

**The gendered appropriation of the mobile phone for online health information by youths  
in Zimbabwean tertiary learning institutions**

**A thesis submitted in fulfilment of the  
requirements for the degree of**

**Doctor of Philosophy  
of  
Rhodes University**

**by**

**Stanley Tsarwe**

**May 2015**

## **Abstract**

The study uses domestication of technology and Cultural Studies theories to investigate how youth in three institutions of tertiary learning in Harare, Zimbabwe are accessing health-related information online using their smart phones. The study critically examines how youths deploy these digital media technologies to construct their identities in a context where social and political power is unevenly distributed. To understand these issues, the study uses a triangulated research design comprising a social survey, in-depth individual interviews and field observation for data collection.

Results from this data gathering showed that the use of digital media technologies differ across gender, at least in terms of the distribution of online health seeking practices between male and female youths. According to the survey results, more women tend to use their mobile phones to access health-related information. Data from the individual in-depth interviews showed that the most significant site of social change (social disruption) relates to how digital media facilitates emerging new identities (i.e. identity in the broader sense as well as health-related and sexual health identities). For both young men and young women, mobile phones are used precisely for image management, peer acceptance and the desire to define respective femininities and masculinities within their social networks. Both male and female youths assert they are able to access a variety of information online, and some of this information would not easily accessible when sought from traditional structures such as their parents. This way, youth feel that digital media technologies allow them to cultivate their own preferred identities outside the purview of parental authority and social control. Drawing on postmodern literature, such emerging identities are predicated on cultural volatility, unpredictability, decentralisation and refusal to fixation and conformity to socially constructed identities about being a youth, or being a young Zimbabwean woman or man, for example. Thus, the use of mobile phones and mobile Internet by youths in Zimbabwe to access health-related information has socio-political significance, because it allows young people to fashion preferred identities that resists entrenched regimes of social power.

For young people in Zimbabwe, online health seeking practices precisely reflects attempt towards negotiating with and circumvent the structural limitations of either an

expensive health care system or the general curiosity associated with growing up. That way, it is arguable that youth use digital media technologies to help them exercise some level of social autonomy and agency in dealing with everyday life. Individual in-depth interviews demonstrated that mobile phones and mobile Internet can thus be seen as opening up more spaces for youth to learn more about issues about growing up, sexuality and adolescents that a conservative society such as Zimbabwe traditionally consider as 'inappropriate' for youth consumption. They argued that the inability of parents to discuss with them issues about growing up often result in them "finding out on our own" using digital media technologies to satisfy the desire to wean themselves from what they view as arbitrary and asymmetrical social power. The study demonstrated that youth use the mobile phone to challenge the social world of adults and to show resistance to it, thereby strengthening a subculture as well as constructing an identity.

However, despite the positive attributes of social capital, connectivity and personalised experience afforded by the mobile phone, the mobile phone is sometimes a source of conflict in relationships between young men and women; that is, between unmarried partners. Young women reported that their boyfriends often force them to disclose who they communicate with using their mobile phones. They also reported that their boyfriends often did some random surveillance of their social media contacts and activities. Thus, whilst one of the mobile phone's most powerful attribute is its ability to offer personalised experience, as well as offer synchronised and unlimited access to distant connections, results from in-depth interviews showed that some unwritten expectations and norms dictated that young men closely watch their 'girlfriends' social media activities, including their online search activities. As a result, privacy as well as the much touted relationship between mobile phone and women's autonomy becomes contested arenas. Even at young ages, and before marriage, women are socialised to show subservience to their partners by allowing them access to their mobile phones.

## ACKNOWLEDGEMENTS

I would like to acknowledge the invaluable support from my supervisor; Professor Harry Dugmore, for his patience and relentless support through from conceptualisation to the completion of this thesis. I benefited immensely from his critical approach to my originally fragmented and diffuse ideas which, combined with his open-mindedness, saw this final product come to fruition.

I would also like to express my heartfelt gratitude to my wife, family, and friends for believing in me and standing up with me in times when I faltered. You all made my journey a lot less arduous than you possibly imagined. May it be like that forever.

To my friends (Lovejoy, Albert, Amos, Wilbert, Phillip and your lovely wives), you were all awesome! The braais and '*get togethers*' provided the much needed catharsis. Most importantly, you restored in me confidence and hope that after all there is life after the thesis!

**LIST OF TABLES**

Table 1: Mobile Phone Penetration by Operator Subscription

Table 2. Summary of Internet Subscriptions

Table 3. Mobile phone access to the Internet

Table 4. Mobile phone use for health information search

Table 5. Do you know someone who has searched health information through mobile

Table 6. Will consult Internet for health info in future

Table 7. Which gender would benefit most from using ICTs for health information search

Table 8. Mobile phone privacy

Table 9. Phone sharing

**Table of Contents**

**ABSTRACT** ..... I

<b>ACKNOWLEDGEMENTS.....</b>	<b>III</b>
<b>LIST OF TABLES .....</b>	<b>IV</b>
<b>CHAPTER 1 .....</b>	<b>1</b>
<b>RESEARCH BACKGROUND.....</b>	<b>1</b>
1    INTRODUCTION.....	1
1.1    FROM ELITE TO ORDINARY: INCREASED TECHNOLOGY ACCESSIBILITY AND RELAXATION OF CAMPUS TIME-BASED SCHEDULES .....	5
1.2    COMPETING DOMINANT PARADIGMS IN TECHNOLOGY RESEARCH .....	6
1.3    GENDER RELATIONS IN ZIMBABWE.....	8
1.3    STATEMENT OF THE PROBLEM.....	11
1.4    JUSTIFICATION AND SIGNIFICANCE OF STUDY .....	14
1.5    RESEARCH CONTEXT AND BACKGROUND .....	15
1.5.1 <i>Situating study in empirical context</i> .....	15
1.6    RESEARCH OBJECTIVES .....	17
1.7    RESEARCH QUESTIONS.....	18
1.8    RESEARCH HYPOTHESES.....	18
1.9    THESIS STRUCTURE .....	20
1.10    CONCLUSION.....	21
<b>CHAPTER 2 .....</b>	<b>22</b>
<b>SOCIAL CONTEXT OF RESEARCH - ZIMBABWE .....</b>	<b>22</b>
2    INTRODUCTION.....	22
2.1    ZIMBABWE IN THE DIGITAL ERA .....	25
2.1.1 <i>Subscription by operator</i> .....	26
2.1.2 <i>Mobile data</i> .....	27
2.1.3 <i>Subscriber plans</i> .....	27
2.2    RESEARCH SETTINGS: STUDENTS IN TERTIARY LEARNING INSTITUTIONS .....	28
2.3    ZIMBABWE’S HEALTH CARE SYSTEM .....	32
2.4    MEDIA, HEALTH AND SCIENCE REPORTING .....	35
2.5    HIGHLY POLITICISED MEDIA, WITH LIMITED SPACE FOR HEALTH AND CIVIC DISCOURSES .....	36
2.6    GENDER DISPARITIES IN ACCESS TO INFORMATION AND RELATED TECHNOLOGIES .....	38
2.7    SOURCES OF HEALTH INFORMATION FOR ZIMBABWEAN YOUTH .....	40
2.8    GENDER AND BELIEF SYSTEMS AROUND HEALTH AND ILLNESS .....	43
2.9    CONCLUSION.....	45
<b>CHAPTER 3 .....</b>	<b>47</b>
<b>LITERATURE REVIEW AND THEORETICAL FRAMEWORK .....</b>	<b>47</b>
3.2    TOWARDS SOCIAL AGENCY .....	52
3.3    THEORISING POWER, AGENCY, IDENTITY AND SOCIAL AUTONOMY .....	56
3.3.1 <i>Social power</i> .....	56
3.4    SOCIAL IDENTITY AND HEALTH .....	64
3.5    MORAL ECONOMY OF THE HOUSEHOLD .....	67
3.6    CONCLUSION.....	70
<b>CHAPTER 4 .....</b>	<b>71</b>
<b>RESEARCH METHODOLOGY, METHODS AND PROCEDURES.....</b>	<b>71</b>

4	INTRODUCTION.....	71
4.1	REASONS FOR TRIANGULATION .....	74
4.2	QUALITATIVE VERSUS QUANTITATIVE RESEARCH: COMPLEMENTARY OR MUTUALLY EXCLUSIVE?.....	76
4.3	DISTINCTIONS AT THE LEVEL OF EPISTEMOLOGY .....	77
4.4	DISTINCTIONS AT THE LEVEL OF METHODS OR TECHNIQUES .....	79
4.5	CONTEXT OF RESEARCH SETTING: .....	80
4.6	DATA COLLECTION METHODS.....	83
4.6.1	SAMPLE SURVEY.....	83
4.6.1.1	<i>The questionnaire design</i> .....	84
4.6.1.2	<i>Data collection and analysis</i> .....	86
4.6.1.3	<i>Sample Size calculation</i> .....	86
4.6.2	INDIVIDUAL IN-DEPTH INTERVIEWS .....	88
4.6.2.1	<i>Sampling and recruitment of individual interviewees</i> .....	90
4.6.2.2	<i>My role as moderator</i> .....	91
4.6.3	FIELD OBSERVATION .....	91
4.7	CHALLENGES IN THE FIELD .....	92
4.8	ETHICAL CONSIDERATIONS .....	92
4.9	CONCLUSION.....	93
<b>CHAPTER 5 .....</b>		<b>94</b>
<b>ADOPTION, DOMESTICATION AND SOCIAL POWER: YOUTH AND EVERYDAY MOBILE TECHNOLOGY</b>		<b>94</b>
.....		<b>94</b>
5	INTRODUCTION .....	94
5.1	TECHNOLOGY AND THE EVERYDAY: SOME OBSERVATIONS .....	95
5.2	EVERY DAY PRACTICES OF TECHNOLOGY USE: ONLINE HEALTH CONSUMPTION .....	108
5.3	HEGEMONIC IDENTITIES AND HEALTH SEEKING PRACTICES.....	114
5.4	IN THE SAFETY OF THE HOME: MOBILE ONLINE HEALTH SEARCH PRACTICES .....	129
5.5	CONCLUSION.....	134
<b>CHAPTER 6 .....</b>		<b>137</b>
<b>MOBILE TECHNOLOGY, IDENTITY AND ‘DISRUPTION’ OF SOCIAL POWER.....</b>		<b>137</b>
6	INTRODUCTION.....	137
6.1	STRUGGLE FOR AUTONOMY: POLITICS OF THE MORAL ECONOMY, SURVEILLANCE AND CONTROL .....	138
6.2	INFLECTING TRADITIONAL AUTHORITY, SELECTIVE MEDIA CONSUMPTION AND EMERGING IDENTITIES .....	146
6.3	CONCLUSION.....	156
<b>CHAPTER 7 .....</b>		<b>158</b>
<b>CONCLUSION .....</b>		<b>158</b>
7.	INTRODUCTION.....	158
7.1	KEY RESEARCH FINDINGS.....	159
7.2	SIGNIFICANCE OF STUDY .....	166
7.3	STUDY LIMITATION, WEAKNESSES, AND STRENGTHS.....	169
7.4	SCOPE FOR FURTHER RESEARCH.....	169
<b>APPENDICES .....</b>		<b>171</b>
APPENDIX A: INTERVIEW GUIDE.....		171
APPENDIX B: SURVEY QUESTIONNAIRE .....		175
<b>BIBLIOGRAPHY .....</b>		<b>181</b>



## CHAPTER 1

### RESEARCH BACKGROUND

#### 1 Introduction

The emergence of the Internet and computers in the early 1990s created the hope that structural bottlenecks to information access will be replaced by more ubiquitous flows of information and knowledge (Castells 2007; Stalder 2006). Superlatives such as ‘empowerment’ and ideas about the growth of a ‘participatory’ citizenry dominated much of the research in that decade. More recently in 2007, the growth of smart phones and mobile Internet helped pushing this technological optimism to new levels. The mobile phone’s portability, mobility and interoperability with the Internet recalibrated our conception of the media and communication, and individual empowerment, in radical ways.

The positivity that follows these developments seemed to mimic ideas of the modernisation paradigm of the 1950s and 1960s that saw the global diffusion of technical and social innovations as essential to modernising and developing the underdeveloped third world (Schramm 1964; Rogers 1962). In particular, the massive liberalisation of the internet in the early 1990s and entrance of the mobile phone onto the mass consumer market raised strong predictions that marginalised population groups; particularly women (Muturi 2004; Cumiskey & Brewster 2012; Wajcman 2010) stand to benefit most. Prospects for ‘on-the-fingertip’ access to information symbolised the beginning of an information society whose means of production is knowledge-based (Webster 2002, Castells 2000) whilst the shackles of tradition and lack of knowledge, which were largely seen as impediments to modernisation and development in Africa, would fall by the way side.

However, more critical scholars begun to caution that such view were oversimplified and utopian (Morozov 2011). The extraordinarily rapid diffusion of digital media technologies, particularly the mobile phone and the Internet in Africa, is, these dystopians point out, shaded by contextual nuances high access costs, a deepening

digital divide and other clashes with cultural norms, (Mabweazara 2015, Wajcman 2010, Van Dick 2005, Nyamnjoh 2004 such as those this study explores.). It is thus important to interrogate the nexus between digital media technologies, culture and nuanced contextual peculiarities that colour the use of these technologies.

In the context of the debates raised above, this study explores the use of mobile Internet and mobile phones as used for accessing health-related information by youth<sup>1</sup>, mostly students (between the ages of 18-24) at three institutions of tertiary learning in Harare, Zimbabwe. During preliminary interviews with Zimbabwean youths at the University of Zimbabwe, I had noted that young people are increasingly using the mobile phone to access a variety of health information online, including information about sexual health. Elsewhere in countries such as Ghana, South Africa, Uganda and Nigeria, researchers have also noted a recent but rapid uptake of mobile health information as part of individual health ‘repertoires’ of information, knowledge and practice (Ybarra et al. 2008; Ybarra & Bull 2007; Nwagwu 2007; Borzekowski et al. 2006).

Building on these initial observations, the study sought to understand how the appropriation of mobile phones into youth’s everyday lives impact on their lived experiences. The study looks closely at the varying degrees of ‘technological domestication’ evident among Zimbabwean youths and how their use of these technologies for what might seem to be mundane online health information shape their social agency against the background of constraining institutions of social control. In this study, ideas about ‘social agency’ versus ‘institutions of social control’ are used to connote how the contradictory forces of ‘domination’ and ‘resistance’ constitute the struggle for social, political and personal empowerment (Kellner 2001; Wasserman 2011).

These terms need some elaboration, as they are significant to this study. Social agency relates to the capacity for individuals to act independently and to make choices and decisions affecting their lives. The notion of agency is thus integral to the ideals of

---

<sup>1</sup> There are competing definitions of what “youth” is in different countries. For the UN, youth is best understood as a period of transition from the dependence of childhood to adulthood’s independence. In Zimbabwe, the National Youth Policy contents that ‘youth’ could have different connotations to different

active citizenship. Social agency refers to youth's potential to reflect, imagine and act, and according to Frie, it manifests in concrete actions (Frie 2008). As will be highlighted in the context chapter (Chapter 2), existing inequalities and forms of social and political exclusion on the basis of gender and age affect the capacities of youth to fulfil their citizenship roles.

On the other hand, social control is best captured by the social dominance theory (Sidanius & Pratto 1999) – a theory that describes the human society as consisting of oppressive group-based hierarchy structures where individuals are stratified by age, sex and group (e.g. ethnicity, religion, nationality). Social hierarchy consists of a hegemonic group at the top and negative reference groups at the bottom (Grusky & Takata 1992). This often overlays class and other socio-economic differences. The hegemonic group sustains its dominance through legitimising myths; that is, beliefs systems that justify social dominance. Examples include paternalistic myths that perpetuate the continuity of patriarchal values. As in patriarchal societies, males are more socially and economically dominant than females, and they possess more political power.

In the African context, scholarly work has indicated that many young people are placed lower in the hierarchy of citizenship in terms of having voice and influence (Honwana 2013). Levels of agency differ between the more political form which involves engaging with or challenging powerful political authorities (Barter 2012). Other forms, particularly those involving youth, are more concerned with 'tactical agency' (De Certau 1984) and they often involve responses to immediate needs. In this study, and as Ukeje and Iwilade argue, such response to 'get by' is also part of a political project to liberate the youth and fight paternalistic structures (2012).

However, the study also acknowledges Giddens's notion of the duality of agency and structure, where agency (i.e. the capacity for individual to act relatively independently, and make fairly free choices) and structure (the influence of context, for example culture, gender, class etc.) cannot exist or be analyzed separate from its structure (Giddens 1984). For example, how digital technologies are used by youths in shaping their identities must be understood in the context of Africa's prevailing contextual environment characterised by constraining political interference in the communication

sector and continuing digital divide. In addition, Nyamjoh's (2004) notions of single owner and multiple users make reference to how mobile phones are shared by a network of many users. Such conditions might work to contradict Stalt's (2008) ideas of mobile phones as symbols of mobility, independence and moving forward in life (145).

As is further explored in chapter 3, this study also uses the Gramscian understanding of power as diffused in social practices and as offering opportunities for individual and collective social agency. Gramsci's notion of 'counter-hegemony' (1971) and subsequent further theorising within the Cultural Studies tradition of 'resistive reading' positions (Morley 2007; Hall 1980; Fiske 1987) allow for a theoretical exploration of the optimistic theories of technology society relations. These notions necessitate a detailed enquiry into the processes of appropriation and uses of digital technologies in Africa.

In Zimbabwe, the continued growth of smart phones and the mobile Internet presents immense opportunities for circumventing the traditional barriers that limited choice and diversity in content presented by traditional media. As Chapter 2 will show, Zimbabwe's mobile penetration exceeds 100%. In addition, more Internet users in Zimbabwe access the World Wide Web through the mobile phone (POTRAZ 2014).

Although Zimbabwe has endured a prolonged period of underinvestment, economic downturn and political crisis, there is a relatively reliable telecommunications infrastructure that has enabled good Internet connectivity and relatively wide mobile phone coverage (Mabweazara 2013). With three mobile network providers in Zimbabwe (Econet Wireless Zimbabwe Limited, NetOne and Telecel Zimbabwe Limited) competing for subscribers, the prices of mobile data continue to fall. This creates more opportunities for the ordinary members of society to access the Internet more easily, mostly through their mobile phones. The increasing demand for Internet services has also been shown by the growing number of Internet Service Providers (ISPs) and the mushrooming of cybercafés in almost every corner of large cities and some parts of rural areas (Mabweazara 2013; Ndlela 2006).

The section below provides an illustrative description of a typical university life for students before and after the contemporary technological boom beginning in the early 2000s. It argues that through the increased penetration of digital media technologies in socio-cultural spaces, there is a qualitative transformation of life for a typical student in Zimbabwe.

### **1.1 From elite to ordinary: Increased technology accessibility and relaxation of campus time-based schedules**

Back in 2000, as an undergraduate student at the University of Zimbabwe, the Internet was a preserve for the elite, and was particularly only accessible through large corporate organisations and a few public institutions such as universities. The mobile phone was a preserve of few executives in large corporations and senior government personnel. In these early days, mobile phones operated on basic functionalities such as voice calls and the Short Message Services (SMS). By then, we had a vague understanding of what the Internet was, and certainly no access through the mobile phones. However, having been fortunate enough to be enrolled at the University of Zimbabwe, we were finally introduced to this alien ‘thing’- the Internet- whose intrigue was beyond the imagination of many. Students had access to the computer and the Internet through the only computer lab on campus – then known as the “Computer Centre” - which accommodated a handful of students at a time. Students had to book for sessions to use this very scarce resource. The idea of an email was even more puzzling to many, and a lot of us did not own an email address until after university studies.

For students in my class, the year 2002 could always be remembered as “*gore rema emails*” (Shona for “the year of emails”) as the Internet frenzy saw us jostling to sign up for one, at least before leaving university. This is the year I signed up for my first yahoo email account. It was easy to count students with mobile phones as they were so few, and those that owned one were mostly from urban middle class families. Some lecturers also owned them. In these early days, the cell phone was a status symbol. It belonged to a classificatory category of the so-called “3 Cs” (*cellphone, cash and car*) – the then key middle class status symbols.

