SOCIAL CULTURAL FACTORS IN HIV/AIDS TRANSMISSION AMONG WOMEN IN RWANDA. Case study of RUGALIKA sector in KAMONYI district

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DEDICATION

To all my family
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LIST OF ABREVIATIONS

HIV: Human Immune deficiency Virus

AIDS: Acquired Immune Deficiency Syndrome

UNAIDS: United Nations programme on AIDS

TRAC: Treatment and Research on AIDS Center.

P3: Primary 3

P6: Primary 6

S3: Senior 3

S6: Senior 6
ABSTRACT

This study examines the social cultural factors that influence HIV/AIDS transmission among women in RWANDA and especially in RUGALIKA sector. Some of those social cultural factors we can say marriage, polygamy, early marriage, poverty, religious beliefs, lack of access to productive resources and lack of education and training.

The objectives of the study were to identify the social cultural factors which influence in HIV transmission among women and the constraint of HIV/AIDS among women and to find out how those constraint can be overcome and also to identify the measures that could be take for more prevent the spread of HIV infection to the women and to the all people in general.

The research contains 5 chapters which are: 1st chapter: general conclusion; 2nd chapter: literature review; 3rd chapter: research methodology; 4th chapter: data analysis and interpretation and the 5th chapter is general conclusion and recommendation.

This research was conducted in RUGALIKA sector which has about 2990 women aged between 21-35 years old and thus a sample of 290 women was selected in different region of RUGALIKA sector.

After the interpretation of the findings; the most vulnerable group is the women aged between 31-35 years; the vulnerability is due to different factors but most of them we have: poverty issues, polygamy, lack of access to productive resources, lack of education and training, religious beliefs and we cannot forget the physiological factors.

After the genocide of 1994, Rwanda has known many orphans; and in RUGALIKA sector young women and girls are often to be sexual exploited in order to survive.
CHAPTER I: GENERAL INTRODUCTION

I.1. BACKGROUND OF THE PROBLEM

All cultures create a division of labor based on gender; gender and sexuality determine the extent to be vulnerable to HIV and the ability to access available prevention, treatment, care and other services. It is gender which encompasses all duties, rights and behaviors a culture considers appropriate for male and females, in social invention gender gives us a sense of personal identity as male or female.

Social cultural norms build notions of masculinity and feminity which in turn create unequal power relations between men and women. The social cultural factors in traditional beliefs and practices in the African society play a great role in determining the position of women and girl in society. Masculinity requires men to be more dominating, knowledgeable and experienced in life. This assumption puts many young men at risk of HIV infection as such cultural norms prevent them from seeking information or admitting their lack of knowledge about sex or methods of protection. The Rwandan culture allows a man to be a head of family where each proposition and rules to be followed are elaborated by him; the culture trained the girls to be good mothers, and housewives and were educated to be submissive, polite, and obedient and to respect all the man in general.

Many cultures in Africa allowed the girls to be married at age of 16 with a man who has wives even if he has over 4 wives. The polygamy in Rwanda is known for a longtime ago until today and the early marriage for a girl at 16 or less than sixteen years old caused the girl to be forced into having sexual intercourse with their husband usually much older than she can increase the young girls’ vulnerability to HIV.

1. www.icaso.org
Depending on the culture norms, the social structure shows that a man takes a primary responsibility and dominates in their households which encourage multiple sexual partners for men even he is married, while women tend to be faithfully\textsuperscript{2}.

The female genital cutting which was mostly practicable in Rwanda heightened the risk of HIV transmission. As the culture tends women to be faithfully and polite sometimes they have sexual intercourse without negotiating with the partner (husband) at what time and in which manner to do it, even if a woman is sick, she must respect the norms of culture that caused the violence against woman and girls ,including rape, female genital mutilation, early and forced marriage, violence related to commercial sexual exploitation, including trafficking and other forms of sexual violence can increase the vulnerability to HIV/AIDS. The man is more likely to refuse to use condom, they used to beat the women when they refuse to sleep with them (to have sex with them).Depending on social cultural norms, many men think that it is a wife’s duty to have a sex with her husband; because that is the main reason they come together. Violence at home is also directly and indirectly associated with men’s increased vulnerability to HIV. In our days violence or the fear of violence is also considered to be a barrier to women seeking HIV testing and for those who seek testing it acts as a barrier to disclosure of their HIV status to their partners\textsuperscript{3}. HIV/AIDS in developing countries including Rwanda is endemic and seriously needs to be reverted. The third demographic and health survey conducted in 2005 indicates that in Rwanda 3% of the people lives with HIV. The data shows that women are particularly vulnerable to HIV infection. Rwanda detected the first case of HIV on its territory more than two decades ago\textsuperscript{4}.

\textsuperscript{2} Gender, sexuality, rights and HIV P.11
\textsuperscript{3} Gender, sexuality, rights and HIV P.11
\textsuperscript{4} Anne-Emmanuelle calves in 1998
HIV/AIDS prevalence in Rwanda is at 3%, women and girl are the most vulnerable due to different cultures and background and many social cultural factors like;

- Marriage.
- Polygamy.
- Early marriage and pregnancies.
- Multiple sexual.
- Harmful culture and traditional practices.
- Violence against women.
- Stigma and Taboos.
- Religion.
- Poverty.
- Lack of access to productive resources.

These are the some of the factors that influence the transmission of HIV to the women and we will talk more about those social cultural factors in the next chapters. Many girls and women are vulnerable to HIV for many reasons. Like many girls whose genital tract is still not fully mature, they become infected with HIV during unprotected vaginal intercourse; in all over the world the domestic violence reduces women’s control over their exposure to HIV; obviously women are in poor position to question about the extramarital encounters, negotiate condom use or refuse to have sex which caused them to be infected with HIV\(^5\). Polygamy is much known as a factor which influences the transmission of HIV. A female genital cutting increases the HIV infection among girls and women\(^6\). Depending on Rwandan culture norms it is a taboo to talk especially about sex and sexual activities, and that acts as a barrier to seeking knowledge of HIV prevention and providing the treatment care. Religion is known as one factor among many others which influence HIV infection. Many religions beliefs condemn premarital sex, contraception including condom use and homosexuality.

\(^5\) UNAIDS.2000
\(^6\) Gender, sexuality, rights and HIV
In fact the sexuality and gender stereotypes constructed by religion can inhibit prevention efforts and increase vulnerability to HIV infection. Rwanda as a developing country, we can mention poverty as the main factor of HIV infection; poverty increases susceptibility to contracting HIV through several channels, including increased migration to urban areas, limited access to education and information related to HIV prevention. As a developing country, lack of education is much known for many people in Rwanda and great number is for the women so the women’s access to education and vocation training, and the sexuality division of labor that puts women in lower status jobs, increases women’s vulnerability to HIV. Women are vulnerable to HIV, sometimes it is social pressure to acquiesce to elders, and sometimes it is a combination of factors, as may be the case with older “sugar daddies” who offer schoolgirls gift or money for school fees in return for sex. But if the cultural norms have remained relatively stable through time, the same can not be for social and economic circumstances.

