copenhaver, 2016; Carli, Hoven, Wasserman, et al., 2014; Olesen, Jensen, Tryggvadottir, et al., 2012; Santelli, Kantor, Grilo, et al., 2017; Epstein, Bailey, Manhart, et al., 2014; Scott, Wildsmith, Welti, et al., 2011, among others). Younger mothers tend to have more complicated pregnancies and deliveries, are at higher risk for miscarriage, fistula, or even death (Ahmed, 2014). In addition, early pregnancy leads to a higher risk of dropping out of school (GENET, 2018).

The types of impacts of rites of passage on girls relate to the physical impacts, and the greatest amount of criticism in the literature is related to the use of a *fisi* or, if not officially using that term, forcing girls to have sex with an adult man as part of the ritual. There are numerous concerns relating to consent and self-determination, and the power inequalities that restrict girls from being able to say whether they do or do not want to participate in these rites. This is, according to the literature, particularly pronounced in rural areas. Some consider the practice of *fisi* and other sexual

initiation aspects of the rite to be statutory rape (Kamlongera, 2007; Leary, 2016). The young girls are falsely made to believe that the *fisi* aspect of the ritual is a required part of the initiation; when they agree to the ritual, the community often sees them as willing participants in the process. However, this doesn't recognize that, due to their younger ages, the law does not view them as capable of giving consent.

Some rituals and traditional cultural practices can also contribute to the transmission of HIV (Ayikukwei et al., 2007; Munthali & Zulu, 2007). According to tradition, the *fisi* does not wear a condom or any other barrier method. Unprotected sex is encouraged, as it is believed that semen cleanses the female initiate. Since a *fisi* is picked for his "good morals," the community believes he cannot have HIV or any other STIs. Yet, in Butler's (2016) research, a *fisi* confessed to being HIV positive but indicated that he does not share this information when being hired. In some cases, a *fisi* can have unprotected sex with several girls in one night or over several nights and without any protection, which places both men and girls at risk of HIV infection and re-infection.

Early pregnancies associated with sexual cleansing were also reported in the literature. Early pregnancy increases maternal mortality and the risk of medical complications for the girls, while babies are likely to be born prematurely. Ongoing medical care is crucial, yet these young girls cannot access it due to poverty and the lack of infrastructure in rural areas. Early pregnancy can harm both the health of the mother and the development and well-being of the child. In addition, pregnancy could lead the girls to drop out of school. Without an education, their futures are limited (Labous, 2015).

The negative physical impacts of LME in Zambia include pain, itching, swelling, and difficulty urinating (especially without pain) when girls used pegs or herbal stems to clamp the labia as part of the stretching process (Martinez Perez et al., 2016). Some researchers examined whether there is any potential for *kudonza* to carry a

risk for STI or HIV transmission if the practice includes scarring. The general sense was there was no risk, because the scars are healed by the time a girl or woman is in a sexual relationship, and therefore there are no openings in the skin to facilitate HIV transmission.

Finally, it was reported in the literature that the *anamkungwi* sometimes physically punishes or beats the girls who were deemed to be rude in the camp. These acts of verbal, emotional and physical violence are detrimental to a girl's development, notwithstanding the arguments that they do this to teach girls to be respectful.

Negative Social, Emotional and Psychological Impacts

The negative impacts of some initiation practices are not exclusively physical; there are social, emotional and psychological impacts that can reverberate into adulthood. The teachings provided during initiation rites are intended to perpetuate a dominant position for men and a subordinate position for women, both in marriage and in the community (Kapungwe, 2003).

Socially, there is a great deal of pressure to participate in initiation rites. When adolescents or their families choose not to, the social consequences can be severe, including being isolated by fellow members of the community and not being seen as an adult, regardless of age (Warria, 2018; Kamlongera, 2007).

As in any culture where a person is held up to an appearance or a performance standard, the expectation can lead to an obsessive focus on whether one is attractive enough and capable enough. This can, in turn, lead to negative self-perception and issues relating to self-esteem and self-efficacy. For example, LME is seen by some experts as part of the social and cultural practices that keep girls and women in subordinate positions, which in turn can increase their vulnerability for HIV infection, unplanned pregnancy, and more (WLSA Malawi and SARDC WIDSAA, 2005). Girls who do not participate in LME experience fear and shame, which is directed at them by their peers and, in particular, by their future husbands (Martinez Perez et al., 2013). LME is intrinsically connected to femininity - if one does not have elongated labia, they are not considered feminine, and therefore desirable and worthy (Martinez Perez et al., 2013). This concern about being judged may have social and emotional impacts, but they could have negative impacts on a girl's or woman's physical health as well. Fear of judgment and stigma can inhibit them from seeking routine or even emergency gynaecological care. Some claimed they would anticipate embarrassment and discomfort when attending a nurse or physician consultation (Martinez Perez et al., 2013).