By 2014, twelve years later when I returned to the University of Zimbabwe campus for this research, I discovered that a great deal had since changed. Every student has a mobile phone (as survey data in Chapter 5 will show). Students no longer queue at the Computer Centre to make computer bookings. Rather, they have access to campus wifi (again, a ‘thing’ that our student generation of 2002 would have never imagined). Whilst many now use personal laptops, still more now have access to campus wifi through their smart phones. As Chapter 5 will later show, some students now conduct research using their mobile phones even without visiting the library, and preliminary interviews introduced me to an emerging culture where mobile phones are used for online health information seeking and much else besides, including social networking and entertainment. With the mobile phone and related applications (for example WhatsApp, ChatON, Facebook Messenger etc), clock-based schedules have “softened” (Ling 2004: 69; Ling & Yttri 2002). Students now communicate and make appointments flexibly with one another.

## **1.2 Competing dominant paradigms in technology research**

Optimism about technology is common. International research, based mainly in the developed world is often couched in ‘web-generation discourse’ (Hartmann 2005: 143), and conceptualises the mobile phone as a tool embodying social mobility, independence and social advancement (Schoon 2012; Stalt 2008: 145). This discourse relies on a somewhat technologically deterministic logic where existing power relations can easily be challenged by young people suddenly armed with the latest technology. However, despite the fact that, in many parts of the world, young people, even in low income areas, have growing access to sophisticated technology on their mobile phones (Kreutzer 2009a; 2009b), empirical confirmation that ‘techno savvy’ youth are indeed challenging power relations in ways that improve their circumstances, or change power relations, is hard to come by.

Those who are optimistic about developments in media technologies argue that these technologies can empower users in, especially, developing countries with wider informational choices as well as expand the “agency” for ordinary citizens who

increasingly find themselves able to seek and use information from different sources on their own terms. Social constituencies that potentially stand to benefit most are the erstwhile disempowered; particularly women (Muturi 2004), whose struggle for autonomy can also be traced in feminist movements of the 1970s and 1980s where concerted attempts were made to challenge the asymmetrical power balance largely seen as trapped in patriarchy (Cumiskey & Brewster 2012; Wajcman 2010).

This optimism is couched on the discourse of “technology for development” debate spearheaded through international development agents, particularly the United Nations and the International Telecommunication Union in partnership with national governments. For example, at the close 2014, the U.N. General Assembly proposed a set of goals to succeed the Millennium Development Goals (MDGs) in late 2015. Some of the proposed goals include targets which refer to technology and specifically ICTs, such as providing affordable Internet access in least developed countries and enhancing the use of ICTs to promote women’s empowerment<sup>2</sup>.

In tandem with this optimistic discourse, Zimbabwe’s ICT strategic plan for the period 2010-2014 has clear developmental goals, with massive public and private sector investments expended towards objectives clearly related to economic turnaround, but also with a particular focus on making ICTs more accessible to the less privileged members of society including women (Tsokota & von Solms 2013). As women in Africa struggle to expand their social, political and economic spheres of influence one question that sticks out is whether these digital technologies such as the mobile phone and the Internet will become agents for transforming gender relations or if it will simply reproduce the inequalities of the status quo (Robins 2002).

Placing gender at the centre of focus, technology-and-gender pundits think ownership and use of these technologies by women potentially disrupts traditionally entrenched social injustices which subordinate women to male power in areas such as decision-making, including on issues related to sexual and reproductive health knowledge (Tinarwo & Pasura 2014; O’Brien & Broom 2013). This study will examine whether and how female youths use these technologies in the context of seeking health

---

<sup>2</sup> see: [http://www.itu.int/en/ITU-Statistics/Documents/publications/mis2014/MIS2014\\_without\\_Annex\\_4.pdf](http://www.itu.int/en/ITU-Statistics/Documents/publications/mis2014/MIS2014_without_Annex_4.pdf)

information, but particularly also whether their use of these technologies constitute increased agency, power and self-autonomy for them. Gender thus forms another important axis of exploration, making it necessary to situate gender in the Zimbabwean context.

### **1.3 Gender relations in Zimbabwe**

To understand the context of gender and power in Zimbabwe, it is important to overview the multi-generational socialisation of Zimbabweans that has shaped and continues to shape contemporary gender discourses in Zimbabwe. Literature on gender relations in Zimbabwe traces unequal gender power as stemming from multiple but distinct sources. Among them are the traditional practices which see older men wield substantial power of domination over women, children and younger men both at the household and village level on terms of control over such strategic resources as land, labour, and children, as well as political power (Tinarwo & Pasura 2014; O'Brien & Broom 2013; Schmidt 1991; Bozzoli 1983).

Thereafter, and in the interest of colonial exploitation and capitalist expansion, the strategic collusion between indigenous African and European structures of patriarchal control fostered the exploitation of male labour (Schmidt 1991). Colonial legislation also formulated policies that entrenched gender stratification by forcing black women and children to stay behind in remote rural reserves, undertaking subsistence cultivation to feed themselves and to subsidize the men's wages (Schmidt 1991). In particular, it also downplayed the meaning of women's economic contribution to household maintenance (Ngoshi & Mutekwa 2014; Tinarwo & Pasura 2014; Schmidt 1991). Unlike their counterparts in Western Europe and the USA, women's social autonomy and decision making remain largely appended to patriarchal authority in Zimbabwe.

Elsewhere in Europe, the intersection between Marxism and feminism has shaped not only academic interests but also raised political questions about the relationship between women's oppression and liberation and the class politics of the left, trade union and feminist movements in the late 19<sup>th</sup> and 20<sup>th</sup> centuries. This is particularly so in the U.S., Britain and Western Europe (see McRobbie 2002; Skeggs 2003; Orloff 1993). In

these societies feminist movements have managed to advance the needs of most women to a larger extent in the 1970s and 1980s (McRobbie 2007).

However, in Zimbabwe, the African woman has not been silent in the contested discourses surrounding social, political and economic power as well as patriarchal control. Notable sites through which women's voices have been heard are the literary arts, music and drama (Moyana 2006). A number of key literary texts by Zimbabwean women writers have been instrumental in shaping the discourses of women's emancipation. For example, Tsitsi Dangarembwa's *Nervous Conditions* (1988), Yvonne Vera's *Butterfly Burning: A Novel* (2000), Joyce Simango's *Zviuya Zvirimber* (Good things are yet to come (1974)), Sharai Mukonoweshuro's *Ndakagara Ndazviona* (It had long been coming (1990)) and many more women writers foreground themes of sexual abuse against women, the selective treatment of children on a gender basis, arranged and mostly under-age marriages, and the poverty experienced by women in rural Zimbabwe. But particularly important, there were also overt attempts in the literary arts to portray strong women characters capable of rising above the social controls and strictures of social power (particularly in the writings of Tsitsi Dangarembwa and Yvonne Vera). In addition, legislative reforms and education have also contributed to the improvement of women in Zimbabwe.

Other sites for women's struggle have also been witnessed in their increased participation in the local and global labour economies. Whereas in pre-colonial and post-colonial times labour migration usually involved men moving into urban areas, or to South African goldmines and white settler farms, Zimbabwean women are now the core of recent migration flows to South Africa, Britain and Australia (Tinarwo & Pasura 2014: 521; Pasura 2008).

These have resulted in an increased economic power and autonomy for many women who are now able to negotiate on fairly equal grounds with their partners and now have 'voice' in decision making. However, enduring stereotypes and beliefs about female migrants and their 'questionable moral blameworthiness' pose more dilemmas on women (Tinarwo & Pasura 2014). This is because migration from home creates

liminal<sup>3</sup> spaces where women are able to escape the social ‘moral’ censure and surveillance associated with being home, and where intimate relations may even bypass the strict social scrutiny and judgement (Tinarwo & Pasura 2014). On face value, it would thus be argued that the online ‘virtual’ world as well as the mobile phone’s portability potentially offers something of a protective shield into which women can ‘escape’ and explore their identities and sexualities. However, and as will be shown in the data chapters, whilst many women may find the mobile phone as opening up possibilities for their self-empowerment, these possibilities, this study will argue, remain enmeshed in contradictory tensions of autonomy versus conformity to social hierarchy.

In Zimbabwe where traditional customs continue to be the central organising force (Kamabarami 2006), there are albeit limited gains through progressive formal legislation (Schmidt 1999). Even still, whilst formal legislative reforms in Zimbabwe have made significant strides towards empowering women, the subordination of women is bred and entrenched through socialization, which begins in the family, but infiltrates into other sectors and institutions of society such as marriage, religion, education, the economy and politics (Kamabarami 2006). The origin of asymmetrical gender relations in social spaces such as the home (where girls and boys are socialised differently, and have different duties and responsibilities in the house), will be explored in this study using the lenses of the domestication theory.

It should also be noted, however, that contrary to the popular view that patriarchy in Africa operates through the subordination of women only, literature on pre-colonial and post-colonial Zimbabwe indicates that patriarchal social hierarchy creates multiple layers of hierarchies of subordination. For instance, married men, who are the patriarchal figures, superintend over all women, children and *unmarried young men* (Pasura 2010; Kesby 2010). Younger men, children, and unmarried older men, would all fall under the patriarchal figure of the house or family lineage. Children are

---

<sup>3</sup> First developed in the early 20<sup>th</sup> century by anthropologist Arnold van Gennep and by Victor Turner, the notion of liminality (deriving from Latin word *limen*) means "a threshold" and it is the quality of ambiguity or disorientation that occurs in the middle stage of rituals, when participants no longer hold their pre-ritual status but have not yet begun the transition to the status they will hold when the ritual is complete

considered as minors in need of constant guidance and rarely granted control over decision-making (Kesby et al 2006: 187).

For example, in present day Zimbabwe, young men who are unmarried do not have significant autonomy in decision-making about their own lives (Kesby et al. 2006), particularly if this is without authority from the patriarchal figure (who can be the biological father or a senior close uncle). However, whilst in contemporary times black urban ‘middle class’ families – even those whose childhoods are influenced by westernised discourse and their liberal views on self-autonomy, there is still simultaneous struggles to maintain other forms of ‘traditional’ socialisation (Kesby et al. 2006).

In contrast to most developed liberal societies (for example in Western Europe and the USA), where there are ‘looser’ cultural and familial bonds, and less control over young people (following social movements of the 1960s and 1970s, which shook generational control radically) this has not been the case in many African societies, particularly in Zimbabwe. For this study, youth’s ‘agency’ and self-autonomy are of particular interest. They are important in this study’s enquiry into whether technology can expand youth’s self-efficacy in constructing their sexual health-related identities. As this study seeks to investigate, the smart phone’s increased connectivity and affordances to access diverse global discourses and cultural repertoires potentially opens up additional and new sites for social experiences and sensibilities, which might negotiate (or even oppose) with locally entrenched norms.

### **1.3 Statement of the problem**

In view of the rapid diffusion and permeation of digital media technologies in Africa (), more research is needed to understand , their context of use and their impact on the space previously dominated by old media (Chiumbu 2012; Wasserman 2011; Goldstuck 2010). This also calls for research into supposedly mundane and diffuse social practices such as using mobile Internet for health information seeking.

In the past decades, one of the civic roles of traditional legacy media has been to educate the public on health issues. However, there is contradictory evidence about the efficacy of health communication advocacy delivered through traditional media and

face to face peer education (Noar 2006; Snyder & Hamilton 2002; Derzon & Lipsey 2002). There is increasing hope that digital technologies (and especially smart phones) potentially bridge this gap by making it possible for user and provider initiated health information access (Kaplan 2006). This is especially so in the Zimbabwean context where the civic discourses compete for space in a public sphere captured by dominant elites such as politicians and business elites who manipulate public discourses by controlling media and information flows (Moyo 2009). Thus, if old media (broadcast and print) were subject to direct centralised control, censorship and regulation (albeit with minimal liberalisation and only a marginal opening up of the media to private interests), would the transition to digital media elude such censorship? However, cases also abound where autocratic governments monitor and censor the Internet and mobile traffic. This certainly happens in Zimbabwe and in other authoritarian states such as China and Russia (Mabweazara 2011, Moyo 2009).

Technological optimists are of the view that technology is capable of allowing young people additional agency to can potentially circumvent these political censorship, as well as traditional and cultural inhibitions of their personal growth and autonomy (Wasserman 2011). Technology has also been seen as capable of disrupting other enduring traditional centres of power (particularly enduring cultural practices, beliefs and norms – for example, patriarchal dominance) and its sustenance of asymmetrical gender power relations. The idea of social disruption extends to the ways in which mobile technology allows a decentralised, unpredictable and constantly shifting social identity that supposedly empower informal micro social networks to communicate much more efficiently outside any institutional control (Geser 2006; Hall 1992: 291).

However, whilst much research on technology is couched in the discourse of women empowerment, there is less empirical work on how technology affects men, particularly research around the intersection between technology, masculinity and power in Zimbabwe.

This research is more urgent at a time when hegemonic masculinity in Africa is undergoing reconstruction in response to the modernist and liberal views about gender equality (Connell & Messerschmidt 2005). The media; particularly social media, are seen as the front-runners that are amplifying these debates by making such debates

easily accessible to the wider majority. Social media also disrupts traditional social relations by making it easy for more women to participate and contribute to discussions on gender and equality. Whilst some scholars argue that these technologies can shift power relations between genders (Bakardjieva 2011; Wajcman 2010, 2008), there is need for empirical research to see if this is the case.

In Africa, cultural beliefs and norms linked to patriarchy bestow enormous expectations on men, particularly with regards to functions such as providing and protecting the family (O'Brien & Broom 2014: 8). These masculine roles mostly become tested and threatened at the onset of illness, with the consequence that health and illness become a stigma indicative of the inability to provide and protect the family on the part of the man (O'Brien & Broom 2014).

This is amplified by lack of formal employment, which exerts pressure on family security, and threatens the capacity for men in their 'traditional' role as providers for their families. Recent literature on HIV-related stigma in Uganda concluded that the perceived loss of status as 'economic provider' generated low self-esteem for some men (Wyrod's 2011). The attendant result is that men become ashamed to disclose an ill-health condition fearing social stigma that comes with prospects for failure to provide and protect the family.

One assumption emerging out of these observations is that men could be finding solace in managing their own health through the camouflage and anonymity provided by the Internet. While this may or may not be true, there is lack of understanding of men's experiences of health and illness (Cameron & Bernardes 1998) and an largely unexplored relationship between masculinity, help and health seeking behaviour (Mugweni et al. 2012; Skovdal et al. 2011; Pearson & Makadzange 2008). Therefore, whilst technology optimists often link digital media to the possibility of women's emancipation, it may be arguable that men stand to benefit also in the sense explained above where the Internet holds prospects for providing a space that is unthreatening to masculinity.

#### **1.4 Justification and significance of study**

Our knowledge about technology in Africa tends to lack a closed-up and in-depth understanding of what constitutes the ‘everyday’ aspect of technology use. Recent research in Africa has focused more on everyday political activism and mobilisation, democratisation processes and the use of these technologies as drivers for economic development (Chiumbu 2012; Aker & Mbiti 2010; Wasserman et al. 2005, Williams 2005). But more exploration is needed regarding what goes on when technology enters into the most intimate social spaces of everyday lives and how it is converted by individual social agents to become “their own” (Silverstone et al. 1994; Ang 1991; Morley 1992, 2000). In Western European research traditions, there is an emphasis on situating the social shaping of technology and domestication approaches (see Silverstone et al. 1992; Bakardjieva 2011; Wajcman 2010, 2008; Haddon 2005; Morley 2006) within cultural processes, ie there has been a lot focus on how to interface technology studies with cultural social processes. By comparison, such research is largely lacking in Africa..

To a larger extent, what dominates much of the research in Africa is instrumental research on technology appropriation as well as the examination of issues of the digital divide between the ‘haves’ and the ‘have nots’. Whilst this research is far from being unimportant, it doesn’t go deeper into a more grounded examination of the peculiarities that shape usage patterns, particularly by the so-called emerging tech-generation in Africa. There is paucity of research located in everyday non-political or economic usages of technology, particularly about how contextual differences and regional particularities could yield ‘thicker’ knowledge that goes deeper than the often quantitative studies of technology in Africa.

In particular, it is imperative for research to focus on how technology intersects and overlays gender (Bakardjieva 2011; Wajcman 2010, 2008) and to look beyond the often earnest speculation over the potential of technology to emancipate women from the shackles of tradition. This is even more urgent in view of the research that unproblematically celebrates technology as ushering a new era of women’s

‘empowerment’. But how sustainable are these arguments in the context of Africa where tradition and customs continue to significantly shape gender relations? Would the mere ownership of a smart phone be enough to dislodge patriarchy, in ways that are noticeable? Other researchers have pointed to the elusive discourse of technological empowerment (Morozov 2011) and called for in-depth and situated understandings of everyday uses of technology in Africa.

Second, a wholesome application of theories from the West, even though they might be informed by empirical evidence, may be oblivious of the nuanced differences that African context present. Indeed some prominent current theoretical approaches lack a nuanced understanding of the conditions of Africa (Berger 2000: 90) because African realities today are complex and multifaceted and resist attempts to simplify them (Mano 2004; Nyamnjoh 1999). For example, whilst research from the developed world see mobile phone as a tool embodying social mobility, independence and social advancement (Schoon 2012; Stalt 2008: 145), it is often blind to the strong reciprocal and obligatory gender relations that tie women’s subservience to their husbands in many African contexts. This is even more important in the context of the enduring digital divide in Africa, where multiple usages and sharing of mobile phones is prevalent (Nyamnjoh 2004). The problem of digital divide is amplified by differential access to technology along the rich and the poor divide, but also on the basis of gender. In the context of uneven distribution of economic power, access to resources (including, for this study, credit money to access mobile internet) would be expected to depend on gender and buying power. Recent literature has thus raised questions about whether the mobile phone and the Internet will become (or already are) agents of transformation or will simply reproduce and possibly even amplify the inequalities of the status quo (Robins 2002).

## **1.5 RESEARCH CONTEXT AND BACKGROUND**

### **1.5.1 Situating study in empirical context**

Africa is witnessing one of the strongest increases in mobile phones and mobile data use in the world. According to the Internet World Stats, forecasts suggest that mobile Internet traffic across Africa will double between 2014 and 2015, and will see a 20-fold increase by the end of the decade. Mobile broadband growth is doubling each year,

with three-quarters of all connections being 3G/4G by 2020 (Internet World Stats). Whilst smart phones accounts for only 18% of phones in Africa (Financial Mail), a global research firm: Informa Telecoms & Media, predicts that there will be a five-fold increase in the number of smart phone connections by 2018. The Internet World Stats states that in Africa, the availability of locally build cheap smart phones, increased competition among service providers are all contributing to reduction in mobile phones, data prices and services.

In Zimbabwe, the Postal and Telecommunication Regulatory Authority of Zimbabwe's 2013 fourth quarter report states that Internet penetration rate is at 41.9% whilst mobile data subscribers accounts for 49.9 % of the population. Mobile broadband in Zimbabwe is comparatively high to regional average, with 10 MB costing 1USD. However, in view of increased competition, prepaid subscribers take advantage of a range of promotions offered through promotions and application-specific specific bundles.

For example, the largest mobile network provider in Zimbabwe: Econet Wireless, offers the following application-specific bundles: an Opera Mini bundle, a Facebook only bundle, free Twitter and a WhatsApp only bundle. Econet's Opera Mini bundles allow prepaid subscribers unlimited access to the Internet for a given period using the Opera Mini Internet browser. With USD 40 cents, prepaid subscribers have unlimited access to the Internet for the whole day since these bundles are time based, not volume-based as is the case with ordinary Internet bundles.

The above context situates this study in empirical debates and literature on contemporary developments taking place in the mobile industry, but with particular reference to how these developments are seen as providing immense opportunities for health communication, particularly in Africa. The continued growth of the mobile industry unbundles the potential for the public not only to connect with distance others, but also to access previously inaccessible ideas and knowledge. Whether these developments represent social revolution or continuation of previous structures (Wasserman 2011) is debatable, and this study seeks to provide some formative answers. Empirical data will be used to understand what the meanings are for the domestication of mobile digital technologies into the lives of ordinary people.

## **1.6 Research objectives**

This study investigates how online health information is consumed and made sense of by youths in Zimbabwean tertiary learning institutions; with a specific focus on how gender is implicated in their uses. It does this against the backdrop of the increased appropriation of digital media technologies such as the mobile phone and mobile Internet across Africa, including in Zimbabwe. In addition to the appropriation of these technologies, there are emerging online practices where youths in tertiary learning institutions are using their mobile phones and mobile Internet to look for health-related.