I.2 STATEMENT OF THE PROBLEM.

The social cultural norms and cultural practices are the main factors which can influence the transmission of HIV/AIDS among women. Those factors are different and very common depending on religion, human attitudes and the cultural values. The cultural norms allows the men to have sex any time they wish, what is different for the women, and according to the situation regarding the women in cultural norms, they have no right to negotiate the time to have sex with their partner(husband). The position of women in society, lack of access to education and training, poverty are considered as the main factors that influences the transmission of HIV/AIDS among women. Occasional sexual activity and multiple sexual partners both increase the risk of contracting HIV/AIDS. This study offers an incomparable window on the internal dynamic of social cultural factors that affects women’s lives.

7 UNAIDS.2000
I.3 OBJECTIVES OF THE STUDY

The main objective of the study is:

- To identify social cultural factors which facilitate HIV infection in women?
- To find out measures which may be taken to overcome the constraints of HIV/AIDS among women?

I.4 RESEARCH QUESTIONS

- What are the social cultural factors and cultural practices that influence the transmission of HIV/AIDS in women?
- What are the constraints of HIV/AIDS among the women?
- How can these constraints be overcome?

I.5 SIGNIFICANCE OF THE STUDY

The findings of this study will help: the policy maker, planners, administrator, teachers and non-governmental organization in Rwanda to understand and study the problems associated with HIV/AIDS transmission among the women in Rwanda caused by the social cultural factors. Those concerned with reducing poverty need to understand:

- How poverty enhances vulnerability to HIV infection.
- How poverty affects women and men, girls and boys differently.
- How HIV/AIDS enhances poverty and how this is experienced differently by boys and girls, men and women
- Etc
I.6 LIMITATION OF THE STUDY

While conducting a research on culture, it is not very easy to use all populations. And this research is conducted for the women who are married or widow with years between 21 and 35. as the culture are common for a whole country, this research can not take a whole atmosphere of a country, that is why a researcher is limited and conducted in RUGALIKA sector.

I.7 DEFINITION OF TERMS

- **Marriage**: The definition of marriage depends on not only the historical period, but also on the geographical location and the cultural traditions of the individuals involved in the marriage relationship. A general definition of marriage is that it is a social contract between two individuals that unites their lives legally, economically and emotionally\(^8\).

- **Polygamy**: An illegal practice of having more than one wife or husband during the same time, more precisely having more than two spouses at the same time. This is considered crime in most states and communities\(^9\).

- **Early marriage**: Early marriage refers to any form of marriage that takes place before a child has reached 18 years. In Rwanda it is under 21 years old\(^10\).

- **Gender-based Violence**: Any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UNESCO 1999 p.53)\(^11\).

“…Violence against women is one of the crucial social mechanisms by which women are force into a subordinate position compared with men” (UNESCO 1999 p.52).

\(^8\) www.marriage.about.com
\(^9\) www.dictionnaire.reverso.net
\(^10\) www.eenet.org
\(^11\) www.alrc.net
CHAPTER II: LITERATURE REVIEW

II.1 INTRODUCTION

Women and girls, particularly from poor communities are among those with enhanced vulnerability to HIV infection as a result of unequal gender relation and gender inequality. Gender norms that create an unequal balance of power between women and men are deeply rooted in the social cultural context of each society and are enforced by that society’s institutions, such as schools, workplaces, families and health systems\textsuperscript{12}.

Gender norms ascribe distinct productive and reproductive roles to men and women through social constructions of masculinity and femininity that vary by class, ethnicity, sexuality and age in every society; despite the existence of multiple masculinities and femininities, it is the dominant ideology that most greatly influences women’s and men’s attitudes and behavior\textsuperscript{13}. The implication of HIV/AIDS pandemic will affect women differently because of their gender roles. As girls will be at risk of infection because of entrenched social and economic vulnerability; as mothers they are blamed for infecting their babies; as care givers they bear the burden of supporting and caring for those infected. Many ill women may be forced to ignore their own needs so as to meet the needs of other family members\textsuperscript{14}

The International Council of AIDS Service Organization (ICASO) was of the view that vulnerability to HIV influenced by male dominance, and HIV and AIDS are both propelled and entrenched by gender inequality. The power underlying any sexual interaction, (heterosexual, homosexual or transgender) determines how sexuality is expressed and experienced. Power determines whose pleasure is given priority and when, how and with whom sex takes place.\textsuperscript{15} Their inability to negotiate safe sex and other social pressures becomes a critical channel of vulnerability for a number of married adolescent girls.

\textsuperscript{12} Wingood and diClemente.2000
\textsuperscript{13} Letia a. p.;sherí c.;rosemary c. v.;pamela l.taylor.(1999)
\textsuperscript{14} www.ncbi.nlm.nih.gov
\textsuperscript{15} sami tchack.1999.p60
According to the research made by UNAIDS (2005), gender and sexuality put women, men and sexual minorities at risk of HIV.

Vulnerability to HIV arises from a coming together of biological, structural (social cultural, economic and political) and infrastructural (programs and services) factors. Vulnerability refers to the likelihood of being exposed to HIV infection because of a number of factors or determinants in the external environment, some of which are beyond the control of person or particular social group. Biologically, women are more exposed to HIV infection than men. Male to female transmission of HIV is between two and four times more efficient than female to male\textsuperscript{16}. And the young women are especially vulnerable to HIV infection through sexual intercourse because the immature genital tract of girls is more likely to tear during sexual activity, creating a higher risk of HIV transmission\textsuperscript{17}. In addition, biological risk factors are crushed by social cultural economic and political factors. Gender and sexual inequalities also affected access to and interaction with health services, including those for HIV prevention, treatment and care. The implications of the HIV/AIDS pandemic will affect women differently because of their gender roles.

II.1.1 THE POSITION OF WOMEN IN SOCIETY

According to AVEGA AGAHOZO, In Rwandese tradition women live as man’s shadow; she is expected to be reserved and discrete. She does not have the right to give her opinion or questions concerning family life\textsuperscript{18}. It means that since her youth, the girl is expected to remain next to her mother to help in the domestic or agricultural work. Her education is essentially centered on agricultural work, her education is essentially centered on qualities of a good wife, what must be pleasing to her husband at all levels and more especially sexually. It is hard to understand fully the position of women without referring to the culture from which it emanates; there is no state in the world that considered women equal to men. From time immemorial, women have been considered an inferior sex.