There are also communities in which health-related misinformation is perpetuated as part of the *kudonza* teaching. For example, some Zambian research participants reported being told that having *malepe* protects them from STIs and HIV (Martinez Perez et al., 2013). In some areas, semen is seen as a cleansing fluid, which perpetuates the myth that unprotected sex between an older man and a young girl who has gone through initiation will "purify" her (Day & Maleche, 2011).

Initiation rites require young people to miss school, which can put students behind and have an impact on their ability to graduate. This puts their financial futures at risk, as it is much more challenging to earn a higher paying job without an education, especially for girls and women (Malawi Human Rights Commission, 2006).

Some girls who went through virginity testing reported the emotional impact of feeling that their families did not trust them to be able to decide not to have sex (Padmanabhanunni et al., 2017). If a girl becomes pregnant, whether as a result of an initiation ceremony or for any other reason, the dominant message she and her family receive is that marriage should occur immediately, taking precedence over school. If the girl does not marry, in addition to the stigma of being an unwed mother, it is generally believed that returning to school will increase the chances of a girl getting pregnant again, which in turn would further reduce her options for marriage. Unmarried mothers are stigmatized and lack social standing in many communities, which also makes it difficult or impossible for them to return to school (Ekine, Samati and Walker, 2013).

EDUCATING CHILDREN FOR ADULTHOOD: IMPROVING CSE TO SUPPORT ADOLESCENT INITIATION RITES

One of the most positive impacts of any of the adolescent rites of passage that have been documented is their educational component. The initiation rites have the potential to play a valuable role in promoting sexuality education and gender equity, and have already been useful in some countries' HIV prevention strategies (Kangwa, 2011). At the same time, however, a number of challenges with the educational components of initiation rites have been identified in the literature:

- The information being taught varies from community to community and is not necessarily accurate or up to date. Sexuality-related information is constantly changing. As a result, information, particularly that which pertains to sexual health and the prevention and treatment of HIV and other STIs, also changes. Myths and misinformation are pervasive, which can lead to negative health outcomes (Martinez Perez et al., 2013).
- The adults providing the sexuality information have often not received any training, and instead, teach from their own biases rather than from facts.
- The information taught often reinforces harmful gender role stereotypes. It is clear that initiation practices are gendered, with the explicit goal

- of setting cisgender gender norms and keeping those norms in place. Many teachings provided during initiation rites are intended to perpetuate a dominant position for men and subordinate position for women, both in marriage and in the community (Kapungwe, 2003). Even those rites of passage that do not include early sexual initiation reinforce gender role stereotypes that encourage girls to be passive to learn to prioritize their future male partners' sexual pleasure and overall needs over their own. While every person has the right to express themselves in relationships in the way they wish, the rites that limit girls to playing only certain roles in society directly contradict a rights-based approach to gender equality (Ekine et al., 2013).
- There is no acknowledgment of LGBTQI+ youth. It is well-documented in the literature that the existing rites of passage assume that all young people are cisgender and heterosexual, or that they should be. Statistically speaking, this is impossible and as a result, the needs of young people who identify as LGBTQI+ are being ignored. This can have harmful effects on LGBTQI+ adolescents' emotional well-being and place them at increased risk for early pregnancy and HIV and other STIs.



SEXUAL INITIATION PRACTICES AS HUMAN RIGHTS VIOLATIONS

UNFPA (2019) has taken a strong stance on practices that have clearly been shown over the years to contribute to gender inequality and to reinforce gender norms that put girls and women at higher risk for violence. For example, restricting individuals to traditional gender roles can often result in harmful practices such as child and forced marriage, female genital mutilation and bias toward having and favouring male children. Even as there has been a greater focus on gender equity in ESA in recent years, the power structure in these countries is still patriarchal. The manner in which boys are socialized to behave reinforces the acquisition and guarding of physical and social power, while girls are socialized to be passive and accommodating. This tends to limit girls from exploring their potentials beyond expectations of them as wives and mothers (WLSA Malawi and SARDC WIDSAA, 2005; UNFPA, 2019).