In Africa, literature argues that young people use digital technologies to re-fashion their identities (Wasserman 2011; Kreutzer 2009). It argues that digital media technologies help youth to transgress social hierarchy and power. In the context of online health seeking practices, access and use of digital technology potentially amplify young people's agency - particularly women - to actively fashion their health identities; for example, in areas around food and diet and sexual health identities, among other forms of health identities. This study thus seeks to contribute to an understanding of how the transition from legacy to digital media is changing the experience of health information consumption in Zimbabwe.

The study also seeks to understand how young people in Zimbabwe are using digital media to consume health information online against the background of a mainstream traditional (broadcast and print) media system that is increasingly alienated from the realities of young people's needs and circumstances. Earlier above, and in Chapter 2, the study argued that the state increasingly patronise the media through legal and extra-legal means (Moyo 2009) in ways that compromise the media's civic roles so that information related to civic and health issues compete for space with powerful political and commercial interests.

Whereas immediately post-independence, the mass media (radio and print) successfully played a critical role in health education in Zimbabwe, with topics under discussion

ranging from immunization, water and sanitation, hygiene, family planning and AIDS/STDs (Dehne & Hubble 1993: 530), it has been less able to do so in contemporary times as a result of poor funding towards public health advocacy as well as in view of the state's increased centralist tendencies.

In addition, the study problematises the gendered nature of Zimbabwe's social space, which is characterised by the subordination of women and young people in ways that limit their agency in decision-making in life, including making decisions around sexual health-related matters (Pearson & Makadzange 2008: 363). The study thus seeks to understand whether digital media technology might be seen as helping loosen social control by allowing young people and women the agency for defining their identities, including health-related identity.

### **1.7 Research questions**

1. Do online health-seeking practices differ across gender?
2. How do online health-seeking practices contribute to health-related identity formation?
3. How do digital media technologies enhance young youths' social agency?

### **1.8 Research hypotheses**

This study is premised on two hypotheses. The first is that there is a relationship between gender and digital media technology use for purposes of online health seeking practices. This hypothesis draws primarily from literature which argues that women are empowered with knowledge about their own health when cultural limitations and subordinating regimes of social control such as patriarchy are reduced (O'Brien & Broom 2013). For example, a study exploring family planning within married couples in Zimbabwe shows that women's knowledge about family planning equips them with increased autonomy to negotiate their sexual rights (O'Brien & Broom 2013).

Thus if digital media allows for individualised experience, and beyond the purview of institutional authority and control (such as patriarchal control and the state's control of media content), it might be argued that these technologies have the potential to

empower users with agency and autonomy. This argument also largely draws on literature that is of the view that Zimbabwe is a largely patriarchal society (Makahamadze 2012; Nyika et al. 2009, Kamabarami 2009), and whilst the notion of hegemonic masculinity (Connell & Messerschmidt 2005) is undergoing changes, they strongly shape hierarchical power relations (O'Brien & Broom 2014).

In addition, literature on health anthropology argue that women are predominantly more health conscious and are thus more predisposed towards preventive and treatment practices compared to men (Pearson & Makadzange 2008; Harwood & Sparks 2003). Most studies attribute men's delayed help-seeking practices to masculine identities which portray males as self-sufficient and needing no help (Harwood & Sparks 2003). This study therefore seeks to critically explore these issues in a context where the mobile phone and mobile Internet are increasingly used by youths in tertiary learning institutions to access health-related information online.

The second and closely related hypothesis is that the mobile phone has the potential to become a 'disruptive' technology (Scanlon et al. 2005; Sharples 2002), capable of transforming social relations and balance of power in society in ways that are emancipatory to the erstwhile disempowered segments of society, particularly youth and women. For this study, the mobile phone's disruptive power manifests in digital media technology's ability to offer expanded social experiences as well as access to diverse knowledge competencies (including health-related knowledge) beyond originally possible during traditional media. As Geser puts it; whilst traditional legacy media "primarily supported centralized, formalized organizations, households and other supra-individual systems, cell phones increase the reach and capacity of decentralized, informal systems based on inter-individual interactions" (2006: 1).

These hypotheses will be tested via a multi-method approach involving a social survey, field observations and in-depth interviews to understand youth in tertiary learning institutions' reported experiences with the mobile phone and mobile Internet in the context of health seeking and social and health-related identity formation.

## **1.9 Thesis structure**

The thesis is divided into seven chapters. The first two chapters introduce the study and locate it in relevant literature and debates surrounding mobile phone use, with particular focus on young people. Specifically, Chapter one introduces the research aims, outlines the research problem and justifies the significance of this study. It justifies motivations of this research and identifies gaps in research requiring further empirical examination.

Chapter two situates this study into the socio-economic and political context of Zimbabwe and Africa in the broader sense. It outlines the state of health communication in Zimbabwe and the role played by the traditional media in these processes. However, it also highlights the challenges and gaps in using traditional media platforms for communicating health information in Zimbabwe, paving way for setting the possibilities of using digital media to overcome these limitations. The chapter also outlines the usage patterns and current statistics of internet and mobile penetration in Zimbabwe.

Chapter three introduces the relevant literature and theoretical framework within which this study is situated. It highlights in detail, the sociological concepts used for enquiring how young people experience the use of mobile phones and the Internet for accessing health information online.

Chapter four highlights the methodological framework used in the study design. It argues and explains reasons for triangulating the social survey with in-depth individual interviews and field observations. The chapter also outlines the method for calculating the sample for the survey as well as an overview of ethical considerations.

Chapter five presents and discusses the research findings using aspects of the domestication theory. It presents findings on how technology is converted by individual users and made into meaningful and usable objects as young people navigate their everyday lives. The field observation particularly presents a snap-shot of an ordinary day in the life of a university or collage students, with a view to capture the how technology and the social interface. As will be outlined, many of the findings seeks to

traverse and balance understandings of what students do in college, with friends, as well as in the privacy of their home or college residence, and how these practices shape their understanding of themselves in the more general sense, but also in the context of health and health related identities.

Chapter six presents findings on technology and young people's identity forming processes. Important in this section is the innovative use of the notion of 'disruption' to illustrate how technology might be viewed as disrupting everyday life in the more general sense. The chapter also delves into the disruptive tendencies of technology on established norms, traditions and practices that might be viewed as limiting young people's space for self-expression, independence and self-autonomy. However, in the constellation of these processes, the chapter also problematises the endurance of certain practices and belief system (especially patriarchal values). Despite the presumed self-autonomy that mobile technology users celebrate a new found independence, slow wheels of change in social norms means that traditional practices continue to hold sway as technology and socio-cultural practices interact.

### **1.10 Conclusion**

This chapter introduced the main research questions raised in this study. It provides the background context within which the use of mobile phones and mobile Internet are used in Zimbabwe. It also outlines the socio-cultural context of Zimbabwe as largely patriarchal and characterised by asymmetrical relations of domination. The chapter also introduces the theoretical and methodological tools used to answer these research questions.

## CHAPTER 2

### SOCIAL CONTEXT OF RESEARCH - ZIMBABWE

#### 2 Introduction

This chapter discusses the socio-political context for this study. It argues that the context of increased domestication of digital media technologies such as the mobile phone and the mobile Internet in Zimbabwe - like most parts of Africa – is comparatively faster than the rate of change currently taking place even in Western developed nations (Hahn & Kibora 2008), off, of course, a lower base. According to the Postal and Telecommunications Regulatory Authority of Zimbabwe, there is a decrease of active landlines in the fourth quarter of 2013 from 307,202 to 304,162 (representing only 15% of the telecommunications market share) reported in the second quarter of 2013, and a corresponding increase in mobile penetration (a percentage measure of active mobile phone subscriptions out of the country's total population) from 103.5% to 104.4% recorded in the same quarter (POTRAZ 2014).

As Chapter one previously argued, the context where the majority of people have access to smart phones present opportunities for youth in tertiary learning institutions to magnify their social and individual identities through the information that they consume online, including information related to general health and sexuality.

A substantial number of scholars argue that contemporary youth's proclivity and proficiency with social media is manifest of a generational shift, with the majority of youth having 'leapfrogged' more traditional communication technologies such as the landline to become more proficient in 'newer' technologies such as the mobile phone and the Internet (Napoli & Obar 2014; Napoli & Obar 2013; Fong 2009). In Zimbabwe, research needs to understand how youths' socialisation in the digital era has implications on their identities and health seeking practices.

However, the chapter also critically examines the rapid diffusion of these technologies into the everyday lives of ordinary people in Zimbabwe, which contrasts sharply with the difficult economic situation of many of the users. Most importantly, it investigates the role played by these technologies in the lives of youth who are economically and

politically alienated, and lack the means, knowledge and resources for understanding and for producing resistance to local structures of domination which impact on their ability to make independent and informed life choices (Wafawarova 2014). Recent literature argue that most youth in Africa can best be described as a lost generation captured by the failure of the African nationalist projects, where the adverse effects of political crisis and economic decline restrict young people's education, work, and political participation (Hansen 2014).

Zimbabwe's communicative space is retrogressively restricted since the early days of the political and economic malaise in 2000 (see Chiumbu 2004; Mano 2005; Moyo 2004 2007; Ranger 2004), with the ruling elite directly controlling the public press to shape public opinion (Moyo 2008). Against this background, are digital media technologies capable of opening up the public sphere, to provide a platform for both easier access to information and for discussions about that information?

As will be shown in the section below about the state of media in Zimbabwe, the alienation of the country from the international community on the one hand, and the continued domination and restrictive measures on the communicative space by political elites stifles the vibrancy of civic deliberation and the public knowledge of diverse interests, including health-related knowledge and identities. Access to information is critical to identity formation (Castells 2004; Garnham 1993), and the information potentially available through the social media expands the repertoires of youth in tertiary leaning institutions' cultural capital as well as amplify their experiential worldview.

In Zimbabwe, like most other parts of Africa, smart phones have leveraged access to the Internet for the greater majority of ordinary people, yet not much research has been done to understand how the unprecedented access to information changes people's circumstances, particularly about whether access to information on health and wellbeing has any effect on social power. One question would be if one of youth's uses for the mobile phone and mobile Internet is to access health-related information, will this in any way disrupt gender power and other hegemonic regimes of social control in obvious and radical ways? This is more pertinent in view of the perceived generational transition in youth socialisation brought about by modern media technologies. For this

study, it might be that the modern media technology has the potential to radically shift and expand youths in tertiary learning institutions' cultural repertoires and their subjectively position in ways that are emancipatory to social power.

From a cultural perspective, Hall (1992) identifies two ways of conceptualising modern identity; via the sociological subject and the de-centred subject. The sociological subject internalises the structures of society in social identity, and then externalises this identity through action in the social world (Hall 1992: 284). In latter part of the twentieth century, the coherent nature of social identity was questioned and the notion of a de-centred or post-modern subject was introduced, in which identity was seen as 'open, contradictory, unfinished, fragmented' (Hall 1992: 291; Schoon 2012). For this study, digital media technologies are seen as creating more fluid, open and fragmented postmodern identities as opposed to the sociologically stable and crystallised identity articulated in the sociological subject.

However, social identity remains central in this study as it helps examine how cultural norms and practices - the more crystallised and enduring identities - ordinarily influence the way young people perceive themselves, but also as active seekers of health information. On the other hand, the study uses the notion of the de-centred or post-modern identity to understand if youth's use of modern media technology unsettles the more stable notion of identity proposed by the sociological model of identity formation, and particularly about how modern technologies (the mobile phone and mobile Internet) provide repertoires of knowledge and information that challenge enduring beliefs, practices, and sexual identities and gendered roles.

This chapter also argues that the Zimbabwean context characterised by high media polarisation, social and political polarisation and overt media alignment with party politics (Tsarwe & Mare 2015; Mabweazara 2013; Moyo 2010; 2009) leaves very little space for the deliberation of civic issues such as public health education and youth welfare. The once highly successful health advocacy carried out by the public media post 1980 independence (Piotrow et al. 1992) has been largely replaced by a more parochial "public relations" political commentary based on the press' allegiance to party politics (Moyo 2010), resulting in the alienation of audiences from public media and the national discourses that forms part of its reportage (Moyo 2010).

In this environment, the youth are the most affected as they are politically disenfranchised, lack opportunities and generally do not identify with the political ideologies propagated by the old guard of political elites of the day.

Yet discourses of the liberating power of technology proliferate (MacKenzie & Wajcman 1999), with unequivocal proclamations of emerging forms of cultural resistances seen as potentially capable of rising against forms of oppression such as those stated above, and expressed through the so-called “resistance identity” (Fiske 1987, 1987; Castels 1997). However, in contrast to prevailing Western dominated research about the mobile phones ‘on the go’, this chapter outlines a social context replete with political and economic uncertainties and social stagnation. The chapter critically investigates the ‘meaning’ and role of the mobile phone when life is not necessarily ‘on the go’, but rather is stuck in inertia with limited choices on the one hand, and on the other, the crucible forces created by the fast moving global flows of information vis a vis a crystallised distinctiveness of local identity (Koc 2006; Appadurai, 1996). In such an environment, what role is played by the mobile phone in constructing one’s identity and how does this relate to their perception and management of one’s own health?

## **2.1 Zimbabwe in the digital era**

Zimbabwe is a relatively late comer into the digital arena (Moyo 2009), but there is both evidence and emerging scholarship about the increasingly widespread use of digital media technologies in political and civic processes (Mabweazara 2013; Moyo 2007), in monitoring of electoral processes (Moyo 2009) and offering alternative spaces for mediating the country’s political and economic crisis to Zimbabweans, both in Zimbabwe and in the diaspora (Moyo 2009; Atton & Mabweazara 2011).

According to a report produced in 2012 by Opera (the company that owns the world’s leading mobile Internet browser), Zimbabwe is the fastest growing mobile Internet market in Africa along with Morocco and Ethiopia in terms of metrics such as page view growth, unique visitors, page view per user and data transfer (Mutambo 2011).

At the same time, mobile phone ownership has also spread to ordinary people in response to the economic stability brought by the use of stable currencies such as the

South African Rand, the US Dollar and the Botswana Pula (Mabweazara 2013). In addition, phone ownership suddenly became affordable to many after 2008, as a result of the cheap Chinese web-enabled handsets that have duty-free entry into the country (Frost & Sullivan 2011).

In 2010, the construction of a fibre link between Harare and the southern town of Beitbridge, which is connected to South Africa's fibre cable system by Econet Wireless Zimbabwe, has further boosted data traffic whilst other licensed data carriers are also starting to roll out fibre-optic networks across the country and establishing links to the international undersea cable (Freedom House 2012). To date, mobile data consumption surpasses that of voice, and mobile phone companies offer promotional incentives for customers to use voice. The reason for the decline in voice calls is because it is expensive to call on voice than accessing the Internet. Currently, there are three mobile service providers: Econet Wireless Zimbabwe, Telecel and NetOne.

### **2.1.1 Subscription by operator**

According to the recent report produced by the Telecommunication Regulatory Authority of Zimbabwe, the country continues to record net growth in mobile phone subscriptions, reaching a penetration rate of 104, 4% by December 2013 (POTRAZ 2014). By the end of the 2014 quarter, mobile penetration rate was reported at 106.4% which is above the world average of 67 mobile lines per 100 inhabitants (POTRAZ 2014; TECHZIM 2014). The table below shows the mobile phone penetration by operator subscription by the first quarter of 2014:

Table 1: Mobile Phone Penetration by Operator Subscription. Source: POTRAZ 2014, Operator Returns

Name of Operator	Forth Quarter 2013	First Quarter 2014	Net Additions	Quarterly Variation %
Econet	8, 720, 869	9, 075, 925	355, 056	4,1%
Telecel	2, 578, 559	2, 459, 369	(119, 190)	(4,6%)
NetOne	2, 333, 739	2, 356, 815	23, 076	1%
Total	13, 633, 167	13, 892, 109	258, 942	1,9%

### 2.1.2 Mobile data

Regarding the Internet, Zimbabwe reached 41.9% penetration rate by end of 2013. The most popular mode of accessing the Internet is through the mobile phone's GPRS/EDGE and 3G, and this accounts for 98% of the total Internet subscriptions (POTRAZ 2014). A summary of Internet subscriptions is as shown in the table below:

Table 2. Summary of Internet Subscriptions. Source: POTRAZ 2014, Operator Returns

Technology	3 <sup>rd</sup> quarter 2013	4 <sup>th</sup> quarter 2013	Quarterly variation
GPRS/EDGE/2G/3G/HSDP	5,083,138	5,348,433	6.40%
LTE		128	—
Leased Lines	1,359	1,424	4.80%
Dial up	8,902	8962	0.70%
XDSL	20,236	24,724	22.20%
Wimax, Wi-Fi	9,632	9,858	2.40%
CDMA	78,091	77,539	-0.70%
VSAT	334	331	-0.90%
Fibre links	1,301	1,311	0.80%
<b>TOTAL</b>	<b>5,202,993</b>	<b>5,474,710</b>	<b>5.20%</b>

### 2.1.3 Subscriber plans

In Zimbabwe, the majority of mobile subscribers (98 % - representing 13.6 million subscribers) are on pre-paid tariff plan against 282,948 post-paid subscriptions (POTRAZ 2014). The increased preference for the pre-paid services is mainly because

of the service's flexibility and also the fact that it allows the subscriber to enjoy promotions which are not usually offered on the post-paid platform (POTRAZ 2014; TECHZIM 2014).

## **2.2 Research settings: Students in tertiary learning institutions**

Universities play many roles. The university is a place of learning (Lahelma 2002), progress and modernity (Amoa 1979; Gelfand 1973), a place where students are introduced to bourgeois values (Lukose 2001; Roberts 1983; Armer & Youtz 1971) and where they are prepared for middle-class careers and lifestyles (Dwyer & Wyn 2001). Elsewhere, van den Berghe (1973) argues that students from poorer backgrounds expect upward class mobility as a result of university education whilst those from middle class still expect their university qualifications to protect them from downward social mobility.

However, whilst these statuses could be viewed as the 'norm' in most literature on university students, others argue that students create for themselves a world which they want to experience during college life (Moffat 1989), and this world is often at odds with college and parental authority, and mostly also counter to socially constructed behaviour and values. It is a place of exploration, fun as well as experimentation – including sexual experimentation (Boswell & Spade 1996; Sanday 1990; Moffat 1989).

The social context of college campuses in Zimbabwe is characterised by the growth and normalisation of certain identities which, with time, become crystallised. This study argues that these identities have implications on how youth embody their psychological, physical and health consciousness. For example, the notions of Chi-UBA<sup>4</sup> and Chi-USA<sup>5</sup> (Terry et al. 2006; Masvaure 2010) are implicated in the ways youth act out masculinities and femininities.

The concept of Chi-UBA is actualised through the Goffmanian sense of being an “all activity [by] an individual which occurs during a period marked by continuous presence before a particular set of observers and which has some influence on the observers” (Lemert 1997: 97). For male students in all institutions of tertiary learning in Zimbabwe

---

<sup>4</sup> UBA is an acronym for University Boys Association

<sup>5</sup> USA is an acronym for University Spinners Association

(but particularly at the UZ), UBA is a camaraderie generating male student ‘title’ recognisable only with college students, and which carries with it a sense of masculine superiority over ‘others’ who are not UBAS and above all, it is a title that male students like displaying to non-university girls who mostly associate college boys with a certain level of sophistication. During the researcher’s enrolment at the University of Zimbabwe, *chi*-UBA resonated with student political activism characterised by confrontation with authorities and police. Whilst every male student could be regarded as a UBA, there was a sense that being a real UBA involved certain masculine qualities enshrined in publicly acting out in all spheres of life considered male dominated – in student politics, social life and intellectually.

On the other hand, *Chi*-USA (University Spinster Association) is used more conservatively and self-consciously by college ‘girls’. It is perhaps something to do with the perceived degrading noun “spinster” (which means an unmarried woman, typically an older woman beyond the usual age for marriage) which might explain why female students cautiously embrace the title with reservations typical of conservative societies such as Zimbabwe where marriage is highly respected. Articulating these identities is important in giving context to how youth in tertiary institutions assume their identities, and particularly also how these identities have implications on sexuality and health-related behaviours.

In addition, and using Hall’s (1980) earlier conceptualisation of identity as constituted in structures of society, and also how the latter twentieth century version introduced to denote the individual as a de-centred or post-modern subject, the context under investigation provides grounds for understanding how youth identities have implications on the way they take control of their bodies in the context of health seeking. The informal titles introduced above clearly have implications on how youth identify themselves as having moved up the social ladder through which more opportunities for self-exploration, experimentation with life and luminal possibilities promise self-realisation and completeness.