\textsuperscript{16} UNAIDS.2005  
\textsuperscript{17} idem  
\textsuperscript{18} Avega Agahozo .1999.p35
In many countries of Africa women have been excluded in the decision making process affect their lives, their families and their communities, accepting social attitudes and expectations with resignation and surrender\textsuperscript{19}.

It has been known that the education of boys is seen as much more important than that of girls. For a number of poor families, the potential rewards of education daughters are too far off and therefore their education is not recognized as an investment. Families perceive that girl’s education will only benefit her husband’s household, and not her parents. In some cases girls are not even allowed to go to school at all, because an education is perceived as unnecessary for becoming wives or mothers\textsuperscript{20}. This shows us the position of women in society and their position in their families, and in our days the position of women in different society has changed to good perception and in this days the government has taken the good measures regarding the women and to help them not to be ignored or inferior person in the society just the government is trying to help the girls to attend and to continue their studies. Education looks to be the only hope for women to make a positive change in their lives whereas men are free to go into business, women are not as free to do so.

II.1.2 WHAT MAKES WOMEN VULNERABLE TO HIV/AIDS

According to the research made by UNAIDS (2005), many factors and forces exist that restrict people’s autonomy and leave them particularly exposed to HIV infection or vulnerability to needless suffering once they are infected.

Intolerance of racial, religious or sexual minorities, discrimination against people with known or suspected HIV infection, lower status of women; abuse of power by older, lack of care and support for those infected or affected; poverty or trafficking that leads to prostitution; domestic violence and rape; military conflict and labor migration which split up families, the list is a long one and varies from place to place.

\textsuperscript{19} Leticia a. p; sheric; rosemary c. v. 1999
\textsuperscript{20} www.eenet.org
In nutshell many factors influencing-the root causes of HIV pandemic can be understood within the universal principles of human rights. We can say that vulnerability to HIV/AIDS is often engendered by a lack of respect for the rights of women and children, the right to information and education, freedom of expression and association, the rights to liberty and security, freedom from treatment and right to privacy and confidentiality.

II.1.3 WOMEN VULNERABLE FOR MANY REASONS

Married girls have higher levels of sexual activity than their sexually active unmarried peers, have limited ability to negotiate condom use and have low power to refuse sex from their partner\(^{21}\). Additional health risks are brought upon married girls by the pressure on them to become pregnant. Women are more biologically more susceptible to HIV infection than men, but young women and girls are especially vulnerable because their immature genital tracts are not yet fully developed\(^{22}\). Women of all ages are more likely than men to become infected with HIV during unprotected vaginal intercourse, this vulnerability is especially marked in women and girls whose genital tract is still not fully mature\(^{23}\).

It is the combination of biological, cultural and economic factors that make women and young girls’ particularly vulnerable to HIV infection. As we know the girls are more likely than boys to be raped or to be forced into sexual intercourse by someone older, stronger or richer. We can not forget the case of older “sugar daddies” who offer schoolgirls gifts or money for school fees in return for sex. In the era of AIDS, the consequences for young girls can be disastrous and the spread of HIV infection is at high level depending on many factors and many circumstances.

\(^{21}\) www.eenet.org  
\(^{22}\) UNAIDS.2005  
\(^{23}\) UNAIDS .2000
II.2 SOCIAL CULTURAL FACTORS IN HIV TRANSMISSION

II.2.1. INTRODUCTION

According to International Council of AIDS Service Organization (ICASO, 2000) the degree which women and men are able to control the various aspects of their sexual lives (their ability to negotiate the timing of sex, conditions under which it takes place, and the use of condoms), plays a critical role in determining their vulnerability to HIV infection. Women determine and reinforce themselves through traditional practices such as wife sharing, widowhood relates rituals, and early marriage, female genital mutilation and the condoning of gender based violence.

These cultural practices, values, norms, and traditions have strong influences on the visible aspects of individual behaviors and are important determinants of men’s and women’s vulnerability to HIV \(^{24}\).

Personal risk of contracting HIV is determined by numerous social and cultural factors that shape gender and sexuality perceptions, attitudes and behaviors. Gender norms are deeply rooted in the social cultural and practices. In some culture motherhood is a key aspect of femininity. The use of contraceptives as a method that prevent pregnancy and HIV, present complexes and often impossible challenges for women and men in balancing their desire against HIV prevention. However, there are a number of social cultural issues around early marriage, particularly those related to gender discrimination and human rights violations which make married girls vulnerable to social and economic poverty \(^{25}\). Various social and cultural traditions reinforce vulnerability to HIV. These are examined in the context of the following cultural norms and practices.

\(^{24}\) UNAIDS.2000

II.2.2 MARRIAGE

Often girls are under pressure to prove their fertility and acquire status within the family. According to Clack (2002), HIV/AIDS in sub-Saharan Africa reaffirms that for many women, marriage equates the end of condom use and the increase in sexual activity. Married girls are bound to have more frequent sexual activity than their unmarried counterparts and are less likely to have the power to be able to control the women and how of sex. Marriage, which greatly increases women’s sexual exposure, has in itself dramatic rise in the frequency of unprotected sex after marriage is driven by the implications of infidelity or distrust associated with certain forms of contraception such as condom, a strong desire to become pregnant, and imbalance in gender power relations. Consequently, parents are unable to talk to their daughters before their marriages about sexual matters and sexual relationships.

This lack of knowledge and informed discussion has also led to the spread of HIV. Women have increased inability to negotiate safer sex. In spite of having knowledge of their extra marital sexual interactions, women are often unable to protect themselves due to lack of power within relationships created by culture, economic and emotional dependence.

II.2.3 POLYGAMY

The polygamy was considered by some people as cultural practice value, the men considered the polygamy as something compulsory in society. In general the polygamy is known in rural areas, poor areas where economy, social and cultural level are modesty. The traditional practice of polygamy, which is legally sanctioned in some parts of the world, allows husband to have more than one wife. Polygamy operates to create concurrent sexual networks within marriage between multiple wives and their husband, and in addition to any extra marital sexual contacts the spouse may have.

26 www.eenet.org
28 www.icaso.org
29 www.eenet.org
30 Sami tchak.1999
Direct sexual transmission of HIV can occur in these concurrent sexual networks where the virus is introduced through the spouses’ extra-marital sexual contacts or where a wife who is already HIV positive enters the polygamy union\textsuperscript{31}. The place of women in society increases the risk of HIV transmission by undermining women’s ability to negotiate condom use, to insist on partner fidelity becomes further complicated in polygamous households given that multiple wives are often reliant on one husband for material survival. The economic hardship, lack of knowledge and lack of emotional attention associated with polygamy can lead to engage in extramarital sexual relationships.