Warria (2018) notes that fisi rituals are not always restricted to adolescence, and so girls and women can be compelled to endure this experience more than once in their lifetimes. This reinforces the vulnerability of girls and women at different times in their lives, particularly those living in rural areas. This practice is equated in the literature to sexual abuse of girls, as it "promotes sex with children, commercial sexual exploitation and paedophilia" (Warria, 2018). Some see these practices as "hazardous" to girls' and women's overall health and well-being, and therefore a violation of girls' and women's rights (Warria, 2018; WLSA Malawi and SARDC WIDSAA, 2005). The Malawi Human Rights Commission (2006) further states that chinamwali and chindakula also infringe upon the right of girls to be able to choose a sexual partner, and to be able to say whether and when someone can touch their bodies (Malawi Human Rights Commission, 2006). These practices normalize the objectification of girls.

The long-term emotional consequences of rape and sexual abuse are well-documented around the world (see, for example, Hillis, Mercy & Saul, 2017; Meinck, Cluver, Boyes et al., 2016; Kumar, et al., 2017). Violence can be perpetrated under the pretext of cultural activities but can also arise through ignorance about children's rights, or a hesitancy to report rape or incest (Warria, 2018; Kamlongera, 2007; WLSA Malawi and SARDC WIDSAA, 2005). A study commissioned by UNICEF found that cultural issues that contravene children's rights are widespread in Malawi, yet Malawi is a signatory to the United Nations Convention on the Rights of the Child (UNCRC 1989). It is clear that the three guiding principles of the UNCRC - i.e. the right to life, survival and development, the right to participate, and the best interests of the girl child - are infringed upon by the sexual cleansing of girls. Most researchers who have written about the fisi ritual agree that it is exploitative and disempowering to the girls who undergo it (Warria, 2018). Labial pulling is included in the World Health Organization's definition of female genital mutilation (WHO, 2008).

According to Plan International (N.D.), *chinamwali* is a harmful practice that is a significant contributor to child marriage. Child marriage, according to UNFPA (2019), affects girls much more than it does boys or children of other genders. It means girls are less likely to go to or complete school, which limits their futures along with their freedom. As a result, any practice that contributes to limiting girls' freedom and/or mobility should be reevaluated to better support the goals of gender equality.

There is not one adolescent rite of passage that does not endeavour to reinforce the gender role stereotypes that have reigned in each of the focus countries reviewed in this guidance document. All four countries have ratified the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW). Therefore, the practices that engender low self-esteem, physically harm the body of a young person of any gender, and/or reinforce harmful gender role stereotypes continue to contradict the charge of the CEDAW.

POLICIES CONNECTED TO ADOLESCENT INITIATION PRACTICES

There are numerous policies in existence in ESA that can serve as support for making changes to harmful practices taking place within adolescent initiation rites. All four of the priority countries have either ratified or adopted policies relating to youth rights and gender equality.

At the country level, all four priority countries have laws that are designed to protect adolescents from harmful cultural practices:

The **Eswatini** Child Welfare and Protection Act provides that a child has the right to be protected from any type of "torture or other cruel, inhuman or degrading treatment or punishment," including, "any cultural practice which dehumanizes or is injurious to the physical, psychological, emotional and mental well-being of a child" (UNFPA, 2018a).

In **Malawi**, "A child may not be subjected to a social or customary practice that is harmful to the health or general development of the child or be forced into marriage or be forced to be betrothed. Also, no person may commit, engage in, subject another person to, or encourage the commission of any harmful practice" (UNFPA, 2018a). The challenge with this statute is, of course, that what is considered "harmful" is subjective, particularly when referring to non-physical harms.

South Africa mandates that "no child may be subjected to social, cultural and religious practices that are harmful to his or her well-being." Not only is FGM illegal in South Africa, but the law also says that male circumcisions "may only be performed with the consent of the child after counselling." South Africa has also made virginity testing illegal (UNFPA, 2018a).