For this study, and particularly in view of its interest in gender and identity, college life is also expected to a place where gender roles are re-thought, challenged and redefined as students actively fashion feminine and masculine identities suited to the ostensibly

bourgeois culture that college life inducts them into (Masvaure 2010). Thus, the college experience is expected to be transformative in many ways – socially, politically (indeed, college students have been at the forefront of political activism in the 1980s and 1990s in Zimbabwe and in other countries across the world) as well as academically.

Drawing on anthropology, scholars researching on college students (for example, see Masvaure 2010) makes use of the concept of ‘liminality’ to describe how entry into university present students - particularly women students - with an opportunity to actively construct sexual identities that subvert and challenge broader societal gender roles as well as provide a temporary reprieve from the strictures of everyday life (Shields 1991). In a largely conservative society such as Zimbabwe, sexuality, and especially pre-marital sex, is harshly condemned, whilst dominant societal norms celebrate a modest, disembodied female sexuality (Masvaure 2010).

Turner (1967:95) defines liminality as the state “betwixt and between the positions arrayed by law, custom, convention’. His argument was that all periods of transition are liminal, and progresses through three stages: First an individual is ritually (and even spatially) separated from the wider society (i.e. the pre-liminal state); followed by the period of transformation (i.e. the limen); and lastly, the transformed individual is reincorporated back into society (post-liminal). The stage of liminality is, according to Turner, highly permissive and anti-structural in the sense that they involve the suspension of everyday norms, values and custom.

For this study, this concept is essential for exploring how entry into college life, and armed with the supposedly powerful technological gadgets of the mobile phone and mobile Internet, students might induct themselves into a world of unlimited possibilities, and particularly where they assume new identities that subvert socially inscribed roles of their identities. Would it be expected that both female students and male students will assume new identities that have implications on their health identities? Even more, would the possibility of accessing more health-related information online (more than would be possible through the traditional national media) be in any ways ‘empowering’ or ‘liberating’?

But however, and contrary to the expectation that college life might be viewed as 'progressive' places with more liberal views where students can confront and resist conventional gender and sexual roles' (Roberts 1983), this is contradicted by literature which argues that the university life is actually a place where male students in particular actively participate in the maintenance and reproduction of gender stereotypes. Indeed, sexual aggression towards women for instance seems play a role in the creation of male students' masculine identities. At the University of Zimbabwe, and other tertiary leaning colleges across the country, sexual harassment and even sexual violence has been seen as rife among students (Terry et al 2006; Gaidzanwa 2001), not just from male students, but also perpetrated by lecturers and other academic staff.

Most public tertiary learning institutions in Zimbabwe (including the three institutions sampled for this study) attract students from poor urban working-class and poor rural backgrounds (Terry et a. 2006; Bennell & Ncube 1994). The economic difficulties faced by Zimbabwe from the beginning of the 2000s have not spared institutions of higher learning either. With the suspension of government funding at the mayhem of the structural adjustments programme of the 1990s, the gradual increases in tuition fees over the years (which currently ranges between US\$600 to US\$900 per semester), as well as limited campus accommodation, students' life has become more difficult. This has seen increases in transactional sex-based relationships on campuses (Terry et al. 2006; Masvaure 2010). The removal of government support for students in institutions of tertiary learning means that students have to depend on their parents who are already financially straightened. This also opens up opportunities for the risk of transactional sex raised above.

However, the context of a bleak economic situation highlighted above contrasts sharply - as is the case elsewhere in other less developed countries - with the conspicuous consumption and proclivity for social media technologies by youth in Zimbabwe, particularly the mobile phone and the mobile Internet. The popularity of social media in Zimbabwe was spurred by the privatisation of the telecommunication sector which has seen Econet Wireless Zimbabwe Limited, Telecel Zimbabwe and the publicly-owned

TelOne offering promotions to pre-paid service subscribers (even though normal rates remain high comparative to the region – POTRAZ 2014).

In terms of social media use and consumption - especially the mobile phone and mobile Internet - youth at workplaces and universities account for the biggest percentage of users (Atwood 2010), and as my study will show in Chapter 5, most of the students interviewed possessed a mobile phone with Internet access. As previously outlined, mobile phone penetration is extremely high as is also indicated by statistics of national subscriber rates which are above 100%. The construction of a fibre link between Harare and the southern town of Beitbridge, which is connected to South Africa's fibre cable system by Econet Wireless Zimbabwe, has further boosted data traffic whilst other licensed data carriers are also starting to roll out fibre-optic networks across the country and establishing links to the international undersea cable (Freedom House 2012).

However and as already indicated, Zimbabwe's economic outlook is such that life opportunities for youth remain few and the prospects for getting a job are bleak. These structural factors characterised by prospects for poverty and the related impact that this has on an individual's self-worth and sense of efficacy.

In the section below, I highlight Zimbabwe's health care system to create some perspective about some of the structural conditions which young people prospectively face, and which might stand in their way towards self-actualisation.

### **2.3 Zimbabwe's health care system**

Zimbabwe's health system can be described as three-tier, comprising the mainstream western medical practice, traditional healers and faith-based healers (USAID 2010; Machings 2011: 2; Mafunda et al. 2012: 118). Much of the health care services in Zimbabwe are provided by the government (65%) and complemented by not-for-profit missionary/ church hospitals and private-for-profit institutions (WHO; Ministry of Health and Child Welfare 2013).

Currently, there is no national health insurance system in Zimbabwe, leaving the unemployed and youth out of medical insurance. However, students in tertiary learning

institutions have a compulsory medical aid cover, which they pay for in addition to tuition fees. Most workers in the country cannot afford private hospitals and clinics, so they are cared for at state and mission hospitals and clinics, which are less expensive. However, most companies participate in privately run health insurance providers (commonly known as medical aid societies in Zimbabwe) by paying monthly premiums for their employees whilst the government employees contribute premiums to a mutual society health insurance scheme (the Premier Service Medical Aid Society (PSMAS)).

Public health care services are free for pensioners and the under-fives, while others either pay in cash or use private medical aid schemes (Ministry of Health and Child Welfare 2013; Mafunda et al. 2012). The mainstream medical practice is supported by four central hospitals with specialist facilities, plus a large number of peripheral hospitals and clinics (Mafunda et al. 2012:1). Due to poor funding, a number of public health facilities are under-capitalised, poorly resourced, few and difficult to access.

Over the past few decades, Zimbabwe's attention has centred on the development of primary health care and preventive medicine, with curative services largely involving infectious and nutritional disorders (Mafunda et al. 2012:1). The public media played a pivotal role in educating the public on the importance of disease prevention and nutritional issues. More recent developments have seen attention focused on chronic disease, of which cancer forms a large part (Mafunda et al. 2012:1). On average, above 5,000 new cancer patients are recorded by the Cancer Registry each year; but this is believed to be a gross underestimate, with the actual figure thought to be in the region of 15,000 (Mafunda et al. 2012:1).

In Zimbabwe, like most other African countries, successive historical transitions shifted health knowledge systems from mostly 'traditional medicine' towards western scientific medical practice and systems (Waite 2000; Mafunda et al 2012). Before colonial occupation, traditional medical practitioners were custodians of indigenous knowledge and were responsible for identifying, treating diseases as well as imparting health knowledge to generations of Zimbabweans (Dewa 2008; Waite 2000).

Colonial occupation forcefully shifted knowledge systems in favour of western scientific knowledge, with a strong missionary component to health provision and

education, particularly by the London-based London Missionary Society (LMS) (Mafunda et al. 2012; Waite 2000). These structures constituted what became known as the Native Medical Services (Waite 2000: 237), which was characterised by official resistance and repression of indigenous knowledge's systems as 'primitive and barbaric' (O'Brien & Alex 2013; Broom Mafunda et al. 2012; Murigwa Kanchense 2006; Chikovore 2004).

Persistent efforts during the liberation struggle, and in post-independent Zimbabwe saw some reclamation of some of the values of traditional medical practice, and later, even the formal recognition of such practice, which is now governed by the Zimbabwe Traditional Medical Practitioners Act (revised 1996) (Waite 2000; Sackey & Kasilo 2010: 95). Currently, traditional medical practice is officially recognised and runs parallel with western medical practice in both major cities and in rural Zimbabwe.

Post-independence from 1980, health knowledge competencies of Zimbabweans, especially at primary health care level, was greatly shaped by and relayed through an ambitious drive that substituted the Native Medical Services with Village Health Workers (VHW) who were the "first level of contact between the community and health service" (Waite 2000: 243; Ministry of Health and Child Welfare 2013). These structures however, after many years of proven success (Mafunda et al. 2012; Waite 2000) remain incapacitated in the face of strained government spending following the austerity measures driven by the infamous Economic Structural Adjustment Programme (ESAP) of the 1990s, and thereafter by a decade-long economic crisis that persisted until about 2009 (Ministry of Health and Child Welfare 2013).

Following the 2000-2008 economic crisis, the health care system almost literally collapsed, with numerous health facilities closing down or operating at much reduced levels (WHO 2012; USAID 2010). Government reduced spending on basic social services, including health education. The mass media (mostly TV, radio, newspapers, and magazines) which once played a critical role in educating the public on general health issues in Zimbabwe (see Pitts & Jackson 1993), have been less able to do so more recently. Gendered perceptions of reproductive diseases and illness in Zimbabwe, including the prevailing perception by youth, re often located and constituted in

patriarchal ideologies which depict women as vectors in the spread of diseases (Chitando 2011).

However, the free and compulsory education for all programme post 1980 created a budding class of modern and educated black Zimbabweans, albeit with a continued perception of disease and illness along gendered lenses (Chitando 2011). For example, and as later turned out during interviews with youths at the three institutions of tertiary learning that participated in this study, both male and female students took it for granted that female youth would most likely engage in health-seeking practices more than males because they are naturally inclined to doing so. More recent research, however, found links between educational status and general health knowledge as well as the higher likelihood for health knowledge-seeking behaviour from the media among Zimbabwean youth (Aguero & Bharadwaj 2012). In these contexts, the case for mobile-centric media about health is arguably more acute in Zimbabwe.

#### **2.4 Media, health and science reporting**

Well established research and practice in the field of science and health journalism are of the view that journalism helps giving the public meaning to otherwise “isolated” scientific issues (Secko & Smith 2010; Amend & Secko 2011; Nelkin 1995). Over the past decade, there have been renewed urgent calls to more fully and openly discuss the fields of science and health journalism (Dentzer 2009; Secko & Smith 2010). This call has largely been articulated alongside growing concerns that the public be more “engaged” in the governance of emerging scientific and health technologies (Secko & Smith 2010), especially in view of developments related to personalized medicine, genetically modified crops, and biofuels.

In addition, digital media technologies such as the mobile phone and the Internet are making available a plethora of information related to health informatics and these are accessible to the general public for consumption. This has spurred the pace of scientific and health research and particular interest from journalists but also raising a host of legal, ethical, and political questions over topics such as privacy, consent, the commodification of human tissue, food security, and global health disparities (Secko & Smith 2010; Amend & Secko 2011).

Theoretically, the premises for health and science journalism is informed by the need to keep the public up-to-date on scientific and health developments, so that they can make appropriate decisions when faced with competing scientific and health arguments (Nelkin 1995). One key objective of this study would therefore, be to investigate users of health information accessed through mobile Internet is made sense of and these experiences shape their health behaviour patterns.

## **2.5 Highly politicised media, with limited space for health and civic discourses**

Zimbabwe particularly provides an interesting case in the study of health communication. Over the years, the space for traditional mass media in Zimbabwe has clearly been restricted and under government monopoly (Moyo 2009; Chiumbu 2004; Mano 2005; Moyo 2004, 2007; Ranger 2004). As a result, both the print and broadcast media have been somewhat “crowded out” by political elites with very limited opportunities for public engagement, and more of propaganda and poor programming content (Malleus 2011).

These factors, Malleus argues, are deemed as the primary causes that have frustrated and driven away local audiences from local media, especially the Zimbabwe Television (ZTV) towards other satellite television stations beaming from outside of Zimbabwe (2011). The same can be said of the local press which has consistently churned out parochial “public relations” commentary based on the press’ allegiance to party politics (Moyo 2010).

As such, research over the years has consistently pointed that the differential access to both the press and broadcast media in Zimbabwe - which is largely based on political orientation - has negating effects to the spirit of public service programming (Moyo 2009). For example, the only public broadcaster (the Zimbabwe Broadcasting Corporation), which is supposed to be driven by a public service ethos (see Broadcasting Services Act 2001) is clearly not accessible to youths, the civic society groups (as well as different political parties) in order for them to participate in a crucial nation-building process.

Zimbabwe remains the only country in the sub-region with a de facto state monopoly broadcasting system (Moyo 2006). The state has enjoyed dominance in ownership and

control of the broadcasting sector (both radio and television) since independence, with repeated frustration and subsequent closure of the only but short-lived private television station; TV2<sup>6</sup> (a product of three private broadcasters, namely; LDM, Munhmutapa African Broadcasting Corporation (MABC) and Joy TV (also known as Flame Lily Broadcasting). In this kind of a media landscape, information related to civic and health issues compete for space with powerful political and commercial interests.

Echoing the same argument, recent literature on Zimbabwe's highly restrictive media environment shows the extent to which digital media technologies such as mobile phones, Internet blogs and online newspapers became alternative forms of communication during the Zimbabwe crisis (Chiumbu 2012; Moyo 2009). More recent literature on Zimbabwean media landscape argue that digital media technologies, especially online media and the mobile phone have become alternative sources of public information and gateways to other territories shunned by mainstream traditional media (Mare 2013; Mabweazara 2013; Moyo 2010).

As Mabweazara puts it, the convergence trends associated with the mobile phone has opened up more opportunities and informational choices to an audience that has largely been cut off from the rest of the world (2013). But most importantly too, there is evidence that digital technologies – as propellants of globalisation through both the greater connectivity and the flow of information that it is has been able to achieve (Goneos-Malka et al 2013: 124) - is indeed a way to reintegrate the Zimbabwean public to events happening in other countries and regions.

In environments like Zimbabwe, the use of mass media for public health promotion often contest for space in a public sphere filled with other media messages from competing sources (Randolph & Viswanath 2004: 419). Like elsewhere in the world, large amounts of money and effort are invested into mass media campaigns to get the public to eat healthily, get moving, stop smoking and practice safer sex. Such interventions vary in their success rates and their effectiveness is difficult to measure (Randolph & Viswanath 2004: 419-20). Given the context of Zimbabwe's media

---

<sup>6</sup> The fact that these private broadcasters did not have full licences, and were dependent on the goodwill of the ZBC and those who controlled it was in itself a hindrance to their freedom of operation (Moyo 2004)

environment that is crowded with politicians, it may fairly be reasonable to argue that this crowding of the public sphere by dominant political discourses pushes to the margin other discourses concerned with issues such as health and young people.

With an economy sliding under a hyperinflationary environment in the early 2000s, (though this largely ended in 2009 with the introduction of stable currencies such as the United States Dollar, South African Rand and Botswana Pula), together with the alienation of the state from traditional international donors, there is limited budgetary spending on the health care system, and public health education suffer as a result. In addition, the increased international spotlight on the Zimbabwean government and its inability to deal with domestic economic and social problems resulted in the state assuming a more authoritarian grip on the flow of information, including health information where the government at some point desperately suppressed the state of public health care and its inability to deal with cholera and typhoid epidemics across the country as a result of shortages of clean drinking water (Solomon et al 2008).

## **2.6 Gender disparities in access to information and related technologies**

Whilst the continent has seen an improved communication infrastructure following the widespread liberalisation of the telecommunication sector and the entry of privately owned mobile telecommunication companies, the United Nations reports that a key impediment to social development in the continent is an enduring lack of access to information for the greater majority, particularly for women and youth (United Nations 2011). According to the functionalist perspective of media, information is central for enabling citizens to participate in democratic processes so as to make informed decisions and choices (Laswell 1948; Wright 1960). Media is seen as vital in providing information for the general public to make informed, rational decisions in the day to day lives, and particularly that access to the media and diversity of opinion are enriched when ownership and control is left to the market.

However, the reality of post-colonial Zimbabwe is such that the state remains a central player in the economy, wielding immense power in the ownership and control of the media and information sector (particularly the broadcast and print media) so that information becomes a ‘managed’ commodity. In Zimbabwe, despite the rapid

appropriation of media technologies, and a comparatively high literacy level relative to the continent, equitable access to quality information by all citizens may be difficult to attain where the quality and conditions of life for women and the youth remain largely unchanged, or at least comparatively lags behind conditions in more developed societies (Hervish & Clifton 2012; Kwinjeh 2007; Mawarire 2007; Gordon 2004).

Women and youth's inability to gainfully participate in the national economy also works against them accessing the necessarily economic power to acquire information technologies and thus participate in the 'information economy'. From a global perspective, the observation that a limited number of women are involved in high-tech jobs, including their limited participation in creating online content (Wajcman 2008) raises the question about how this impacts on women's life opportunities, self-formation, as well as the representation and articulation of discourses particular to their needs.

In Zimbabwe, the limited participation of women in the national economy, together with limited opportunities for girls points to lack of women's autonomy and agency to fully participate in the so-called information economy. As already highlighted in Chapter one, participating in the information economy requires material resources, which most women do not have access to, and this applies also particularly young women in Zimbabwe. Whilst the government of Zimbabwe has made strides towards the empowerment of women particularly through legislative means<sup>7</sup>, patriarchal norms remain entrenched in society (Rutoro et al. 2013). In a study about the role of women in contemporary Zimbabwean politics, Ngoshi & Mutekwa (2013) cites the entry of the female body into public and political spaces through performance in propaganda jingles in the electronic media as ways in which the political elite uses dominant codes of masculinity and femininity to buttress popular support through the exploitation of women. Even in contemporary Zimbabwe, whilst the modern urban family might

---

<sup>7</sup> For example, a number of such policies include: the Zimbabwean National Gender Policy Implementation Strategy and Work Plan (2008– 2012) which ratified the protocol of the African Charter on Human and People's Rights (1986) on the rights of women in Africa. The government of Zimbabwe has also signed, ratified and acceded to United Nations Universal Declaration of Human Rights, Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) and the Beijing Declaration and Platform for Action on gender equality and women empowerment

constitute sites where hegemonic customary practices are loosened, these practices are reproduced and reinforced through various social institutions (for example, religious institutions, marriage institution as well as the extended family).

These issues point to the socio-economic background against which this study is premised, and the focus on gendered experiences with technology partly addresses these. The context of material deprivation for both youth and women highlighted in this section only gives picture to economic and material imperatives that have implications on the way youth use technology and the information accessible through it to navigate structural barriers towards social autonomy and self-formation. However, more enduring also are societal influences such as cultural practices, belief systems and norms related to the way youth conceptualise their health and sexualities, and the section below captures these issues in detail, particularly as they relate to the context of this study.

## **2.7 Sources of health information for Zimbabwean youth**

Societal influences have a greater bearing in terms of young people's pathways to health knowledge systems, even though modernisation and increased urbanisation is shifting this. Traditionally in Zimbabwe, aunts, uncles and other extended family members provided health information to youth, especially information on adolescence, courtship, marriage and sexuality-related information (Kim et al. 2001: 11). This is however changing in view of increased migration to urban centres and the distances it creates between family members. The result has been that parents are now expected to take greater responsibility in this area, but traditional norms have not prepared these parents to take up this unaccustomed role (Kim et al. 2001).

In addition health care workers such as nurses are also not prepared to fill this void because first, they share the overall societal bias against adolescent sexuality and second, they lack the skills needed to communicate with young people about sensitive topics (Kim et al. 2001). Like most conservative African cultural settings, it is still contested whether it is appropriate to provide information about contraception to youths in secondary schools in Zimbabwe and whether contraceptives themselves should be provided. As one study commissioned by the Zimbabwe National Family Planning

Council (ZNFPC) and United Nations Population Fund (UNFPA) concluded, young people in Zimbabwe generally have inadequate information about reproductive health issues, lack the skills to negotiate with their partners about delaying sex and have limited access to reproductive health services (Basset & Sherman 2000). This study enquires into the possibility for digital media such as the mobile phone and mobile Internet to fill these gaps. This is especially so in view of a context where the public media is under capture from both political and business elites (Moyo 2009, 2010), and less inclined to its public service role.