**II.2.4 EARLY MARRIAGE**

Early marriage refers to any form of marriage that takes place before a child has reached 18 years\textsuperscript{32}. The majority of sexual active girls aged 15-19 in developing countries are married. Early marriage severely increases young girls’ vulnerability to HIV as they are most likely to be forced into having sexual intercourse with their (usually much older) husband. Young girls have softer vaginal membranes which are more prone to tear, especially on coercion, making them susceptible to HIV infection. Older husbands are more likely to be sexually experienced and HIV infected.\textsuperscript{33}

Child marriage is a violation of human rights as it violates the right to freedom and growth of children, example: a testimony of a girl: I hate early marriage. I was married at an early age and my in-law forced me to sleep with my husband and he made me suffer all night. After that, whenever day becomes night, I get worried thinking that it will be like that .that is what I hate most” –an 11 year-old girl from Amhara, Ethiopia, married at age 5; first had sex at age 9. Gender inequality is both a cause and a consequence of child marriage\textsuperscript{34}.

\textsuperscript{31} UNAIDS.2005
\textsuperscript{32} www.eenet.org
\textsuperscript{33} UNAIDS.2005.P10
\textsuperscript{34} www.icaso.org
II.2.5 MULTIPLE SEXUAL PARTNERS

social structure where take primary responsibility and dominate in their households encourage multiple sexual partners for men inside and outside of marriage, while women are required to be faithful and monogamous, such socio-cultural practices and norms make man and their partners, especially vulnerable to HIV\textsuperscript{35}. In a study in Zimbabwe, one in eight married men said they had casual sex (more than one sexual partner in the previous twelve months), but only one in one hundred women said they had sex outside marriage\textsuperscript{36}. In these circumstances marriage puts women at the greatest risk of HIV infection instead of protecting them. Further, masculinity demands that men be sexual risk-takers, with lack of knowledge of HIV and reluctance to use condoms, these practices put men and female partners at risk of HIV. In this context, the dangers of multiple sexual partners relates to the fact that if one person in a “circle” of partners gets infected with HIV, there is a very high likelihood that all persons involved will be infected.

II.2.6 HARMFUL CULTURAL AND TRADITIONAL PRACTICES

In different societies, cultural practices and traditions abound that were adaptive and fulfilled important functions in the past that may, today, carry serious health and welfare risks\textsuperscript{37}. With regard to HIV transmission, practices and traditions that are risky include; the practice of dry sex, polygamy in many countries, female genital cutting, etc. Harmful cultural practices such as widowhood, related rituals, sexual cleansing and female genital cutting, suffering permanent and irreversible health damage; heighten the risk of HIV transmission\textsuperscript{38}. These practices are often justified in the name of cultural values and traditions. No doubt cultural values and traditions are important to community identities, but it is important to realize that they cannot be continued at the cost of the right to health of the individual. This could be either for cultural, religious,
or other reasons. Female genital cutting places girls and women at increases risk of HIV infection through several routes. Firstly, the use of unsterilized instruments, such as razors or knives, secondly, female genital mutilation renders the female genital more likely to tear intercourse.

II.2.7 GENDER BASED VIOLENCE

Acts of violence greatly increase vulnerability to HIV, especially for women and marginalized groups. Within the household this can include battering by an intimate partner, marital rape and sexual abuse. Violence outside the home can include rape, sexual abuse, sexual harassment and assault. Various social, cultural and religious norms produce and reinforce gender inequality and the stereotypical gender roles that underpin 40. Gender based violence is a key factor in increasing risk of contracting HIV. Where sexual violence occurs in girls and young women, risk of transmission is likely to be higher because girl ‘vaginal’ tracts are immature and tear easily during sexual intercourse.

Sexual violence can also result in indirect transmission of HIV infection among women or men. Violence or the threat of violence affects the individual’s power and ability to negotiate the conditions of sexual intercourse, especially condom use. More than half of the women surveyed in Kenya who knew they were infected with HIV said that they did not disclose their status to their partners because they feared violence or abandonment 41. This creates an atmosphere of fear where implementation of sustained HIV risk reduction programs is very difficult. If not impossible. However, younger girls may further be at risk of abuse and violence as, unable to negotiate condom use, they can increase their vulnerability to sexually transmitted infection such as HIV/AIDS.

39 www.icaso.org
40 UNAIDS.2000
41 UNAIDS.2005
II.2.8 STIGMA AND TABOOS

Cultural stigma and taboos (social bans), especially related to sex and sexual activities, increase women’s vulnerability to HIV infection. The taboos associated with sex and knowledge of sex act as barriers to seeking knowledge of prevention and to providing the treatment care and support by those infected and affected by HIV\textsuperscript{42}. There should be no doubt that the stigma and discrimination associated with HIV/AIDS are one of the powerful forces that increases the frequency of that pandemic. The greatest fear that all people have about the disease is not death from it but the marking of person as an outcast in the society\textsuperscript{43}.

In general discussion on sexuality are considered taboos in a number of communities and girl brides often lack knowledge about their bodies, sex education and information on sexual relations and reproduction. Example of man from Ethiopia: “it (HIV) might be transmitted through breathing, we do not know. So being careful is necessary: avoiding eating food, coming from patient’s home, not sharing clothes and not drinking with the glass that the patient used. This is what I think”\textsuperscript{44}.

II.2.9 RELIGION

The majority of religiously tailored belief systems condemn premarital sex, contraception including condom use, and homosexuality. Some religions also advocate a sub massive role for women, foster gender inequality in marital relations, and promote women’s ignorance in sexual matters as a symbol of purity. The sexuality and gender stereotypes constructed by religion can inhibit prevention efforts and increases vulnerability to HIV infection\textsuperscript{45}.

\textsuperscript{42} www.icaso.org
\textsuperscript{43} www.gurtong.com
\textsuperscript{44} www.icaso.org
\textsuperscript{45} UNAIDS.2005
HIV vulnerability caused by religious beliefs and practices is the result of religious institutions condemnation of HIV infection as sinful. Such religious judgment plays a significant role in generating HIV and AIDS related stigma which increases vulnerability. Research has shown that religion also influence men’s and women’s exposure to HIV prevention message, knowledge and perception of risk, and the practice of prevention. According to RWEMBEHO, Some churches remain conservative influenced by traditional cultural norms and values to do with what it means to be a good Christian. It is ridiculous when in the work place or public life the gospel is safe sex through condom use and then when you got to church one Sunday you are branded promiscuous for just accepting a gospel that will ultimately save your life and a whole generation. Women have been found to be disadvantaged in seeking information about HIV/AIDS due to their religious beliefs. Religions advocating against condom use pose a serious challenge to prevention the spread of HIV in the communities where they operate

II.2.10 POVERTY

Poverty impacts men and women differently and is a key factor leading to behaviors that exposure people to the risk of HIV infections. Poverty increases vulnerability to contracting HIV through several channels, including increased migration to urban areas; limited access to education and information; sexual exploitation; and gender inequality.