In Zambia, anyone "who conducts or causes to be conducted a harmful cultural practice on a child commits a felony. 'Harmful cultural practice' is construed to include sexual cleansing, FGM or an initiation ceremony that results in injury, the transmission of an infectious or lifethreatening disease or loss of life to a child but does not include circumcision of a male child" (UNFPA, 2018a). Policy change that comes at the country level still needs to trickle down to local communities, and therefore any changes need to have some kind of accountability measures attached to them. For example, even though Eswatini's Child Welfare and Protection Act was intended to end marriage between older men and young girls, the country's traditional leaders claim that they have not received any instructions to stop the practice (UNFPA, 2018a).

LIMITATIONS OF THE RESEARCH

As with any research, there are limitations to this literature review. A significant number of articles came from surveys of individuals living in communities in all four priority countries, and so much of the research is based on first-person accounts and observations or based on conversations with individuals who have experienced the various rites of passage. As UNFPA (2015) has stated, "assessing the validity of self-reports is a well-known problem in data collection, whether quantitative or qualitative. A social desirability bias is especially likely on survey questions about sexual behaviour."

This also means there is a range of accuracy of what is documented relating to which rites of passage are still being performed in the four countries, as well as to how they are performed (Banda & Agyapong, 2016; Leary, 2016). Some changes in initiation rites have been happening over the years, and some of the literature may not reflect the most current practices. In some communities, leaders maintain that initiation ceremonies are no longer being practised, or that some of the aspects that have received the greatest criticism, such as fisi and LME, have been discontinued. When speaking with community members, however, that is often discovered to be untrue (Kamlongera, 2007; Malawi Human Rights Commission, 2006). Because there has been a veil of secrecy surrounding adolescent rites of passage over the years, much of the literature is based on first-person accounts (Kamlongera, 2007), for which there are social consequences for the individuals who have chosen to speak out. As a result, the incidence and currency of whether practices are still being used, and to what extent, is unknown (Martinez Perez et al., 2016).

It is also important to note that sample sizes in the qualitative research were extremely small, and the research does not cover all communities (Pemba, 2012). In addition, there were often conflicting/contradictory qualitative responses, based on personal experiences (Siweya, Sodi & Douglas, 2018) and what people had heard, etc., due to taboos related to speaking openly about these rites of passage. While more research has included qualitative statements from individuals who have experienced these rites of passage, the majority of research is an intellectual discourse about the practices (Kamlongera, 2007). In some cases, the literature quotes professionals working at NGOs or CSOs in communities, whose anonymity was also retained, but not with any of the individuals who had gone through the initiation practices (Pemba, 2012).

Additional conflict relates to non-ESA journalists and other professionals reporting on practices and giving what could be perceived to be a distorted view of their cultural relevance when reporting on the potentially negative impacts of some rites. The most detailed research is a bit out of date, and therefore information about the full extent of all of these practices needs to be updated. Since generalization is challenging, the intention here is to summarize as much as possible the overall themes of the findings in order to make realistic, culturally humble recommendations. In addition, any policy changes need to consider the migrant and immigrant populations that may bring traditions with them that do not coincide with the cultural norms in a particular country.

"Since generalization is challenging, the intention here is to summarize as much as possible the overall themes of the findings in order to make realistic, culturally humble recommendations."

CONCLUSION

There is extensive research on adolescent rites of passage in East and Southern Africa, including the four priority countries: Eswatini, Malawi, South Africa and Zambia. The trends in the research reveal that while some harmful practices have been eliminated, too many still continue. It is intended that this literature review will help to inform recommendations for making changes to those harmful practices in ways that still respect positive cultural values and leadership within all four countries.

Not all rites of passage are human rights violations, and not all alternatives currently being proposed reinforce misogyny and gender inequality. In Eswatini, Kwakha Indvodza provides mentoring for boys and young men that discusses sexual rights and responsibilities, as well as gender equity. Their curriculum, Men of Tomorrow, emphasises the importance of giving and receiving consent, and discusses equality and respect in relationships. In addition, they run a two-night male-only, age-specific *Lihawu* Camp, which according to their website (https://www.kwakhaindvodza.com/*Lihawu*-male-mentoring-camp), is "a fun three-day camp, encouraging boys to grow into respectful, responsible and health conscious future leaders in Swaziland. *Lihawu* Camp uses a combination of traditional Bantu rite of passage ceremony and modern participatory and youth-friendly approaches to promote the Swazi cultural heritage of Ubuntu, male responsibility and health services uptake."

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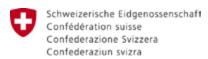
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