Post-independence, mass media (radio and print) played a critical role in health education in Zimbabwe, with topics under discussion ranging from immunization, water and sanitation, hygiene, family planning and AIDS/STDs (Dehne & Hubble 1993: 530). Aggressive media advocacy coupled with a shift from the colonial primary health care system that was characterised by a curative, urban-based and minority focused system to one which emphasized health promotion and preventive care to the majority rural population was in many ways commendable and successful (Woelk 1994: 1027). Immediately post-1980, Zimbabwe's primary health care system was hailed as successful (Woelk 1994).

Indeed some successes were rapid and marked. Immediately post-independence, visible signs were recorded in the drop in infant mortality from a rate of between 120-140 per 1000 live births in 1979 to only 81 per 1000 in 1988 (Woelk 1994). The percentage of the population with access to drinking water increased from about 26% at independence to an average of 52% in 1987 (Woelk 1994). Increased access by the health system to the media was considered a major achievement over the 1984-1987 period (Dehne & Hubble 1993: 527). Towards the end of the 1990s, however, there appeared to be a tailing off of these achievements and in some cases even a reversal of earlier successes against a background of a deteriorating economy and a rise in inflation (Woelk 1994: 1027).

From the 1990s onwards, and as the government assumed more and more centralist tendencies, civic accountability was replaced by a rejuvenated nationalist ethos of the colonial resistance era, but this time twisted to garner support for the liberation veterans in government. As Moyo puts it, in the name of 'national interest', 'national security',

and ‘national sovereignty’, broadcasting has been characterised by two salient features: first, its legal status as a state monopoly, and secondly, its location under the Ministry of Information which rendered it a political tool in the hands of the government of the day (2009: 12). These tendencies marked a radical departure from the more public service orientation assumed by the public media in the years following the country’s independence.

The use of media for health education as an important component for primary health care to combat different health conditions and diseases such as malnutrition, diarrhoea, malaria, bilharzia and sexually transmitted diseases (STDs) in post-colonial government (Dehne & Hubble 1993) gradually dwindled in face of reductions in funding. Whilst the government managed to monopolise broadcast media under the ambit of the Ministry of Information, this was to the detriment of advertising revenue to a broadcasting system that was already suffering from poor government funding. Protracted years of economic melt-down and increasing public unrest spurred further the government’s control over broadcasting media and using it as a mouth piece for the ruling elite’s propaganda.

However, as in most other African countries, the most accessible media in Zimbabwe is radio (Kivikuru 2006), and in agreement with this, a number of studies have consistently shown that radio was the dominant source of youth’s knowledge about contraception and other issues to do with health (Pearson & Makadzange 2004), especially for youth in the rural areas. Nevertheless, informal sources such as peers and family members are shown to be other sources of health information for youth. But as this study argues, mobile penetration in Zimbabwe extends into rural areas (Chiumbu 2012) so much that the rural urban digital divide is less perceivable, and youth proficiency with the mobile phone technology is also high.

Like many other African states, the shrinking of public health services – blamed partly on increased privatisation and structural adjustment programmes throughout the 1980 and 1990 (Woelk 1994) – has seen the government placing much of the burden of health promotion into the hands of None-Governmental Organisations (NGOs) (Bastell 2005). It should be noted, however, that the intervention by NGOs in public health promotion in Zimbabwe was particularly a simultaneous response to an upsurge in

prevalence of HIV/AIDS. It should be noted too that as stated above, local political interests and donor interests have often been at loggerheads as they often clash for territorial and financial matters (Bastell 2005), with the potential effect of uncoordinated messaging. But importantly too, it often resulted in reduction in public health funding from donor agencies.

## **2.8 Gender and belief systems around health and illness**

To begin with, like most Africa societies, Zimbabweans perceptions and views about health, disease and ill-health are shaped by both western biomedical interpretations of ill-health as an outcome of physiological conditions or the African spiritual belief systems which see disease in terms of either displeased ancestral and religious spirits or witchcraft (Pearson & Makadzange 2008). Despite widespread use of western biomedical approaches to dealing with disease and illness, traditional beliefs together with their perceptions of sources and illness, stages of consultation as well as cure are still recognised. Methodologically, these understandings necessitate research approaches rooted in anthropology; an approach that requires the study of health as a culturally experienced phenomenon.

In addition, and for this study, the quantitative exploration of youth's health-seeking behaviours is also necessary to establish patterns and trends of particular practices, with a specific focus on whether the use of mobile phones to access online health seeking practices is significant in ways that reflect substantial evidence of emerging trends.

African people's epistemological conception of disease and its causes within the realms of the spiritual sphere reflects the grounding of health in the cultural, religious and spiritual context of people's lives (Bourdillon 1987).

However, the gendered nature of health interpretations brings another dimension which is one of the key analytical categories for this study. This study will look into how youth's self-perception (social identity) as 'male' or 'female' has implications on the ways they use digital technologies to look up for health information. One question would be to explore whether these practices are gendered and if one's socialisation and gendered identity influence these practices. There is global literature which argues that men are less likely to seek medical care or engage in preventive actions compared

women, and this reluctance appears to be tied to identity issues (i.e. masculine construction of “resilience” and “self-sufficiency”) which have inculcate the feeling that “Real men don’t need help!” (Harwood & Sparks 2003; Gascoigne et al. 1999).

The construction of masculinity where men are held to be strong, resilient and reserved (restricted expression of emotions), as well as tough and self-sufficient (Connell 1995 2000; Courtenay 2000) also play out strongly in Zimbabwe (Runganga et al. 2001; Pearson & Makadzange 2008). Like in most African countries, the hegemonic masculine discourse portray men in positions of providing security and leadership for the family, and, with regards to sexual liaison, as holders of inordinate amount of power in decision-making (Pearson & Makadzange 2008: 363).

In a study commissioned by the World Health Organisation to understand health problems associated with drinking among men and women, there was evidence that drinking is generally associated with displays of masculinity or male camaraderie and as such, can be used by male drinkers to deny or minimize health problems resulting from their drinking, or to regard drunken behaviour as normal or permissible (Wilsnack et al. 2004: 3).

In addition, literature shows that in patrilineal settings like Zimbabwe, inability to conceive in a marriage institution is never blamed on the man and as such implicitly impact on men’s health seeking behaviours and attitudes (O'Brien & Broom 2013). Due to the deep socio-cultural, psychological and health implications of childlessness, the burden of seeking help often lies squarely on the woman (Pearson & Makadzange 2008: 363), though it is also very probable that men might also pursue clandestine avenues which, for this study, may include accessing online portals. Health practitioners in health communication will learn important lessons from this when designing and implementing public health communication.

Hegemonic masculine constructions may prohibit men from openly seeking health information in view of the stigma around disease and its associated threat to masculinity (Runganga et al. 2001; Pearson & Makadzange 2008; Broom 2005). In addition, the stigma surrounding certain health conditions and illness often results in secrecy and health-seeking pathways that may give new insights and dimensions to

health communicators in surprising and unexpected ways. For example, HIV/AIDS brought a new dimension to already uncomfortable intersection around gender, disease and how the patriarchal discourse could easily be weakened by disease.

However, Carbone and others' study on the experiences of men with testicular cancer in Australia found that there was only limited evidence to support the notion that men delayed help-seeking out of concern about appearing weak or not masculine (2009: 1). They found that highly identified men might be reluctant to engage in appropriate behaviours due to the independent or self-sufficient aspects of that identification (). However, in Zimbabwe, studies on HIV and STIs have shown that males do shun public clinics for fear of being reprimanded by the nursing staff and the stigmatisation that men are generally promiscuous (Pearson & Makadzange 2008). It could therefore be argued that men might find the Internet less threatening to their masculinities and less judgemental as would be the case with public clinics.

Overall, and despite these contradictions, gendered perceptions of health raise concerns about the lack of understanding of men's experiences of health and illness (Cameron & Bernardes 1998) and as such prompts calls for research into the largely unexplored relationship between masculinity, help and health seeking behaviour and disease experiences (Volkers 1999). Help-seeking is located in the complex socio-cultural contexts of men's sexualities, masculinities and health (Pearson & Makadzange 2008: 361) and will be another key prism of exploration in this study

## **2.9 Conclusion**

The chapter outlined a number of key contexts in which this study is situated. It outlines Zimbabwe's social structure as one that is stratified along gender lines where women's lack of autonomy has been highlighted as limiting their agency in decision-making, including in decisions about their health and sexuality (O'Brien & Alex 2013; Broom Mafunda et al. 2012; Murigwa Kanchense 2006; Chikovore 2004). On the other hand, the state's dominance in the public sphere has been highlighted as limiting civic discourses and as largely alienated from the everyday needs of youth. The chapter argued that with the increased domestication of technology in Zimbabwe, there are

opportunities for the expansion of young people and women's social experiences and knowledge competences beyond the strictures of social power.

## CHAPTER 3

### LITERATURE REVIEW AND THEORETICAL FRAMEWORK

“The extraordinarily rapid diffusion of the mobile phone surely requires that we take the categories of social actors seriously and treat them symmetrically with our own analytical categories” (Wajcman 2010: 379).

“Cultural treatments of telecommunications are still comparatively rare, but in the case of the cell phone such an investigation is essential. Not only have cell phones developed their own ‘little’ cultures of consumption . . . we need to grasp and debate the place of cell phones and mobile technologies in our larger cultural settings . . . and what the implications of all this are for understanding culture at the most general level” (Goggin 2006: 3).

“In relation to media studies, my concerns are with how the object of study of the field might be constituted, so as to deal with the dynamics of current technological developments” (Morley 2007: 1).

### 3 Introduction

This chapter outlines and explains the two main theoretical approaches used in this study; that is, what has broadly been described as Cultural Studies theory (Hall 1980; Kellner 1989; Grossberg 1997; Hall 1992) and the various theories about the ‘domestication’ of technology (Silverstone et al. 1992). Researchers in Cultural Studies are concerned with how cultural practices engage with wider systems of power operating through ideology, class structures, ethnicity, sexual orientation, gender and generation (Hall 1980; Kellner 1989; Grossberg 1997; Hall 1992; Morley 1992). For this study, Cultural Studies’ theories of identity, hegemony, counter-hegemony and agency provide theoretical lenses for understanding whether and how youth use digital media technologies to negotiate with social power. On the other hand, domestication theory describes the processes by which innovations; particularly new technology (such as the mobile phone and mobile Internet) is ‘tamed’ or appropriated by its users to make sense of the world around them (Silverstone et al. 1992, Haddon 2005). This will be explored in the context of technology driven health seeking practices. In the sections

that follow, the chapter provides a detailed overview of how aspects of the Cultural Studies approach and the domestication theory are used in this study to understand young people's use of digital media technologies in the context of health seeking practices.

### **Cultural Studies: Understanding mobile phone uses and social agency**

Cultural Studies research is often seen by its advocates as a political project of social transformation, as it looks at how contradictory forces of domination and resistance constitute a struggle for social and political change (Kellner 2001; Wasserman 2011). It is a research tradition concerned with understanding how the popular 'everyday' practices relate to the political; that is; how they related to the political transformation of institutions that produce and reproduce relations of domination (Wasserman 2011; Kellner 2001). Particularly important in Cultural Studies is the Gramscian model of hegemony and counter-hegemony, which attempts to explore how contradictory forces of domination on the one hand, and resistance on the other, aid the process of political struggle and emancipation from oppression and domination (Kellner 2001; Hall 1980).

In Cultural Studies, the Gramscian concept of hegemony refers to how dominant classes present their definition of reality (basically, their view of the world), in ways that produce consent from subordinate classes as 'common sense' or as the only sensible way of seeing the world. It refers to how the ruling class uses strategic discourses and ideologies to dominate subordinated groups. In the context of this study, an environment of a constrained media environment limits the range of discourses available on the public sphere. However, according to Gramsci, hegemonic dominance can be contested and resisted through the creating of 'counter hegemony' (1971; Lash 2007), that is, when subordinate classes deploy strategies that defy the subordinating system. In the context of this study, counter-hegemony might be seen as how digital media technologies enable young people to access information online which helps them see alternative understandings of their health and sexual identities outside the fodder provided by dominant mainstream media. Through access to a variety of information, including health related information, the net generation is potentially exposed to alternative worldviews, as well as ways of experiencing their everyday lives, including their sexual health identities.

In Chapter 2, powerful regimes of domination (such as, for example; the state and patriarchal hegemony) have been argued to manifest in relations of domination reproduced through powerful institutions such as the media, cultural beliefs and norms, education and religious institutions to ‘manufacture consent’ and legitimacy for the dominant class (Heywood 1994: 100-101; Gramsci 1971) in ways that serve to bolster their power and stifle revolt.

Drawing on Hall’s (1992) articulation of a postmodern de-decentred subject, new media technologies (particularly the mobile phone and mobile Internet) are seen as re-fashioning the identities of modern youth in ways that resist boundaries and limitations imposed on them by an alienating political environment, poverty and controlling social institutions that perpetuate asymmetrical power relations on gender basis. The ‘mobility’ embedded in the mobile technologies are seen as destabilising entrenched socially constructed identities so that instead of being fixed by the more stable traditional norms, belief systems and practices (such as, for example, patriarchal practices) identity becomes fluid, ever-changing, in motion and evolving (Stald 2008).

A key focus of analysis for this study would be to understand if this cultural mobility and fluidity is loosening patriarchal cultures that sustain asymmetrical gender power, or whether they are facilitating a generational shift towards a more empowered and self-autonomous Zimbabwean youth. The notion of mobile identity also suggests that because young people’s identities are fluid, they constantly negotiate who they are, how they *are* that identity, and with whom they are that identity (Stald 2008, Hall 1992).

By employing the Gramscian model of hegemony and counter-hegemony (Gramsci 1971, 1992), the British Cultural studies sought to analyze how the ideas of the ruling class, as well as other social and cultural forces of domination do not hold absolute power over society. This is because hegemonic domination can be contested and resisted (Kellner 2001). The Gramscian model thus allows for the contestation of power by subordinate groups. For this study, there will be a critique of how centres of power (for example, the state’s power to censor and regulate the media, hierarchical social structures and patriarchy) might be losing grip on social control as people’s identities

become more fluid and fragmented in view of increasing alternative sources of social experience and new forms of identities made possible through digital media.

In relation to this study, Cultural Studies' notion of 'resistance' (Fiske 1987; McRobbie 1994; Radway 1984) may be seen as the cultural practices of women subjected by the regimes and practices of control, including hegemonic views and ideas that construct them and the relationship between them in particular ways. There will be an exploration about how women use digital media technologies to engage with the dominant and gendered codes about women's sexualities, bodies and self-image as well as how youth find ways to negotiate the strictures of the state's hegemonic domination (described in Chapter 2). Conversely, the construction of hegemonic masculinity and its reliance on masculine codes of self-sufficiency (see Chapter 2) are a prism through which our lack of understanding of men's health-seeking practices might be revealed. The study will thus also explore how young men perceive online health seeking practices.

### **Domestication Theory:**

The study draws particularly on more recent or "second wave" expositions of domestication approach to the study of technology (Horst & Miller 2006; Miller & Slater 2000). Just as in Cultural Studies approach, the domestication of technology approach stresses the role of social agents in executing the *processes* of domesticating or 'bringing' the technology home into social settings where they are endowed with meaning and significance (Silverstone et al 1992).

But particularly important is the approach's notion of the moral economy of the household (Silverstone et al. 1992). The reference to moral economy of the household not only relates to the physical space of the domestic space (though it does), but it is also metaphorically to refer to the more intimate personal spaces such as browsing the Internet during commuting times or in campus residence. In cases where it relates to the physical space of the home, the moral economy of the household will be explored and problematised as a space where unequal relations are bred, exercised, entrenched and re-enacted in the wider social spheres outside the home. It is central to analysing how familial values, norms and aesthetic practices are negotiated by youth outside of the moral economy of familial surveillance and rules about the use of technology.

The domestication approach makes us to better appreciate why people use information and communication technologies in the way they do (for example, looking up for health-related information) and how these technologies also function to manage impressions, construct identities as well as function as tools to negotiate the strictures and limitations of everyday life (Haddon 2011).

Invoking the notion of 'economies' relates to how the household is involved in dialectical exchanges of ideas, values *as well as* the exchange of economic activities on the market of exchange of goods and services. It is therefore in constant interaction with the external world, with which resources it actively tapes into constructing its own autonomy.

The constant interaction between the household and the outside world indicates how individuals and household members constantly tape from the outside world for information, values, dispositions and beliefs that become resources through which individuals and groups form their own individual identities. For this study, youths' understanding of themselves, and how they express or excise their gendered identities arguably derive from their consumption of digital media (particularly the virtual environment) and its contents. Appropriating the notion of the moral economy paves way for investigating what, if any, are the possibilities that the interaction of youths with the (virtual and) outside world equips them with the ability to resist social authority and generational control?

For this study, particularly its concerns with gender relations, the household is also problematized as a space where patriarchal relations are bred, exercised and enacted. It is a space where young people's socialisation starts, and it also shapes their worldview as well as their (gendered) understanding of their identities, the bodies, sexuality as well as ideas about disease and health seeking.

However, as opposed to much of the earlier domestication studies which were predominantly about ethnographic studies of household uses of domestic technologies such as the television, the fixed landline telephone, the home computer (Morley 2006; Haddon; 1992; Ang 1992; Murdock et al. 1992) as well as, lately, the Internet at work

and at home (Hynes & Rommes 2006; Lemor 2006), this study looks at a technology that has, in other terms, ‘run wild’ (Bakarjieva 2011; Haddon 2007) from the domestic confines. The mobile phone offers opportunities for the expansion of domestication studies (particularly the notion of the moral economy of the household), to include technology studies ‘outside’ of the home.

In the sections that follow, the chapter proceeds by contextualising the study’s overall theoretical concerns with the notions of power, autonomy, agency and identity. Using the cultural studies and domestication approach to the study of technology, this chapter argues that these notions help us understand how youth in Zimbabwe engage with digital media technologies to get more informed about a range of knowledge competences, including health-related knowledge.

### **3.2 Towards social agency**

In the past few decades, some cultural strands in the media research tradition have begun to foreground an audience-centric approach, arguing that audiences are not necessarily passive consumers of media and technology but rather active ‘users’ or consumers of media with some degree of ‘agency’ in choosing media products and their related contents (Fiske 1987; Hall 1978; 1980). This strand of research largely rejects the once dominant media tradition which conceptualise the media as purveyors of ideological messages that inculcate passivity and elicit predictable responses from a largely uncritical and passive audience. In particular, the audience research tradition celebrates audience power and autonomy (Morley 2003; Kellner 2003; Morley 1996). It declared that audiences are “core-producers” of the cultural products through the meanings and practices that are part of the consumption process.

In the context of this study, the notion of social agency is central in exploring, for example, whether youth, and particularly female youth, display some level of conscious inclination or desire to shape and influence their own circumstances by acquiring some knowledge capitals related to health competency and related identities. But, this study will argue, such inclinations may only be triggered if youth are aware of their limiting circumstances, or if they have enough social and cultural capitals to align their field of

experience (Bourdieu 1991; 1986) towards resisting the structural limitations and the hegemonic influence that sustain and reproduce such limitations in the first place.

In the domestication literature, the concept of agency is particularly used to reflect how young people actively appropriate media and information technologies to make them usable in their household environment, and even in outside urban and social settings where young people experience their everyday lives. Social agency is reflected in the 'stages' of domesticating technology, which involves users as 'active' participants engaging with micro domestic and more macro transactions in the production of meaning. These stages are worth exploring individually to illustrate the role of social actors in this transactional process.

*Appropriation* starts when the mobile phone is purchased and owned and thus enters the life of the owner who endows it with significance and meaning in terms of its role in the social environment (Silverstone et al 1992: 2; Ling 2004: 28). For example, and in the context of this study, this is the stage when young people purchases the mobile phone or, with regards to mobile Internet, purchases mobile data with particular intensions; for example connecting with friends through social media applications or going online to look for health-related information. The study will explore the perceived uses for which digital media is purchased, particularly the amount of money that youth are willing to spend on these items. In domestication literature, the appropriation stage is the stage at which the alien commodity (coming from the marketing world) "crosses the threshold between the formal and the moral economies" (Silverstone et al 1992: 22).

*Objectification* is the stage that follows after appropriation and is the process when the technology device facilitates a 'self-creation' of the owner and his/her social space through its display (Silverstone et al 1992: 22). Objectification therefore also shows attempts at defining one's identity. For example, this occurs when youth buys additional accessories for the mobile phone (e.g. a pouch, screen guard etc.). It also relates to the display of the mobile phone amongst youths, which includes the display of the phone itself, the media (for example, photos) stored in the phone, and the way in which the phone is held and seen as a status symbol (see Chapter 5). These will then be related to everyday practices such as looking up for health-related information in order

to construct their sexual identity, for example. In this stage, the mobile phone's task is that of communicating the values and aesthetic sensibilities of its environment and owner (Ling 2004: 29).