The risk of HIV infection is also known to be higher among the poorest and most powerless in society, and as such married adolescent girls, who tend to have much older husband, will be more at risk of infection than unmarried girls.

Poverty increases the risk of HIV transmission bye limiting access to information related to HIV prevention. Data available from various countries show that man and women of high economic status know more about HIV prevention than those economically worse off.

46 SAMI TCHAK.1999.P30
47 The new times. no :1583; 9july2008
Poverty can also pressure women and men to exchange sex for food or other material favors in order to ensure daily survival for themselves and their families\textsuperscript{49}. Girls and young women who are able to escape from early marriage are often forced by poverty to go into commercial sex work to survive\textsuperscript{50}.

So it increases the pressure to resort to higher risk with older “sugar daddies” who offer the illusion of material security. As more women and girls take the decision to be to the streets as their only means of survival.

\textbf{II.2.11 LACK OF ACCESS TO PRODUCTIVE RESOURCES OR INCOME}

Women are among those with less access to land, while accounting for a large share in small-scale food production. Land is a source of food, shelter, social status and power. Land is also a source of employment opportunities. Hence lack of access to this primary resource is largely responsible for the poverty that haunts the poor, particularly the women\textsuperscript{51}. Laws and practices based on gender norms greatly limit women’s access to productive resources such as land, property, and credit. These practices secure women’s financial, material, and social dependence on men. Research has shown that women who raise the issue of condom use with the men on whom they are economically dependent risk violent conflict, loss of support, or even abandonment. Dependent women are hesitant to leave risky relationships as they fear terrible economic consequences\textsuperscript{52}.

Because women do not have equal rights to property ownership, widowhood usually means loss of the right of access to field where their labor has been invested, and to their homes\textsuperscript{53}. Lacking access to land property and income, women are more likely to sell or exchange sex in unsafe ways for money, goods and favors.

\textsuperscript{49} UNAIDS.2005
\textsuperscript{50} www.eenet.org
\textsuperscript{51} www.allafrica.com
\textsuperscript{52} www.icaso.org
\textsuperscript{53} www.allafrica.org
Sex work offers not only a means of survival for some but a route out of poverty for others. Consequently, there is a need to provide and enhance access to HIV prevention, treatment, care and support for all sex workers, and to provide opportunities for sex workers who wish to change their situation to move on within and/or from sex work.

II.2.12 LACK OF EDUCATION AND TRAINING

Gender norms that limit women’s access to educational and vocational training, and the sexual division of labor that puts women in lower status, jobs; Increase women’s vulnerability to HIV infection. A close review of the evidence on the links between poverty and the pressure to marry early reveals that in wealthier countries, where girls have equitable access to education, further training and other employment opportunities, early marriage are rare. The vast majority of women are employed in low paying, seasonal, and insecure jobs in the informal and semi-formal sectors of the labor market. An unequal standard in employment and channeling the majority of women into low status occupations perpetuates and reinforces their inferior status in economic relations. International human rights conventions provide for governments to address these discriminatory practices. These circumstances also make it more likely that women will augment their income by selling sex, and without access to legal, social and HIV prevention services, this limit their ability to negotiate safer sex.

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54 Gender, Sexuality, Rights And HIV.2005.P18
55 www.eenet.org
56 Gender, Sexuality, Rights And HIV.2005.P19
This pie charts help to understand how the woman is a most group vulnerable to HIV infection due to different factors as we have discussed them. Looking at the pie charts it indicates how the frequencies of contamination was highly increased in 2003 and it begin to decrease in 2005 but the percentage was still at high level; 5% of women infected in 2005 is a high number; these all social cultural factors discussed above have influenced in increment of that number.

This pie chart shows us the number of women tested for HIV infection during 5 years since 2003 to 2007, and how the frequencies of infection were increasing. Many factors cause the women to be most vulnerable group for HIV infection
CHAPTER III: METHODOLOGY

III.1. INTRODUCTION

This study used data collected from the women aged between 21-35 years to establish the social factors that influence the transmission of HIV/AIDS. A number of techniques were utilised as indicated below.

III.1.1 QUALITATIVE METHOD

This method is used to describe the quality of factors in size and appearance. This method helps the researcher to intimate with the researched situational constraints, to find out the type of information related to the feelings, perceptions, intentions and thoughts of people like households, and family keeper and the local authority with regarding to social cultural factors of gender issues, this method help the researcher to give meaning to the perception of behaviour.

III.1.2 SOURCE OF DATA

III.1.2.1 PRIMARY DATA

Primary data was collected from the field using questionnaires and interviews. Answers which were written on questionnaires given by respondents and also the answers obtained using the interviews at the field were the main source of the primary data.

III.1.2.2 SECONDARY DATA

Secondary data was collected from documents like books, newspapers, survey and on the internet. The data was analysed with references to the research questions guiding the study.
III.1.3 LOCATION OF THE STUDY

The study was conducted in RUGALIKA sector, in KAMONYI district in south province.

III.1.4 STUDY POPULATION

RUGALIKA sector has a total population of 24,728 and this research was based on the group of women aged between 21-35 years. This is regarded as the most vulnerable group with regard to HIV infection.

III.1.5 POPULATION AND SAMPLE

RUGALIKA sector has about 2900 women aged between 21-35 years old and it is not easy for a researcher to study the whole population; when conducting research, it is important therefore to use a sample of the population as opposed to using the entire population. Random sampling was used means that the probability of being selected into the sample is “known” and equal for all members of the population.

Thus a sample of 290 women was selected in different region of RUGALIKA sector.

III.2 TECHNIQUES OF DATA COLLECTION

The tools of data collection are various such as interview, questionnaire, documents analysis, and internet. And the data collection depends on the researcher who can decide to use more than one method in data collection. And in this research the interviews, research questionnaires, are the basic methods to be used.

III.2.1 Interviews

About 100 women were interviewed one by one in different parts of RUGALIKA. Interviews have been used as the conversation between the research and the respondent in order to have more information and the additional information. That is why using an interview is a good way used by a researcher to collect the data. The questions were different and arranged systematically so that a respondent has been interested to respond. As well as conducting a research on culture an interview with an individual
woman was used than using a closed group of respondent, because many questions to be asked were focused on personal answers.

III.2.2 Questionnaire

About 190 questionnaires were given to the women in different parts of RUGALIKA sector. In order to obtain the view and opinions of individual responses, a researcher has elaborated the questions where the answers section required putting a sign at a relative answer according to responder and filling in the provided blank spaces according to one’s view. Questionnaires were written in the simple language that every respondent were able to understand. The questions were divided in two parts that is structured and unstructured questions but every respondent is required to fill in the blank space.