*Incorporation* is primarily how the technological object is actually used within social spaces, and this may differ from normative uses portrayed in advertising (Silverstone et al 1992: 24) to uses such as online health search that amplify user experiences and help construct health-related identities. Whereas objectification relates to space and physical display of digital technologies, incorporation relates to time, schedule and routines. This stage is particularly important for his study in exploring the times that youth prefers to engage in online health seeking practices, how often they engage in these practises and the spaces (such as the bedroom – see Chapter 5) where these activities take place.

*Conversion* is the final stage of domestication, and basically refers to the process by which the object defines a relationship between a social space such as the household and the outside world (Silverstone et al. 1992: 25). This is the process by which the technological object converts meaning across the border between two social worlds, so that the very particular meanings of the device in a highly contextual social space are converted back into broader public society (Silverstone et al 1992: 25). In this study, conversion may relate to the ways in which the mobile phone and mobile Internet mediates meanings and worldviews from the larger social spheres and social discourses circulating in the larger public sphere, but also how young people receive, internalise or inflect these meanings to suit their particular social context and position of subjectivities in a largely stratified world. Without a successful conversion phase, meanings remain private and insignificant (Silverstone et al 1992: 25).

Expanding the cultural studies' rejection of the all-powerful media, domestication approaches have been able to put the user/consumer at the centre of analysis (Haddon 2011). Whilst in Cultural Studies the notion of social agency is actualised by audiences reading cultural texts in ways that ascribes oppositional meanings from the dominant text, or by contextualising dominant cultural texts to suit their local needs (Hall 1980; Fiske 1986; 1987), the domestication approach was largely developed to understand how society addresses the ways in which technology is converted to the service of

social actors. It is less to do with how readers circumvent or are entrapped by ideological meanings inscribed in dominant text (see Hall 1980) than it is about appropriating technology and making it function to construct certain identities, aesthetic values and tastes. For this study, there will be an exploration about how the mobile phone and mobile Internet are converted into the service of social actors by youth in a particular social-historic context.

Various constructivist approaches have been developed in attempts to move beyond the deterministic notions of technology popular in some of the media studies research, in ways that both Cultural Studies and the domestication approach clearly addresses. Such constructivist approaches attempt to discern where the tension is between technology's transformative capacities and social agent's capacity to utilize technology and shape it in their use (Salter 2003: 121).

Formulated from within a sociological perspective, Giddens' structuration theory (1979; 1984) is seminal in providing such perspectives as it posits that structure and agency are always mutually dependent and internally related. Structuration theory offers 'an account of human agency which recognizes that human beings are purposive actors, who virtually all the time know what they are doing . . . and why . . .' (Giddens 1984: 258).

Orlikowski (1992) re-contextualised the structuration theory in the study of technology to denote technology's duality and flexibility –that is duality in terms of technology being 'constructed by actors working in a given social context', and the same technology being 'socially constructed by actors through the different meanings they attach to it' – and flexibility with regards to the capacity of users to interpret, appropriate and manipulate technology in various ways (Orlikowski 1992, cited in Silverstone & Haddon 1996: p. 58).

Orlikowski's (1992) formulations thus helps adopt a critical perspective of technology relations in ways that do not only privilege technology power or the power of social actors, but in ways that is critical to the interaction between technology, social processes and the meaning that this interaction has for social power.

More recently, scholars such as Dahlberg has called for a non-reductionist analysis of technology in ways that are sensitive to the complex interplay between multiple elements of determinisms - that is, for Dahlberg, technological determinism, social determinism and “uses” determinism (2006). The argument is that the entrapment in technological determinism risks obscuring a broader theoretical perspective that examines deeper social, cultural political and economic factors that shape the deployment of new technologies in specific contexts. This approach acknowledges the multidimensionality of the diverse contexts in which new technologies are deployed and therefore enables a more nuanced, rigorous and critical understanding of their social impact.

As was shown above, the domestication approach provides a variation of the structuration framework as it focuses on the subjective appropriation and “taming” of technology, i.e. finding uses for it that go beyond just the core ‘purpose’ of the technology, for example (Silverstone et al. 1992).

### **3.3 Theorising power, agency, identity and social autonomy**

#### ***3.3.1 Social power***

It is important to ask, if technology potentially empowers women, youth and the marginalised, in which aspects of their lives does this ‘power’ work? What form does this power assume, and what do we mean by power? Complex as various theories of power are, it has usefully been defined by others as the capacity for influence, and is based on the influencing agent’s control of resources that are valued or desired by others (Turner 2008; Deutsch & Gerard 1955; Festinger 1950). Power makes those who do not possess it to dependent upon the influencing agent for the satisfaction of their needs or reaching their goals (Turner 2008).

Others argue that the purpose of power is to prevent groups from participating in the decision-making processes and also to obtain the passive agreement of these groups (Gaventa 1980). This definition agrees with the notion of hegemony raised earlier in this study as an analytical framework used by Cultural Studies to understand the notion of power. According to Gramsci, hegemony is domination through consent of the subordinate by the ruling class and exercised by purveying ‘commonsensical’ ideas

(ideology) or worldviews that conceals asymmetrical relations of power (Gramsci 1971).

Using this most simplified understanding of power, the notion of power is used in this study to understand how institutions (the state and other social institutions, belief systems and norms) control ideological and cultural resources which define how society works. For example, in Zimbabwe (as has already been raised in preceding chapters), the state, as well as patriarchal hegemony and its impact on gender roles and social relations, enormously influence young people's perception of themselves and the world. Through patriarchy, the asymmetrical relationship between women and men are seen as natural, and normal. On the other hand, the state's dominance in the public sphere and its overt manipulation of the media gives it the overall power in setting media agenda as well as the allocation of resources for such civic related discourses as media and public health education

This study views 'power' as an important analytical category as it attempts to understand the role of mobile technology in helping young people, especially women, to negotiate with structures of domination that impact on their of agency and self autonomy. For example, in Zimbabwe, the alienation of young people and women from mainstream politics (Chiweshe 2013), as well as enduring social institutions that maintain hold on social control and perpetuate asymmetrical power relations between genders (for example patriarchy and the marriage institution) limit women and young people's self autonomy and agency in most spheres of life (Mugweni et al. 2012).

As already discussed at length in Chapter one (as well as the current chapter), the theoretical argument that mobile technology hold potential for expanded social agency and resistance to domination necessitates empirical exploration. It necessitates the question; just how is this resistance operationalised? The uncensored access to health information online through the mobile phone and mobile Internet potentially help young people expand their knowledge competences and thus enhance their social power, health-related identities and gender roles.

These issues will be explored overall in this study as it tries to capture the complex relationship between technology, society and power. In the social sciences, the complex

and contradictory notion of ‘power’ spans across centuries of research and theoretical contributions from various thinkers situated within various fields of thought (for example, sociology, psychology, philosophy, and political sciences), and as such its definition largely reflects the philosophical positions of these scholars. However, it is through Karl Marx’s influence that the notion of power permeated the social sciences, and to influence the theoretical background of contemporary social scientists.

From a cultural studies perspective, and largely borrowing from the Frankfurt School’s critique of cultural industries, power resides with those who are able to organise and allocate resources in ways that produce asymmetrical relations of domination and subordination (Hall 1980). However, the subordinate who are products of this system are capable of ‘resisting’ domination by deploying various strategies, and media technology and products form part of the range of repertoires that can be used to mobilise resistance.

In the digital age where the traditional hierarchy of producer-consumer are increasingly blurred by a more socially inclusive media, power may thus be seen as spread to the erstwhile audience/consumer who does not only now wield greater autonomy of choice in the range of available information, but is an active participant capable of producing content. This study thus attempts to understand how young people’s use of mobile technology may contribute to the enhancement of their self-formation and agency.

From its early beginnings in the 1970s, Cultural Studies has been primarily concerned with the question of power. It drew primarily from critical sociological thinkers such as Foucault (1998), Bourdieu (1989, 1991, 1986), and Althusser (1971). For this study, whilst these social theorists provide powerful perspectives of power and its workings in society, there can be noted differences in their understandings of power, particularly about the possibilities for subordinate groups to ‘resist’ domination – a particular theme raised in this study. For this study, the Gramscian (1971) notion of power is adopted for reasons that it gives room for resistance and social revolution by subordinate classes. The idea of ‘counter-hegemony’ provides a powerful source for social revolt against regimes of control.

The idea of ‘resistance’ is particularly important because the overall objective of this study was to understand whether and how youth’s use of digital technologies can be viewed as resistive, socially transformative, or constitutive of practices that refashion and destabilise social power and other regimes of control. However, Foucault’s (1991) notion of power is also important in terms of its recognition of power as diffuse, and as not only located in particular groups or strata. He sees power in our everyday discourses, our way of seeing things, as well as what we take for granted as ‘truths’ (worldviews). In addition, Gramsci’s (1971) notion of ‘counter hegemony’ also brings into perspective issues about how in Zimbabwe, regimes of social control such as state and patriarchal hegemony can be destabilised or challenged through the expanded social agency that technology enables to social actors. This study thus largely draws its conception of power from the Gramscian formulations.

However, it is important to briefly outline some of the theoretical constructions of power as outlined by other social theorists to understand how they construct the relationship between social agents and power. According to Gramsci (1971), power is exercised through hegemony, and hegemony implies to domination through consent. For him, consent is established not solely by coercion, but rather through the subtle exercise of power. The Gramscian notion of power is that hegemonic domination of the subordinate by the ruling class is exercised through the ruling class’ ‘commonsensical’ ideas (ideology) or worldviews that conceals asymmetrical relations of power (1971). These ideas are inoculated pervasively so that they saturate, influence, and permeate all aspects of one’s life so that they shape consciousness.

For this study, this can be viewed as the taken for granted nature of patriarchal hegemony and the ways it legitimise the subordination of women through a commonsensical view of male superiority. Consent to the hegemony, says Gramsci, does not arise solely out of the elites coercing the masses, but through the denial of alternative world-views with which the oppressed can conceive of their positions as subjects. This resonates with Foucault’s (1989, 1991) ideas of power which argues that power inheres in disciplining institutions themselves (such as the school, the church, school etc) rather than in the individuals that make those institutions function. For this study, such

institutions include the state, social and cultural practices structure the possible field of action for youth in Zimbabwe.

These insights help this study to explore how patriarchal hegemony, for example, predefines gender roles that reinforce asymmetrical gender roles and, as discussed earlier in Chapter two, how generational power usurp young people's agency and self-autonomy. These insights are thus important for this study in that it helps in understanding if the Internet and mobile phones makes available to young people alternative ways of understanding themselves, particularly about how access to global discourses helps Zimbabwean youths to refashion their identities or negotiate and contest the dominant systems of knowledge that shape their contemporary lives and identities.

As can be seen in the introduction, Gramsci's notion power is that it is not located in one social stratum, but is constantly shifting. The subordinate class is seen as capable of resisting power through counter hegemonic practices – and for this study, it is about how young people use mobile technology through practices that disrupt and shift social power. Gramsci's notion of power is similar to Foucault's in that they both conceptualise it as diffuse in social relations (i.e. between the ruling and subordinate class), that they both give possibility for resistance and that power flows in capillary fashion in everyday lives.

In addition, Bourdieu's concept of 'capital' (which can be social, cultural and symbolic) (Bourdieu 1986; Navarro 2006: 16) is important for this study in terms of understanding how subordinate classes – in this case young people and women - use various ways (including media technology and related content) to negotiate with state and social power. Particularly the notion of cultural capital, which Bourdieu defines as forms of knowledge (for example; education, intellect etc) helps this study understand how accessing health-related knowledge enhances young people's agency to fashion their health-related identities and gender roles between men and women.

On the other hand, Foucault's (1989) understanding of power as constituted in discourse (where it is produced, transmitted and reinforced) but also through which it is undermined, exposed, rendered fragile and thwarted (Foucault 1998: 100-1)

conceptually links with Gramsci's notions of hegemony and counter-hegemony. These notions describe the struggles and contestation for power, worldviews and how societies establish norms of social control and the configuration of social power. Foucault's formulation of power thus makes power a contestable terrain that is not located in one group.

Whilst Foucault sees power as a major force for 'disciplining' and enforcing social 'conformity', he also believed in the possibilities for social action and resistance to conformity that reinforce hegemonic power. His ideas about action were concerned with our capacities to recognise and question socialised norms and constraints (Rabinow 1991: 75). The assumption that media technologies and their mediation of global flows of information potentially provide alternative discourses which challenge and destabilise social control resonate with Foucault's ideas about how social actors have capacity to recognise and question socialised norms and constraints.

In Western scholarship, the portability of the mobile phone in particular is seen as helping young people manage their lives 'on the go', and allowing them to navigate mobile lives in fast urban spaces, symbolising mobility and independence and moving forward in life (Stalt 2008: 145). These attributes have been seen as "empowering" users as they enable multi-tasking by navigating physical spaces but also simultaneously in contact with distant "others".

Most contemporary theorists of technology argue that modern day technology helps determine the political outcomes, not just at the formal level of political representation but also outside the formal political arena and beyond the representative institutions of the political system of nation-states (Ekine 2010; Smith 2009; Obadare 2006; Mudhai 2006; 2004; Beck 1999) such as, for example, the politics about the access and control of knowledge, including, for this study; health-related information.

For this study, these hierarchies may be conceived of as the state and its apparatuses that enable the control of the flows of information, the social institutions through which patriarchal and matriarchal values are constructed and exercised. For this study, it is also about how these institutions and hierarchies are implicated in the manner in which young people, women and the marginalized become 'subjects' as well as how these

institutions make available or limit the range of knowledge (including, for this study, health-related knowledge) available to the public.

On the other hand, the domestication of technology approach has clearly dealt with the notion of power, perhaps more powerfully in the ways it coins the metaphor of domestication, which is basically about “taming” from the wild. Even more important is the approach’s concentration with the ‘domestic’ or ‘household’ as the space where power relations are enacted and performed, and how these actions are reflective of the overall gender relations (Haddon 2004).

This way, and borrowing from Lefebvre’s (1991) notion of the critique of ‘everyday life’, the domestication approach is important in highlighting how social relations and practices are full of contradictions that liberates, empowers, but also enslaves at social actors at the same time. For this study, these issues will be explored through how identities are socially constructed in everyday practices, but also how such constructions serve to limit and liberate social actors.

Generally, research in technology and society has largely traversed traditions, starting from the more positivist approach (who is online and what do they do online, for example?), interpretive approach (how do people go online or make the Internet their own?) towards the more critical and normative approach (for example, is the Internet empowering or oppressing people?) (Bakardjieva 2011). For this study, it is the more recent tradition that is of particular interest as it explores how social actors use technology to exercise power, but also to resist the strictures of power that limit their self-autonomy, identities and agency.

In less developed countries, mobile technology has been specifically promoted as a tool for the empowerment of society, but especially for women’s empowerment and social autonomy (Lennie et al. 2003; Muturi 2004; Rakow 1992). The popularity of social media at the beginning of the 1990s has amplified the interest in social agency, power, autonomy, and identity.

However, in developing countries, the relative lack of information (or at least access to it by ordinary members of society) is striking (Kaplan 2006: 3), and whilst the mobility enabled by the mobile phone remains central to its perceived transformative quality,

access to information is still hampered by a number of factors such as poverty, illiteracy and enduring urban-rural divides in infrastructure development.

Barriers to information access are multi-faceted, and in the context of Zimbabwe, these mostly include physical, structural (through excessive state control, manipulation and ownership), technical, economic, and social factors (Clement & Shade 1996). Access to information and knowledge are crucial for the exercise of power since social agents are able to participate in making collective and informed decisions in their everyday lives. However, the social context of research described in Chapter two portrays a context largely characterised by the hegemonic dominance of political and business elites who control both the flows of information as well as media ownership (Mare 2013; Moyo 2010; 2009;) on the one hand, and, on the other hand, a society in which tradition and patriarchal dominance are the organising principles for social relations.

For this study, these issues allow for a theoretical exploration around recent scholarly debates on whether social media and the mobile phone can indeed be viewed as, in a sense, ‘anti-patriarchy’ technologies with the capacity to open up a range of opportunities for women by easing domestic isolation and expanding the range of social and knowledge capitals alongside women’s long desired pursuits for personal independence and freedom (Cumiskey & Brewster 2012; Wajcman 2010; Waite 2004; Rakow 1996).

In Zimbabwe’s traditional Shona and Ndebele cultures, patriarchal practices shape and perpetuate gender inequality and strip women of control over their sexuality, reproductive health, labour and offspring (Kambarami 2006; Keby 1999: 29). An analysis of power relations that reproduce and sustain these patriarchal relations traces back to the traditional beliefs about the relations between the living and the dead. The realm of the dead constitutes a line of ancestral spirits who provide protection over their descendants (Bullock 1927, p. 130; Holleman 1953). In this case, a web of generational, genealogical, geographical and gender constructs located the heads of such lineages in a position of guardianship over the dependents (Kesby 1999). Other practices that establish patriarchal dominance include marriage customs involving the payment of a bride price to marry off daughters, which seem to commodify women by

transferring their ‘ownership’ or ‘control’ into the hands of another man (Kambarami 2006; Keby 1999).

In such, contexts women’s power and decisions-making become subordinate to the husband, particularly so as it relates to child bearing and sexual and reproductive health (Kesby 1999). It is arguable that in the context where digital technologies make accessible a virtual collection of information, women might be finding more independent avenues for exploring a range of knowledge systems, including knowledge about their health and sexualities. As will be show in the Chapter five and six, there is clear evidence that institutions of social control over women are increasingly being ‘shaken’ by the effects of modernity, and that women increasingly enhance their social identities and self-autonomy through their movement into previously male dominated circles (such as professional training and entry into the job market) and as such, have more autonomy and agency in decision making.

### **3.4 Social identity and health**

In Chapter two, the study used the anthropological notion ‘liminality’ (Turner 1965; Thomassen 2009) to connote how entry into college or university setting is a ‘threshold’ characterized by a disorientation of the self which stem from possible conflicting values and identities typical in cosmopolitan settings of tertiary education. Forms of identification, particularly group identifications and stereotypes, can inform our understanding of the more general social processes surrounding the experience of one’s self-conception, but also about one’s health, the body and self-image (Harwood & Sparks 2003).

For this study, one’s identification with a particular social group, and indeed in relation to the socially constructed gender identities, will be explored as ways to understand how male and female youth identify themselves with regards to health seeking. Elsewhere, literature argues that males and females differently engage in health seeking practices, and that men either delay help-seeking or are generally less inclined to health seeking as compared to women (Carbone et al. 2009). Through empirical investigation, the study will explore whether the identity stereotype of women as generally health seeking than men can have empirical theoretical cogency in the context of Zimbabwe.

In addition, Harwood & Sparks (2003) argue that group identification will influence awareness of disease predispositions and towards preventive and treatment practices among people who identify highly with their social groups. For example, and drawing on Harwood & Sparks' (2003) argument, it might be expected that people who identify highly with groups that have similar characteristics as them would most likely be predisposed towards engaging in appropriate preventive practices (e.g., regular pap smears for highly identified women, screenings for age-related cancers such as colorectal cancer among more highly identified older adults).

However, Harwood and Sparks (2003) argue that the assumption that people who identify highly with their groups are most likely to engage in early health seeking does not apply to men. They argue that men are less likely or are reluctant to engage in appropriate behaviour due to the independence and self-sufficiency aspect of that identification (that is; identification constructed in masculinity). In this study, these issues will be explored through sustained immersion into youth's everyday lives to understand their conception of the self, health and identity.

On the other hand, the idea that the mobile phone and the Internet can 'disrupt' (Conole et al. 2008; Hüsigg et al. 2005) social relations has, for this study, theoretical implications on the way men enact health seeking practices. There is lack of understanding of men's experiences of health and illness (Cameron & Bernardes 1998) and a largely under-explored relationship between masculinity, help and health seeking behaviour (Volkers 1999). For this study, one assumption is that men could find solace in managing their own health through the camouflage and anonymity provided by the Internet. Therefore, whilst technology optimists are quick to link technology to women's emancipation, it may be arguable that men stand to benefit as well in the sense explained above where the Internet holds prospects for providing a space that is unthreatening to masculinity. However, as will be shown in Chapter five, whilst benefit with more health information, men are still trapped in a constricting masculinity.

The domestication approach also problematises the complex and often contradictory nature of consumption and the identities resulting from these practices, which is increasingly being seen as alternatively fragmenting, homogenizing, alienating, or liberating our daily social and economic relationships (Silverstone & Hirsh 2005). At

the centre of this critique is the degrees of freedom accorded to the consumer (in theory and in practice) to use the products and commodities of late capitalism to define and express one's own identity, status and membership of a wider group (Silverstone & Hirsh 2005). As the notion of social power highlighted above, and in Chapter 2, this study examines how young people in a context of poverty, alienation and lack access to digital technology are actively constructing their own identities or actively participate in 'challenging' the structures of social power to which they are subject.

Yet despite the conditions of poverty, unemployment, political and economic disempowerment, Zimbabwean youth actively use their agency to position themselves against the flux of everyday drudgery. In a paper on African youth and violence, Ukeje and Iwilade (2012) argues that digital media technologies offer young people ways to appropriate the public sphere from which they are excluded by alienative politics, and find popular culture more relevant than formal politics as a channel for expressing political views and asserting their identities. Particularly important in this study is youth's use of digital media technologies since the dawn of economic downturn beginning in the early 2000s.

The mass exodus of Zimbabwean into the diaspora during this era later became a gateway through which local youth who remained in Zimbabwe found opportunities to 'connect' with global cultures, ideas and popular cultural movements (Moyo 2009, 2010). As Ndlela 2006) argues, the diaspora provided a channel to the consumption of cultural commodities - MP3s with downloaded popular music, mobile telephones with entertainment functions, and designer labels. He argues that technology provides an exquisite link between the youth in the diaspora and those in Zimbabwe.

The proliferation of communication forms like email, chat or discussion forums and youtube have connected up thousands of groups and individuals. For example, on Facebook, Zimbabwean online communities and family pages proliferate where members are not only involved in communicative exchanges, but actively display their identities, every day experiences and values and beliefs. Particularly phenomenal is the huge success and popularity of WhatsApp, a smart phone-based chatting service, where Zimbabweans circulate and exchange pictures, videos and jokes for example; the *Zvirikufaya* (my life is okay) videos. As will be shown below, the smart phone and

mobile Internet have created a sub-economy not only of digital technology trade and exchange, but also a site for identity construction through the consumption and creation of content.

### **3.5 Moral economy of the household**

The invocation of the concept “moral economy of the household” focuses the domestication enquiry on how economic activities (in this case, micro economic activities at household level) are influenced and structured by familial moral dispositions, values and norms, and how in turn these are reinforced, shaped, compromised or overridden by economic pressures at a more macro level of the world outside of the domestic setting (Silverstone et al. 1992).

However, the notion of moral economies of the household also strongly focuses the study of technology in the domestic setting, thus focusing more on the aspect of ‘domesticity’. When domesticity is discussed in the literature, it is usually with a strongly gendered interest and in conjunction with the life of women, either as an oppressive regime (for example, as a site where traditional patriarchal values and their subordination of women are bred) or as a potential resource toward liberation where women get more social capital outside the confines of the household life (Habib & Cornford 2002).

For example, ethnographic studies in a number of British and American households have shown that women use the domestic setting as a site for resistive consumption practices of popular cultural products such as soap operas and television drama (Morley 1980, 1983; Fiske 1986, 1987; Radway 1984). Whilst the idea of ‘managing the domestic was (and to a large degree still is) typically considered women’s contribution to the household’s economy, the word “domestic” also equally evokes feminine notions of loyalty and attachment as well as docility and gentleness (Habib & Cornford 2002). As Habib and Cornford further argue:

“...more generally, the verb “domesticate” is used to suggest disciplining and taming to bring an individual (or animal, or technology) closer to a particular idea of civilised behaviour, fit for intimate life in the home ... Such an effort involves removing or resolving the

unpredictable or aggressive elements of behaviour and replacing them with a milder and tamer, co-operative attitude or appearance that can contribute to sustaining life within the family” (p. 160).

What is of particular importance in this study is the notion of morality and economy, for these notions are loaded with both meaning and power. They are loaded with power in the sense that the definition of what is moral, as was shown by Habib and Cornford above, is clearly subjective and as such might be fraught with one person exercising power over the other in terms of what might be constituted as morality. Broadly defined; moral concerns relate to norms – which can be formal or informal - values, dispositions, commitments and conduct regarding what is just and what constitutes good behaviour in relation to others, and implies certain broader conceptions of the good or well-being (Silverstone et al 1992).

The invocation of the notion of morality is shown to be implicated in the exercise of power in the domestic setting, involving (mostly) parental negotiations about which technology to purchase, how much money to invest in its use (and in the case of mobile Internet, how much data to buy, for example). In view of the asymmetrical gender relations raised in earlier chapters, this study will argue that what might be viewed as the moral economy of the household can indeed be values and dispositions reflective of what passes as ‘moral’ for the dominant male figure in the house – and indeed a product of unequal power legitimated under the guise of values and appropriate dispositions.

Using this broadly conceived definition of morality, and combined with economics, we are therefore dealing with moral aspects of economic practices, and economic influences on morality, but it is also about how economic organisation affects human well-being. But how is the notion of the moral economy of the household implicated in the use of mobile phones and mobile Internet in health seeking practices?

This moral economy is firstly and foremost not passive, or static, but rather constantly interacts with the outside world. It addresses how household members (as individuals and families) interact with the values and ideas mediated through media and its related content. Drawing on the notion of postmodern fragmented identity (Hall 1992) that was

raised in earlier chapters, this study looks at how digital technology helps young people and women to actively construct identities that may even transgress established norms and beliefs about gender roles and the place of women in society.

Silverstone and others (1992) argues that the moral economy of the household creates something akin to Giddens' (1984) notion of ontological security, meaning a sense of confidence and trust in the world as it appears to be. But the mobile phone and mobile Internet creates problems for the maintenance of boundaries of the ontological security because it dislocates time and space (Giddens 1984: 119). But particularly important for this study is the notion of dislocation and fluidity of boundaries, where regulation, surveillance, control and fixation of meaning are all contested. How possible is patriarchy to maintain and sustain its hegemonic dominance where regulation and surveillance are difficult?

On the other hand, how does the government (through the legal system and its hegemonic discourses) maintain and sustain its power, influence and control on what content to consume? At national level and with regards to the configuration of state power and ideology, this might also imply the space where the state exercises power and ideological domination in relation to what information can and cannot circulate in the public sphere, what people can talk about and what they cannot talk about (agenda setting) and what they can know and what they not know. As already highlighted in Chapter 2, in Zimbabwe, it is still a contentious issue in the Zimbabwean public sphere whether it is appropriate to provide information about contraception to youths still in secondary schools and whether contraceptives themselves should be provided to them.

The key assumption that the “moral economy” of the household is autonomous, self-regulating and that it is a productive site for moral values and dispositions that govern the appropriation of technology (as articulated by the domestication approach) may be problematic in some context of Zimbabwe. For this study, one question would be; in view of the increased urbanisation and modernity which has resulted in widening distances between families (Mugwani et al. 2012; David 1999) how do youth experience ‘growing up’ in the absence of aunties and the uncles as agents of socialisation into adulthood, as well as the providers of advice on health, sexuality and marriage? Would it be expected that the media, particularly the Internet and the mobile

phone, plays a role in socialising youth during transition into adulthood? Because of modernity, the feelings of mutual reciprocity which characterise traditional families is disrupted by loss of close familial ties (Peterson & Taylor 2003), and this disrupts the meaning of 'extended' family. This study will examine these issues

### **3.6 Conclusion**

This chapter sketched a theoretical outline used for exploring the research questions raised in this study. It has argued against the essentialist treatment of technology common in much of technology research and its development-oriented paradigm, which tend to obfuscate the important role played by consumers of technology as agents actively constructing social meaning and identities. The study thus argues for the use of domestication and a Cultural Studies approach. The Cultural Studies theory and domestication theories - particularly through their notions of hegemony, counter hegemony and agency - have been chosen in view of their ability to explain the consumption of media technology and its content as with potential for social transformation. This is important for this study in view of its overall objective to identify, in any, where the interaction with digital media technologies could expand social actors' agency to find spaces for challenging social control and its limitations on social identity formation, including health identities.

## CHAPTER 4

### RESEARCH METHODOLOGY, METHODS AND PROCEDURES

#### 4 Introduction

This chapter outlines of the research methodology and methods used to examine the research questions raised in the study. The study combines three research methods: a survey questionnaire, in-depth individual interviews and field observations. As outlined in chapter 1, this study seeks to address these research questions:

1. How do online health-seeking practices differ across gender?
2. How are online health-seeking practices implicated in health-related identities?
3. How does the use of digital media technologies help youth to negotiate with institutions of social control power?

Methodologically, cultural studies has been criticised for being introspective (despite its interdisciplinary<sup>8</sup> evolution overtly stated by its founding fathers like Stuart Hall), preferring rather to build its own “analytical canon” towards preferred *interpretive practices* (Pickering 2008; Shepperson & Tomaselli 2003; Tomaselli 1999). However, and in relation to this study, there are increasing concerns that if cultural studies (and social sciences research in general) is to have impact on practice – that is if it is to influence policy and democratic ideals - it needs to move beyond the ‘limited’ realms of academic cultural critique, its concern with meaning interpretations through textual analysis and ethnographic approaches but rather it needs to make synergies with more quantitative approaches (Ang 2006).

In a paper arguing for the alignment of cultural research with clearer policy and praxis goals (for example through community engagement), Ien Ang explains how increasing pressure now compel academic research to be policy oriented, or at least to be directed at solving prevailing social ills, with funding bodies (including governments and

---

<sup>8</sup> Cultural studies theorists viewed themselves and their work as transcending academic boundaries or interdisciplinary; that is they incorporate literature, sociology, political philosophy or the liberal arts.

universities themselves<sup>9</sup>) particularly calling for the integration of diverse bodies of knowledge; that is integrating qualitative and quantitative approaches (2006: 195; Pickering 2008).

For this study, and in agreement with later critics of cultural studies' 'narrow' methodological focus (for example see Tomaseli 1999; Tomaselli & Shepperson 1999; Sehume 2013), this study argues that cultural studies could buttress its disciplinary and conceptual-methodological power by drawing on other knowledge systems across the traditional paradigmatic divide and their methodological approaches steeped in natural sciences – an eclectic approach characterised by Jeffrey Sehume, and others, as transdisciplinarity<sup>10</sup> (2013). Arguably, the integration of research methods could give cultural studies a broader perspective about social phenomena. As others argue, this is because:

Transdisciplinarity approaches call for a synthesis of research at the stages of conceptualization, design, and interpretation by integrated team approaches ... the explicit intent to solve problems that are complex and multidimensional, particularly problems (such as those related to sustainability) that involve an interface of human and natural systems. (Ertas 2010: 57).

On the other hand, the domestication approach has largely analysed the 'contextual' practices of households and individuals to better appreciate why people use information and communication technologies in the way they do in the "moral economy of the household" (Silverstone et al. 1992), although until recently with the advent of the mobile phone, research focus has also extended outwards from focusing domestic

---

<sup>9</sup> Pickering argues that cultural studies' emphasis on textual analysis has resulted in the dearth of fieldwork-based empirical research and the lack of methodological development (see also Deacon). Its biases towards textual analysis, and cultural critique are partly to do with underfunding in higher education, at least in the UK, and partly to do with the derivation of the field of cultural studies from the humanities, particularly literary studies (Hall 1990; Johnson 1986 Pickering 2008, Tomaselli 1999).

<sup>10</sup> According to Sehume, transdisciplinarity is a *research practice* and an *approach* that disregards the distinction between the natural and the social sciences (2013: 175-76). It identifies areas of cooperation, cross-pollination and synthesis in objective reality (normatively seen as the preserve of hard science) and subjective reality (mainly viewed as the purview of the humanities).

settings only to include the ‘outside’ world. The approach’s concern with individual contextual experiences with media and technology has naturally seen a particular methodological orientation towards in-depth qualitative approaches, which usually include interviews, observation, and a range of other interpretive methodologies to illicit information (Horst & Miller 2006; Miller & Slater 2000; Silverstone et al. 1992; Haddon 2011: 313). Thus, part of that research process involves allowing those researched to *explain* their actions in their own words.

Thus, the domestication approach normally produces a set of descriptions of unique individuals and households. Yet there are inevitable patterns, regularities, often a (limited) range of certain common experiences, albeit experienced in slightly different ways (Haddon 2011: 313). Commenting on the strength and weaknesses of the domestication approach, Haddon argues that processes, patterns and variations in media technology consumption are brought to light better if the qualitative approaches - which ordinarily characterise domestication studies - are complemented with quantitative approaches (2011: 314).

Thus, the on-going calls for mixed approaches between research paradigms is coterminous with the broader call for research and analysis in social sciences and humanities to become more evidence-sensitive and less theoretically presumptuous, more participant-oriented and less neurotic about epistemological standings (Pickering 2008). In addition, understanding disciplinary limits would also facilitate dialogue and exchange with work from other disciplinary contexts, including being open to what those disciplines might consider as the blind spots of other approaches (Ang 2006: 118).

Writing about the academic codification of disciplines, Warner remarked that disciplines “allow people to speak in code and forget questions that might be posed from the outside’ (2003: 116). Borrowing from other bodies of research and their methodological techniques means opening up to questions from the outside—and taking them seriously—that enables innovation and renewal in research, and preventing it from closing in within its own consolidated boundaries (Ang 2006: 188).

The above sets the tone about the methodological direction that this study takes – which is a mixed method approach. In the section that follows, the study argues for a mixed-method approach.

#### **4.1 Reasons for triangulation**

Triangulation is the use of more than one method of investigation to yield more than one set of data (Denzin 1978; Smith 1975; Denzin 1978). Denzin defines triangulation as "the combination of methodologies in the study of the same phenomenon" (1978: 291). Triangulation can be within and or across methods (Denzin 1978). "Within-method" triangulation essentially involves cross-checking for internal consistency or reliability while "between-method" triangulation tests the degree of external validity (Denzin 1978; Jick 1979; Webb et al. 1966).

In a triangulated research design, quantitative and qualitative methods are seen as distinct methods of examining the same research problem (Bryman 1988: 131) but; as this study argues, they also offer an added advantage of complementing for the strengths and weaknesses of the other (Deacon et al 1999). In addition, mixing methods was also important in view of the fact that the more sources one consults the more likely it is that omissions will show up so that discrepancies can be solved (Deacon et al. 1999: 30). Mixing methods attempts at securing an in-depth understanding of the research questions by relating different methods of sourcing so as to identify possible threats to the power of the analysis (Fielding & Fielding 1986; Denzin & Lincoln 1998).

For this study, given the fluid and diffuse nature of practices related to online activities in ICT usage, deploying a single methodological procedure would have limited the study's attempt to capture the complex processes. It was imperative for this study therefore to capture as diverse as possible the complex practices related to online health seeking in view of the fact that these practices tend to be diffuse, spatially distinct and idiosyncratic.

Thus, whilst the social survey accesses data from a large population in a short space of time, it assumes that the data are a 'truthful' reflection of respondents when in fact

interviewees often change and sometimes provide contradictory responses from initial claims when probed differently in qualitative interviews. In response to this, one argument for a mixed-method approach is to cross-check for some nuanced views of respondents that qualitative data might surprisingly bring out. This study aimed to access both shared and individual perspectives in ways that are revealing to individual dilemmas and communally shared perspectives, values, norms and experiences.

Commentators are of the view that the differences between quantitative and qualitative research traditions apparently relate to ‘technical’ decisions about the best methods of collecting social data (Bryman 1988). Bryman sums it better by arguing that attempts at maintaining these distinctions are merely a matter of “doctrinal posturing” (1988: 173), that is, he sees it as simply a stoical adherence to principle where flexibility could yield a bigger picture about the social formation. In addition, he notes that some qualitative researchers often use quasi-quantitative assertions such as ‘many’, ‘frequently’, or ‘some of the time’ (1984: 88), whilst maintaining the epistemological paraphernalia of qualitative approaches that engage with ‘thick’ descriptions and shun quantitative tools steeped in the measurement of statistical distribution, variations and frequencies. As others argue:

It is not a matter of starting from certain theoretical methodological problems: it is a matter of starting with what we want to *do*, and then seeing which methods and theories will help us to achieve these ends (Eagleton quoted in Lindloff 1995: 25-26).

For this study, and in agreement with assertions by researchers calling for the integration of methods, quantitative and qualitative research methods are viewed as simply denotations of different ways of social investigation, which are capable of being integrated to gain a broader and holistic view of society. For example, one assumption that youth in Zimbabwe’s institutions of higher learning differently use new forms of knowledge gathering about their health identities through mobile Internet, in addition to traditional socialising institutions (e.g. family, church, school), calls for comprehensive consideration about which methods (including their ontological and epistemological assumptions) are best suited to answer the research questions raised in this study.

However, despite this array of competing definitions of social formation offered by rival approaches to social and cultural investigation in communication research, this study concedes with the assertion by other researchers that combining these rival research traditions potentially yields rich data through the “necessary transubstantiation of valuable qualitative insights into quantitative descriptions and explanations based on representative samples” (Rosengren 1996: 140). However, there are enduring distinctions between these two research traditions that are worth noting, and these are dealt with in the section below.

#### **4.2 Qualitative versus quantitative research: complementary or mutually exclusive?**

Differences of research traditions are firstly at the level of epistemology. That is, they differ in relation to their fundamental views about the nature of social sciences, the proper stance to be taken in relation to the social world, what is to pass as warrantable knowledge and the way in which knowledge is accumulated (Bryman 1984: 87). Secondly, these differences also speak to the ‘techniques’ or the actual methods that these traditions use for collecting data from the social world.

Epistemological assumptions (i.e. the appropriate foundation for the study of society and its manifestation) and actual methods (techniques) of data collection are constitutive of each other in the sense that epistemological assumptions about the manifestation of the social world lead to, or predetermine preferences for data collecting methods (Bryman 1984: 74-75).

However, in this study, and as the preceding section arguing for triangulation suggests, whilst considerations about the ‘appropriate methods’ of collecting data are important in determining the best method for accessing warrantable knowledge, it was this study’s view that the adherence to a particular philosophical tradition is good *only* in terms of addressing and framing concerns within a particular tradition but unfortunately blind to alternatives and complementary ways offered by the other tradition.

The instruments that one uses to view the world play a large part in shaping what we ‘see’ and by implication, what we will ultimately know (Hine 2005; Latour & Woolgar 1986; Woolgar 1988). If what we see and what we know is limited to what a particular

research paradigm or a research instrument is capable of accessing, what happens to the ‘other’ knowledge that the same instrument is not able to access?

Increasingly, literature points to the advantages of combining methods from across and within philosophical traditions so as to strengthen research findings by cross-checking results for consistency, addressing research from different perspectives, using one approach to give more broader context and facilitating the refinement of further research questions (Spicer 2004).

For this study, quantitative data was used to provide baseline statistics about the prevalence and distribution of using mobile Internet for purposes of accessing health-related information, with a particular intention to see how these practices are distributed along different categories such as gender. On the other hand, qualitative data helped explore the more nuanced cultural practices, belief systems as well as lived traditions that have direct or indirect implications on the manner in which youth experience technology on one hand, and health-seeking practices on the other hand.

Below, distinctions at the level of epistemology will be highlighted first and later the study will show how this impacts on the actual data collection instruments, including how these also impacted on this study. By outlining these distinctions, the study finds it helpful in clarifying and justifying the assumptions underpinning the methods and the combined methodological considerations applying to this study.

### **4.3 Distinctions at the level of epistemology**

The quantitative research tradition is strongly influenced by natural science approaches and their adherence to logical ‘positivism’, also referred to as ‘empiricism’ (Deacon et al. 1999: 3; Stempel & Wesley 1989). They are influenced by the epistemological view that a true science must tread in ‘hard’ numerical facts, which when accurately and objectively collected; can be replicated and generalised to other contexts and populations (Deacon et al. 1999: 3; Bryman 1984: 76).

Their assumption is that the study of human beings can be undertaken using similar methods used in natural science enquiry, for example; the survey and experimentation methods (which involves keeping ‘objectivity’ by maintaining distance from the

research participants and avoiding value judgements), despite the fact that human beings – who are the subjects in social enquiry – are not primarily biological organisms but first and foremost conscious, self-directing symbolic beings who are capable of attributing meaning to their environment (Barbie & Mouton 2001: 2008).