The validity of questionnaire was to get the best information and as nearly as possible, the data gathering should respond to the research questions.

III.3 DATA PROCESSING AND INTERPRETATION

In interpreting the data found on field many methods have been used, as classifying the classifying the answers to bring out the aim of answering the research questions stated in the study, and more to differentiate the answers given by respondent based on their understanding and their opinion.

The classification of those answers given by various responder through questionnaire and interviews have been used in determining the main and common social cultural factors which can influence in HIV/AIDS transmission among women. The quantitative analysis has helped in interpreting the data found on field. And the pie charts (figures) are the main method to be used in this research in order to differentiate the percentage of frequencies for the given set of responses calculated and set of responses that had a highest frequency (percentage) for easily analyse and interpreting the feelings.
III.4 LIMITATION OF THE RESEARCH

In collection of data, various problems were encountered:

- In terms of time taken to fill questionnaires there was a problem because respondent took more time to answer them and were careless to hand them in time. Data collection through questionnaires took longer time than anticipated in.

- The responder kept the questionnaires for a long time and some misplaced them and had to be given others.

- Time and resources were spent on translation of questionnaires for those who do not understand English and those who do not know to read and to write.

- The budget allocated to the research work was enough and limited compared to the cost incurred.

- The time available for research was so limited.

III.5 SUMMARY

This chapter of research methodology has used questionnaires and interview as the main method to collect the data. And some of those data have been found using the documents and the findings at the field, when conducting a research, we have meet with some problems like lack of knowledge for the respondent, the respondent who refused to answer the questionnaire and stigma for some respondent who do not want to say the reality of things.
CHAPTER IV: DATA ANALYSIS AND INTERPRETATION

IV.1. INTRODUCTION

The main points of this chapter are data analysis and interpretation; with the aim of answering the research questions of the study.

IV.2. DATA ANALYSIS

IV.2.1 Age of respondents

Table 1: The age of respondents

<table>
<thead>
<tr>
<th>No</th>
<th>Age</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>21-25</td>
<td>83</td>
<td>29</td>
</tr>
<tr>
<td>2</td>
<td>26-30</td>
<td>75</td>
<td>26</td>
</tr>
<tr>
<td>3</td>
<td>31-35</td>
<td>132</td>
<td>45</td>
</tr>
<tr>
<td>Total</td>
<td>-</td>
<td>290</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data

From table 1, as it is shown by primary data the dominant age of respondent group are between 31-35 with a great percentage of 45% at the second place there is a group of women aged between 21-25 with a percentage of 29% and lastly there is a group of women aged between 26-30 with a percentage of 26%. The highest percentage is between 31 and 35 years old and this is because the respondents are more women found in their homes.
IV.2.2 Qualification of respondent

Table 2: qualification of respondent

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequencies</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No level</td>
<td>64</td>
<td>22</td>
</tr>
<tr>
<td>With p3</td>
<td>58</td>
<td>20</td>
</tr>
<tr>
<td>With p6</td>
<td>156</td>
<td>54</td>
</tr>
<tr>
<td>With s3</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>With s6</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>290</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data

In the table 2 above, it is clearly evident that the majority of the respondent, about 54% have a minimum of 6 years in primary school, 22% have no reached the school, 20% have 3 years in primary, 3% have 3 years of secondary school and 1% have 6 years of secondary school. The level of education assisted to assess the relevancy and reliability of the respondents to questions. The qualification of respondent in education helped to know which the group of women likely vulnerable depend on their qualification background in education.

IV.2.3 Socio-cultural factors that influence HIV transmission among women.

Regarding on cultural norms there are many social cultural practices and factors that can influence in HIV/AIDS transmission among women. This question was asked to find out whether there are social cultural factors or practices that affect women and girls
and the maximum of respondent were agreeing that there are those social cultural factors.

With giving their attitudes, girls and women are facing with the responsibilities of being the household and family keeper.

Table 2. The social and cultural practices that influence HIV/AIDS transmission.

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequencies</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. marriage</td>
<td>200</td>
<td>69</td>
</tr>
<tr>
<td>2. polygamy</td>
<td>290</td>
<td>100</td>
</tr>
<tr>
<td>3. early marriage</td>
<td>120</td>
<td>41</td>
</tr>
<tr>
<td>4. multiple sexual partners</td>
<td>290</td>
<td>100</td>
</tr>
<tr>
<td>5. female genital cutting</td>
<td>160</td>
<td>55</td>
</tr>
<tr>
<td>6. Gender based violence</td>
<td>290</td>
<td>100</td>
</tr>
<tr>
<td>7. stigma and taboos</td>
<td>290</td>
<td>100</td>
</tr>
<tr>
<td>8. religion</td>
<td>180</td>
<td>62</td>
</tr>
<tr>
<td>9. poverty</td>
<td>290</td>
<td>100</td>
</tr>
<tr>
<td>10. lack of education and training</td>
<td>290</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table presents the data from different respondents on what they consider to be the social cultural factors that influence HIV transmission among women in RWANDA, especially in RUGALIKA sector. What is clear is that about 100% of the respondents know that polygamy, multiple sexual partners, Gender based violence, stigma and taboos, poverty and lack of education and training are the major social cultural practices and norms that affect women and girls in general. About 69% of
respondent were agreeing that marriage is one of factors that influence HIV transmission among women, about 41% were agreeing that early marriage contribute indirectly in HIV transmission, about 55% were agreeing that female genital cutting (gukuna) is a cultural practice which facilitates HIV infection among women and about 62% said that religion is also a factor in HIV transmission among women in RUGALIKA sector.

a) Marriage

After the findings, marriage is not seen by all respondents as a factor of HIV transmission among women while a great number is the young women infected with HIV and a number of young women infected is different from a number of girls infected. And a simple question can be asked “why the young women are more vulnerable to HIV infection?”. In Rugalika sector about 99 young women are infected in total of 2990 women aged between 21-35 years old, it means that 3.3% is infected with HIV; the causes of that HIV infection among young women are various like: violence against women, stigma, to have multiple sexual partners, unfaithful for married couple and biologically status (vagina) which facilitate the HIV transmission to the women than to the men. After the findings found on the field and with secondary data used in this research, the marriage is taken as a factor of HIV transmission among women because many of women are more likely infected by their husband who more cheating their partner (women) and then the fact that more women have the ability to sell their body in exchange of money so that they had the ability to feed their family,
Fig. 2. Number of women infected with HIV
Source: labo kigese

b) Polygamy

For a long time, a Rwandan society has known polygamy as a cultural value and until today the polygamy is very practicable even if it is illegal. Looking at a census done in 2005, shows that 52% are the girls and women against 48% of the men. And in RUGALIKA sector the girls and women count about 16349 in total of 24728 of all population, it means that 66.11% is the girls and women.57

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57 Source: labo KIGESE
**Fig. 3 Percentage of men and women in Rugarika Sector**

Source: lab KIGESE

This chart shows us that the polygamy is practicable even if it is illegal so that 33.8% boys and men satisfy the sexual needs of 66.1% of the girls and women. Polygamy is indirectly known in RUGALIKA sector, because of the great number of girls and women who wished to be married and they prefer to satisfy their sexual needs by having sex with different husband (men), and this causes that many women are facing with HIV infection than men.

**c) Early marriage**

It is much known in Rwandan society and in many regions of Africa to marry a young girl at age of 16 or under. This factor it is not very known by many respondents as one factor which influences the HIV transmission among women and girls. Some of them have mentioned it as a latest factor of HIV infection. And as it has been shown by many researchers, the vulnerability of girls and young women is due to the immaturity of the vagina and their vagina liquid which can contain a virus for along time and the contamination of men to women is 2.4 times to the opposite. Early marriage increases the girls and young women’s vulnerability to HIV as they are likely forced to have sex with their partners sometimes much older than them. In RUGALIKA sector, by using an interview as one method to collect data, it was discovered that many young women aged between 21-35 years old have more than 3 children, which means that they were prematurely pregnant. The act of being married earlier caused to the girl to be infected with HIV due to the immaturity of vagina.

**d) Multiple sexual partners**

Logically, multiple sexual partners are a main factor which increases the spread of HIV infection. Respondents indicated that many young girls have more than 2 children from different husband (men). This means that those young girls are more exposed to HIV infection because they have sex with different partners and without using condom. It is

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58 Le sida au feminin. 2001. P14
known that the unfaithful of a couple married is more likely to be a cause of HIV transmission among the family, which increases the frequencies of infection among the people.

e) Female genital cutting

It was a cultural value and tradition, after the findings of this study, some respondent has mention that those cultural practices are not yet practicable in Rwandan society particularly in RUGALIKA sector but they added that if it is still practicable in other some parts of the country it can increase the vulnerability of girls and young women to HIV infection due to useful of unsterilize instruments.

Those useful of unsterilise materials which easily transmit the HIV infection to the women. So this cultural factor is known as a factor of transmission of HIV infection to the girls and young women.

f) Gender based violence

Almost in all societies, they are gender based violence even if it is done in indirect ways and manners for the married couple. In RUGALIKA sector, the violence is very common in many families, where the women have no control over the timing of sexual intercourse. In sexual violence the vulnerability to HIV infection depends upon the degree of immaturity of vagina which tears easily during sexual intercourse. In that sector many women are beaten due to the fact that they refuse to have sex with their husband while it is known in Rwandan culture that it is a wife’s duty to have sex with their husband because that is the main reason she come together. This shows that the violence is a key factor of HIV infection to the women.

g) Stigma and taboos

In that sector, a 100% of the respondents were agreeing that the young women and girls have the low capacity to negotiate the use of condom with their partners which increase the vulnerability of HIV/AIDS to the women. The young girls fear that their friends (partners) will end hate them if they refuse to have sex with them. In Rwandan culture it
is a taboo to tell to the young children about their body, something related to their sex; those cultural values which are taken as a taboo influence the HIV infection among young girls because they can not negotiate and say about the good manner to prevent themselves.

As it is said in a Rwandan proverb “isoni zirisha uburozi” which means “with stigma a people can eat the poison” and this proverb show us that a stigma can influence HIV infection to the girls and women. The fear of being hated by their partners or their boy friends, lack of access to information, lack of access to productive resources make the girls and young women to be much vulnerable for HIV infection.

**h) Religion**

About 62% of all respondents were agreed that some religions are been considered as a factor of HIV infection; among those religions, there is Islam like a religion which allows the polygamy but indirectly, and the protestant which can not allow their Christian to use a condom as one way of preventing to HIV infection; the religions which are against the condom use make a serious challenge to preventing the spread of HIV infection. As it has said by Rwembeho, “every time as a Christian, I hear the church hesitant to apply all means that would help people from catching the HIV virus, including use of condoms, I shudder”

**i) Poverty**

100% of all respondent put poverty at the first point as a main factor of HIV infection to the girls and women. Many countries of sub-Saharan Africa are developing country and poverty is a key factor leading to expose girls and women of RUGALIKA sector to the risk of HIV infection, the fact that many girls are orphaned, they are usually exposed to sexual activities for more surviving and many rich husband known at the nick name of “sugar daddies” they are often offer money and some materials to the girls and young women in exchange of having sex; and many girls have preferred to be at the street and selling their body as their only way of surviving.

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**j) Lack of education and training**

About a 100% of respondents, show that the girls and young women are more vulnerable to HIV infection because of lack to education and training and lack of access to productive resources.

Many girls and young women in RUGALIKA sector they are not aware about the prevention of HIV infection and lack of training to productive projects and productive activities influence the girls and young women to prostitution for surviving.

**4.3 SUMMARY**

This chapter was mainly to report on the findings from the field on social cultural factors that influence HIV transmission among women in RWANDA. What emerged from both qualitative and quantitative data gathered shows that culture, poverty issues, polygamy, lack of access to productive resources, lack of education and training, and religious beliefs are more influencing all other factors like political factors, economic factors and physiological factors in HIV transmission among women in RUGALIKA sector. It was also found out that a number of measures have been put in place by government and institutional levels to address the issues of social cultural factors.
CHAPTER V: GENERAL CONCLUSION

V.1 GENERAL CONCLUSION

In most sub-Saharan African countries women and young girls are more vulnerable to HIV infection because of economic and social inequalities that diminish women’s ability to make choices that promote health status.

In many instances, girls are forced to drop out of school and are deprived of their right to basic education; women and young girls are also subject to pressure to provide for their families.

Girls and Young women are more facing with HIV infection in sector of RUGALIKA in KAMONYI district where about 2990 women aged between 21-35 years old; 99 women among them have been infected with HIV that means that 3.3% have HIV infection. And that number is at high level in that sector.

All social cultural factors said in chapter II, are mainly responsible factors in transmission of HIV infection among women in that sector and in a whole country in general. As it has shown by all respondent, gender based violence and poverty are increasingly the most significant risk for HIV transmission among women, it means that violent sex, poverty are the main cause in HIV transmission among women, in that sector. Women are biologically facing with HIV infection, but young women and girls are especially more vulnerable because their immature genital track are not yet fully developed that is why a researcher has interested for the group aged between 21-35 years old.

For a long time ago the society has taken the girls as useless in terms of decision making. Looking at the answers given by the respondents for all different ages, they argued that the poverty is a key element of HIV infection for the girls even for the young women, means that poverty and lack of access to productive resources put them at great risk of sexual exploitation. After genocide of 1994, Rwanda has known many

60 .source : labo of KIGESE
orphans and in RUGALIKA sector young women and girls who are orphaned are often to be sexually exploited in order to survive. The church (religion) has been found on the wrong history during colonialism, recently during the genocide and so can not afford once again to be on the wrong foot in the HIV/aids debate. A church is influential and can play a decisive role in stopping the spread of the HIV infection without it being part of the problem; the war against the spread of HIV infection can only be won bye the church and our government working together.

Religion as a social determinant of vulnerability has great potential for prevention HIV and reducing HIV and AIDS related stigma. Because of the influence religious leaders have on the community, they can play a significant role in behaviour change interventions, including the promotion of condom use, to reduce HIV transmission and de-stigmatized HIV and AIDS.

V.2 RECOMMENDATIONS

As well as the Rwandan government is trying to promote the girls’ education and the training; the findings on this research study emphasis on the social cultural factors that influence HIV/AIDS transmission among women so that some policies can be elaborated and implemented for more reduce the frequency of women to be infected.

- The findings of this study suggest that there are several social cultural factors that influence HIV transmission among women, and for reduce a number of women to be infected with HIV, there is a need for the society to be aware how they can change from negative attitude to positive attitude towards girls perception in society.

- The government and non government organization (NGO) must support income generating activities for women inn order to empower them.

- To reduce the poverty; educational and training programs for women must be a main objective of the government.

- To inform sex workers about safer sex practices.
➢ Emphasis on sex education curriculum in school, boys and girls should aware with HIV prevention.

➢ HIV programs have to show the causes of women vulnerability to HIV infection.

➢ Promoting access to education for all.

➢ To sensitize in society the value of girls’ education and girls’ right in order to reduce the HIV infection among women and in a whole society.

➢ Strict measures must be taken to prevent the rising violence against girls and women.

➢ Government must adopt policies against harmful traditional practices that increase vulnerability to HIV infection.

V.3 SUGGESTION FOR FURTHER RESEARCH

Due to the fact that this research is so large, the lack of means (not enough budgets) and the lack of time due different duties were the main problems or obstacles met while conduct the research. For more get to the further research it will be very good:

- Having enough time and means. (Budget)

- To use the research methodology related to information on culture.

- To organize a research this covers a whole country.

- To explain the problem to the researcher and respondent.
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QUESTIONNAIRE

1. imyaka (ages) 

2. amashuri wize (your highest qualification) ........................................

3. ushingiye kumuco ni ibiki ubona bishobora gutuma umubare w,abari n,abategarugori bandura agakoko gatera SIDA wiyongera? (based on the value of culture which causes that can influence the girls and women infection with HIV/AIDS?)

1) ..................................................................................................................

2) ..................................................................................................................

3) ..................................................................................................................

4) ..................................................................................................................

5) ..................................................................................................................

4. ugendeye kubigaragara mumuco, usanga ibi bikurikira byagira uruhare mu kongera umubare w,abari n,abategarugori bandura agakoko gatera SIDA?

(Regarding on the value of the culture, those causes can influence to increase the number of girls and women who can be infected with HIV/AIDS?)

I. Ugushyingirwa (marriage) yego (yes) 

Oya (no) 

Sobanura (Explain)
.................................................................................................................. 
..................................................................................................................
..................................................................................................................
..................................................................................................................

II. Ubuharike (polygamy) yego (yes) 

Oya (no) 

Sobanura
(explain)..................................................................................................
III. Gushaka ukiri muto (early marriage)  
yego (yes) □□□□
Oya (no) □□□□

Sobanura (explain) .............................................................................
........................................................................................................
...........................................................

IV. Gukora imibonano mpuza bitsina nabantu benshi (multiple sexual partners).

yego (yes) □□□□
Oya (no) □□□□

Sobanura (explain) .............................................................................
........................................................................................................
...........................................................

V. Gukuna (female genital cutting)  
yego (yes) □□□□
Oya (no) □□□□

Sobanura (explain) .............................................................................
........................................................................................................
...........................................................

VI. Ihohoterwa rishingiye kugitsina (gender based violence)

yego (yes) □□□□
Oya (no) □□□□
VII. Isoni, imyumvire n, imyitwarire kuri SIDA (stigma and taboos)

yego (yes)

Oya (no)

Sobanura
(explain)

VIII. Amadini (religion)

yego (yes)

Oya (no)

Sobanura
(explain)

IX. Ubucyene (poverty)

yego (yes)

Oya (no)

Sobanura
(explain)

X. Ubujiji n, ubumenyi buke (lack of education and training)

yego (yes)

Oya (no)

Sobanura (explain)
5. nyuma yibyo tumaze kubona haruguru, haba hari ibindi ubona bitavuzwa byatuma umubare w, abari n, abategarugori bandura agakoko gatera SIDA wizongera? (after those all social cultural factors listed above, are there other factors not listed?)

yego (yes) .................................................................

Oya (no) .................................................................

Niba biahari bivuge (If yes, list them) .................................................................

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INTERVIEW SCHEDULE

1. Imnyaka (Ages)  

2. Amashuri wize (the highest qualification)…………………………………………………………

3. Urubatse? (are you married?)  
   Yes  
   No  

   Niba wubatse, washatse ufite imyaka ingahe? (if yes at what ages you have been married?)  
   ………………………………………………………………………………………………………

4. Ushingiye kubigaragara mumuco wacu, usanga ariibiki bitera ubwandu bwagakoko ka SIDA kubario n’abategarugori? (regarding on the cultural norms, what are the factors that influence the HIV/AIDS among women and young girls?)  
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   ………………………………………………………………………………………………………

5. Utekereza iki ku gushaka ukiri muto nikibazo cya SIDA? (what do you think for early marriage to the girls?)  
   ………………………………………………………………………………………………………
   ………………………………………………………………………………………………………

6. Utekereza iki kubharike nikibazocya SIDA? (what do you think for about polygamy and the problem of HIV?)  
   ………………………………………………………………………………………………………
7. ni izihangaruka zo guhohoterwa kubari n’abategarugori?(what are the effects of violence against women and young girls?)

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……………………………………………………………………………………………

8. ni izihe ngaruka zo kugira isoni kw’abakobwa mu kwirinda SIDA?(what are the effects of stigma and taboos in HIV/AIDS prevention for girls?)

……………………………………………………………………………………………
……………………………………………………………………………………………

9. utekereza iki k’ubucyane n’ikibazo cya SIDA( what do you think for poverty and the problem of HIV?)

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……………………………………………………………………………………………

Thank you.
NUMBER OF WOMEN INFECTED WITH HIV DURING 5 YEARS 2003 – 2004

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Source: TRAC