Quantitative researchers' understanding of knowledge is that it exists 'out there'. Thus, if knowledge exists out there, a 'neutral' researcher can objectively and accurately record it, and this is different from qualitative researchers who actively 'produce' knowledge as it does not yet already exist 'out there' (Lindloff 1995: 24-25).

On the other hand, the qualitative research tradition has become known as constructivism, interpretivism or phenomenological enquiry, and subscribes to the notion that knowledge does not exist 'out there', but that our knowledge of the social world is diffuse, subjective and is determined by different socio-cultural contexts within which research participants are orientated (Bryman 1984: 78).

For this study, the socio-cultural contexts that have implications on the way health-seeking practices and related gratifications relate to gendered and generational identities. For this study, whilst the notion of objectivity and that of keeping distance from research participants was crucial to making participants to provide answers from their 'objectively' position and free from researcher influence, the study was conscious also of the need to further establish more 'subjective' relations with the research participants so as to gain access to elaborate, subjective explanations and experiences that the survey would not be able to accommodate.

Qualitative researchers prefer to enquire the social world "from the point of view of the actor" since the assumption is that knowledge is never fixed 'out there' so that it can be collected objectively, but rather that knowledge is a subjective position dependent on social position and context (Bryman 1984: 76-77). This is unlike quantitative researchers who put emphasis on fixed measurement, hypothesis testing and engage in less protracted field involvement with research participants.

In this study, the survey method was used to obtain baseline measurements of youth practices related to mobile Internet and health seeking behaviours. Thus, this study argues that research on human beings involves recording constructive meaningful

accounts from different and sometimes competing subjectivities and social orientations of both the researcher and the respondent in ways capable of producing 'rich' data about the social world.

Quantitative research is also known as 'deductive' in the sense that it seeks to make specific propositions from general accounts of reality (Bryman 1988), where hypotheses are deduced from general theories and then subjected to rigorous empirical examination and if rejected, initial theories will be revised (Bryman 1988: 15). Existing generalisations have to be continually tested against new evidence to see if the predictions (hypotheses) they generate are supported (verified) or disproved (falsified) by new data (Deacon et al. 1999: 3).

This is different from qualitative research approaches which are 'inductive', implying that the researcher may not start with an initial theory, but rather theory evolves as the data is being collected and explored. In addition, unlike the quantitative methods, qualitative methods do not test hypotheses to nullify or confirm their validity but rather build theories from cases inductively gathered from data (Strauss & Corbin 1998).

#### **4.4 Distinctions at the level of methods or techniques**

At a more general level, quantitative research is epitomized by the controlled experimentation or the survey questionnaire with structured questions that have predetermined response categories. On the other hand, qualitative research involves collecting, analyzing, and interpreting data using unstructured interviewing and field observations of what people say and do. Qualitative researchers believe that we can only explore knowledge of the social world by talking and observing people as they go about making sense of their social worlds. Knowledge of the social world is co-produced out of multiple encounters, conversations and arguments with the people being studied.

Additionally, in qualitative research, participants are capable of expressing their views through language, sound, imagery, personal style and social rituals (Deacon et al. 1999: 4). Thus, for this study, unstructured in-depth interviews and field observations were used to elicit broader perspectives from youth about their experiences with mobile Internet.

Another distinction between quantitative and qualitative methods is the issue of sample size and the idea of generalisability of research findings to a population in a different context. Qualitative research methods such as interviews mostly use purposive or convenient sampling techniques for identifying interview participants who have experiential relevance to issues under investigation. They also use unstructured open-ended questioning with a small number of participants. Therefore, generalisability of findings in qualitative research is less the researcher's worry (although the researcher needs to prove the validity of findings by accurately and exhaustively describing participants' responses with the aim of establishing internal rather than external validity) (Denzin 2009). In light of this, the purposively selected individuals who had shown particular interest on the subject of looking up for health-related information during the completion of the survey questionnaire.

#### **4.5 Context of Research setting:**

Three public tertiary learning institutions in Harare registered with the Ministry of Higher and Tertiary Education (University of Zimbabwe, Harare Polytechnic, and Belvedere Technical Teachers' College) provided the sampling frame for respondents. At the time this research was conducted, there were five universities in Harare: University of Zimbabwe (UZ), Catholic University in Zimbabwe (CUZ), Harare Institute of Technology (HIT) (having been granted degree awarding status in 2005 with the promulgation of the Harare Institute of Technology Act {Chapter 25:26}), Women's University in Africa (WUA) and the Zimbabwe Open University (ZOU).

Harare also has one polytechnic college (Harare Polytechnic college), and three teachers colleges (Morgan Zintec Teachers college, Seke Teachers' college and Belvedere Teachers' college), all registered with the Ministry of Higher and Tertiary Education.

Out of the five universities in Harare, only two (University of Zimbabwe and Harare Institute of Technology) are both public institutions of higher learning and are with university statuses. Whilst the Zimbabwe Open University is a public university, it offers distance learning services and therefore did not participate in this study. Catholic

University and Women's University in Africa are private universities, and as a result was also not part of the research.

The University of Zimbabwe (Henceforth UZ) is located about six km from Harare's CBD and in the northern leafy suburb of Mt. Pleasant. Being the oldest university in the country, the UZ was established in 1955 by the then colonial government of Rhodesia (Gelfand 1978), and after independence in 1980, opened its doors to accommodate more black students (Gaidzanwa 2007). The UZ attracts students from largely working class poor backgrounds (Terry et al. 2006). At the time of this study, the University of Zimbabwe had approximately 12 000 students, whilst the university residence can accommodate at least 3 000 students in 11 residences - nine of which are located on the campus and two located in the city centre.

Whilst black students constituted only 40% of the student population in 1973 (Mlambo 1995), this changed post-1980 independence when the University of Zimbabwe re-structured to accommodate more black students (Cheater 1991) so that by 1984, four years after independence, black students made up eighty percent of the student population. At the time of this study, there were rarely white students at either of the institutions studied, except for a few at the University of Zimbabwe in selected faculties such as Veterinary Sciences.

On the other hand, Harare Polytechnic College (henceforth Harare Poly) is located close to the CBD, and is currently the largest tertiary technical college administered by the Ministry of Higher and Tertiary Education in Zimbabwe. The Harare Poly opened its doors in 1964 in the then Salisbury during the Rhodesian era, later growing in size and also started accommodating black students. The college has residence facilities that accommodate part of the students on campus whilst others either commute from home or stay in the surrounding suburbs. The Harare Polytechnic College hosts 6000 students.

Belevedere Technical Teachers' college (Henceforth Belevedere) is located in the western suburb of Harare; Belevedere. It was founded in 1982 as one of the newest Teacher training colleges immediately post-1980 independence. The college offers

training to secondary school teachers in both academic and technical subjects and there are approximately 4000 students.

In all these institutions of tertiary learning, there are a number of health-related students' activities hosted by respective institutions as well as those hosted in conjunction with external organisations and non-governmental organisations. For example, the SAYWHAT<sup>11</sup> and SHAPE Zimbabwe Trust<sup>12</sup> (however, SHAPE Zimbabwe is stationed at the University of Zimbabwe and mainly work with students from this institution).

In terms of socio-economic status, many of these students in these three institutions of tertiary learning are from urban, working-class and lower middle-class backgrounds. With Zimbabwe being a predominantly rural country, with approximately 67% of Zimbabweans living in rural areas (ZIMSTATS 2012), a substantial proportion of students also have mainly rural backgrounds. At least for this study, class was not a particularly critical analytical category, especially because at the time of this study, the traditional ways of classifying socio-economic status – for example parental occupation - had lost some relevance in view of the economic crisis currently gripping the country from the early 1990s.

Whilst in the past, parents employed in the civil service as teachers, nurses and related white-collar jobs generally fell into the middle-class category, and while those who were factory or informal sector workers were generally considered to belong to the working class, these distinctions are becoming blurred as those in the civil service no longer hold that high ranking status because of poor remuneration. In addition, more Zimbabweans are now in informal businesses, and some can arguably – at least by their standards of living and buying power – be considered middle class whilst civil service employees could be found to be living a poorer, more working class lifestyle.

---

<sup>11</sup> SAYWHAT is a Zimbabwean civic organisation that aims to create a platform where students from tertiary learning institutions across the country can meet to discuss about their sexual and reproductive health unmet needs. The organisation's aim is to ensure students' participation in information/ knowledge sharing, support provision, networking and advocacy to promote sexual reproductive health and rights in tertiary institutions in partnership with other service providers.

<sup>12</sup> SHAPE is an acronym for Sustainability, Hope, Action, Prevention, Education

## **4.6 Data collection methods**

This study used three research methods to examine what meanings youths from three institutions of tertiary learning in Zimbabwe attach to searching for health information online using mobile Internet in Zimbabwe's three institutions of higher learning. The three methods used were:

A random survey at three institutions of tertiary learning in Harare (n=385), conducted between February 2014 and September 2014, which examined, among other things, students' mobile Internet usage in general terms and with specific reference to accessing health-related information

A series of 28 unstructured in-depth interviews at three institutions of tertiary learning in Harare conducted between February 2014 and September 2014 as well as part of March 2015 to probe students' experiences with the perceived gradual 'transition' towards the use of digital technology and how this impacts on their repertoire of sources of health information and the implications this has on social power and generational identity.

Field observations conducted in 2014 simultaneously with in-depth interviews at these three institutions of tertiary learning to observe students demonstrating how they go online to look up for health-related information.

### **4.6.1 Sample survey**

Whilst in a triangulated research design Bryman (1988) argues that qualitative methods are usually precursor to formulating problems and developing instruments for quantitative research, others are of the view that it is not uncommon to conduct interviews after survey results have been analysed. They argue that the aim is to collaborate findings or explore in greater depth the relationships suggested by quantitative analysis (see Wolff et al. 1993: 120; Stewart & Shamdasani 1990:17).

They argue that following up with qualitative approaches (such as in-depth interviews) helps putting 'flesh on the bones' of statistical findings (Deacon et al. 1999: 9) using qualitative data. This study used the latter approach; where the social survey preceded and established baseline background data about the status quo in terms of the

distribution of online health seeking practices among youth in Zimbabwe's institutions of higher learning.

The choice for a social survey in this study was to assess the prevalence of the use of mobile Internet for purposes of accessing health-related information among youth, particularly about whether there can be drawn measurable differences between male and female youths in three tertiary learning institutions in Zimbabwe. The survey questionnaire was used to test the hypothesis that female youth, unlike their male counterparts, are likely to go online to look for health-related information more often.

The survey was designed to identify relationships between these variables so that subsequent interviews would enable further probing about the reasons for these socially constituted practices. In addition, the study expected the social survey to reveal the connections between variables (Bryman 1988:101), and that qualitative data would reveal the social *processes* linking these variables.

#### **4.6.1.1 The questionnaire design**

With the aid of the Statistic Department at Rhodes University, the researcher developed a questionnaire with 28 questions. As the questionnaire was self-administered, it had to be precise, clear and short (with an 'average' completion time of approximately not more than 20 minutes) to increase response rate. The same questionnaire is reproduced in Appendix x of this study. Respondents were asked to circle on the appropriate answer by selecting options provided on the extreme right column of the questionnaire.

The questionnaire was designed in a way to allow for efficient and speedy collection of information, with answers pre-coded for easy entry into SPSS (Statistical and Presentational System Software). First, the questionnaire had two paragraphs introducing the researcher to the research participants, the objectives of the research, as well as an 'opting out' clause for those not willing to participate in the survey.

The opening questions solicited for demographic information, followed by more general information about mobile phone ownership and then the more specific section on the role of media in communicating health messages, the role of the mobile phone and mobile Internet in mediating health information as well as questions testing these

youth's literacy/knowledge of general health issues. Just after the introductory paragraphs, a screening question asked whether one owned a mobile phone and if the answer was 'no', respondent would not proceed to answer subsequent questions.

The questionnaire sought to test these arguments by asking questions like: How often do you use the following to know more about issues such as health, sexuality, illness, food and diet, body weight etc? The responses restricted respondents to choose from the following categories: parents, friends, Internet, radio and newspapers, and against each category, a 7-point scale of three ranked these to indicate youth's frequency of consultation for health information from these sources in the following manner: always, sometimes and never. The study aimed to test whether youths in three tertiary leaning institutions in Zimbabwe indeed derive their health identities from 'other' sources other than the family unit, and whether the Internet formed part of these 'other' sources.

Another issue that the study sought to test was the hypothesis that digital media and technologies are 'emancipatory' agents for women, or are disruptive of social power and relations. This may be especially so in more patriarchal societies where the place of the woman has largely remained confined in domestic confines (Wajcman 2002). According to this observation, technology is seen as an empowering agent for women as it opens up the world of experience and knowledge about what is happening in the 'outside' world, including knowledge about their own health and sexuality.

These issues were explored, for example, in the question: Between male and female youths, who do you think will benefit most by searching for health information using their mobile Internet? This question sought to gauge youth's (both male and female) understandings about their perceived barriers/opportunities related to their gendered location *vis a vis* access to health knowledge. More celebratory discourses about digital media, particularly expressed through neo-liberal perspectives, view media technology as a 'game changer' or as a 'disruptive' technology for both women and men in largely patriarchal societies.

Another issue explored through the questionnaire related to arguments by domestication scholars, particularly evoked through the concept of the "moral economy of the household" (Silverstone et al. 1992), which argues that the household provides

the moral campus with which technology is used in the family. Elsewhere, others have also argued that parents use the mobile phone for surveillance purposes to control their children from mischief or generally to know about their whereabouts (Silverstone et al. 1992). The study sought to explore whether the family, and indeed other close individuals such as a boyfriend/girlfriend have control over how these youths engage with the media, particularly mobile Internet and the mobile phone. The questionnaire posed the following question: To what extent do you consider the information stored in your mobile phone private? The answers ranked from: Not at all, to a lesser extent, to a larger extent. This question was immediately followed by the question: Who do you share your mobile phone with? and response categories included: No one, friend, parents, boyfriend/girlfriend, spouse, my children.

#### **4.6.1.2 Data collection and analysis**

As suggested by Wimmer & Dominic, the questionnaire was pre-tested to take note of any problems that might have gone undetected. Using a typical respondent, the researcher tested the questionnaire for clarity. To test this, the researcher gave out 10 questionnaires to ten students at one institution of higher learning in Harare which was not part of the study's sampling frame; the Harare Institute of Technology. As a result of this exercise, a few questions were corrected, and changes were incorporated into the final version of the questionnaire.

With the help of ten research assistants selected at each institution participating in the survey, self-administered questionnaires were randomly distributed at different campus venues; for example, at the canteens, taxi ranks, campus greens and sport pavilions.

#### **4.6.1.3 Sample Size calculation**

When calculating a sample size, there are three criteria that will need specification: the *level of precision* (or sampling error), the *confidence level* (or risk level) and the *degree of variability* (Miaoulis & Michener 1976). The level of precision is the range in which the true value of the population is estimated to be, and is often expressed in percentage points. The most used precision level is  $\pm 5\%$ ). It is basically the error margin that one is prepared to let the sample size fall. For example, if earlier studies had established that 70% of students use the mobile phone to access health-related information online, with

a confidence level of  $\pm 5\%$ , then one could estimate that between 65% and 75% of students in the population have adopted such practices.

The confidence level is based on ideas formulated in the Central Limit Theorem, which argues that when a population is repeatedly sampled, the average value of the attribute obtained by those samples is equal to the true population value. It is a percentage of how confident needs to be that the actual mean falls within the set confidence interval. In a normal distribution, approximately 95% of the sample values are within two standard deviations of the true population value, and this was adopted in this study.

Lastly, the degree of variability refers to how much variance expects from responses. Therefore, the more heterogeneous a population is, the larger the sample size required to obtain a given level of precision whilst the less variable (more homogeneous) a population is, the smaller the sample size. A 0.5 degree of variability is often used as it indicates the maximum variability in a population and ensures that your sample will be large enough.

The optimal sample size was calculated using the Dobson Formula. This formula is used for calculation of samples for proportions of large populations. In Zimbabwe, there is no prior data on the subject matter of the use of mobile phones for purposes of accessing health information. As such, the study estimated that the percentage probability of people who use or do not use the mobile phones for accessing health-related information carries an equal weight for 50%. This study therefore used a p-value<sup>13</sup> of 0.5, which is the maximum variability.

$n = \frac{Z^2 p(1-p)}{\Delta^2}$ , where  $n$  = sample size,  $Z$  = maximum allowable risk,  $p$  = proportion of students who use mobile Internet to access health information and  $\Delta$  = absolute precision. Using 95% confidence interval ( $Z=1.96$ ), absolute precision of 5% and  $p = 0.5$ .  $n = 1.96^2 \times 0.5 \times 0.5 / 0.05^2 = 384$ . These 384 tertiary institutions students were selected using simple random sampling method.

---

<sup>13</sup> (i.e. proportion of students who use mobile Internet to access health information)

The questionnaires were proportionally distributed to the selected institutions as follows: 184 from the University of Zimbabwe, 100 students from Harare Poly, 100 students from Belvedere Technical Teachers' Collage.

Prior to administering the questionnaire, the researcher gave each research assistant a set of ten questionnaires, which were labelled with numbers to help in identifying which research assistant had which questionnaire number, and they were supposed to return them back whether completed or not by the end of a single outing. This was repeated over a period of three days at the end of which each research assistant needed to have returned ten completed questionnaires with 50% having been completed by female students and the other 50% completed by male students between the ages of 15-24 years.

Questionnaires were distributed only at designated times (i.e. at the canteens, sports fields, campus greens). The interviewer's scripted introductions included clear assurances of confidentiality and use of non-identifier data as well as an opting out option without coercion. At all the three institutions of higher learning surveyed, questionnaires were administered with the help of research assistants, we distributed 390 questionnaires and 384 questionnaires were returned completed.

Data was analysed using the SPSS software. The findings that emerged from the initial quantitative stage provided the themes that were further explored during the qualitative stages.

#### **4.6.2 Individual In-depth interviews**

The decision to conduct individual in-depth interviews was to put 'flesh on the bones' of statistical findings (Deacon et al. 1999: 9; Bryman 1984: 132, 158). Qualitative research provides a level of descriptive detail and depth that is impossible to achieve with other types of research, and for this study, it is the best form of research for studying *how* and *why* **these** youths interact with social media (and its related content such as health information) in the way they do and the way these practices are tied to structural prisms of social and individual identity, power and social relations

For this study, in-depth interviews involved conducting intensive (sometimes repeated more than once) individual interviews with a respondent to explore their perspectives on a particular idea or situation. The strength of the domestication approach, and indeed cultural studies, lie in providing the context to people's technology use decisions (over and above looking at, say, gratifications, as in the "uses and gratifications" framework), and this may involve asking many questions requesting elaborated answers and taking more than one interview (Haddon 2011:).

For this study, this also entailed building rapport and a lengthy process of setting up relations with participants in the study (Haddon 2011). All the individual in-depth interviews were conducted with the researcher with the assistance of one female research assistant at each institution of higher learning that participated in the study. These research assistants - who also took part in distributing the self-administered questionnaire - were briefed on the study objectives and were also given a schedule of questions asked during the interviews. The researcher wanted to access explanations and detailed understandings of youth's experiences in relation to their general media use, but particularly also about the role that mobile Internet is playing in their lives as a socialising platform on a number of issues including health-related identities and knowledge competencies.

Whilst focus group discussions are also a powerful qualitative research tool used to understand a group's lived experiences and perceptions over a given subject, the researcher particularly preferred in-depth individual interviews. This is because focus group discussions are good at exploring group dynamics or how a particular sub-cultural group share experiences. In addition, whilst youth in tertiary institutions in Zimbabwe may share their everyday experiences about a new mobile phone application, for example, or a new mobile game, much of the actual consumption of mobile Internet and online activities take place in individual, sporadic activities<sup>14</sup> that are triggered by particularly pressing needs or situations (for example not feeling well or not understanding certain biological changes taking place in their bodies). I considered that it is these practices (fleeting as they may be) that would provide rich

---

<sup>14</sup> At least during interviews, it came out strongly that youth usually go online using their mobile Internet to access health-related information when they are alone at home, especially in the privacy of their bedrooms, on in campus residents, in the privacy of their rooms.

insights into what often goes unsaid about the youth's spheres of experience about growing up or on their knowledge about personal health.

One particular issue running through the literature on digital media technologies and youth is that the youth - elsewhere described as the 'net generation', or the 'y' generation (Hargittai 2010) - increasingly spend much of their time on the Internet. Through the virtual world, they get socialised about the worldview, including, as this study argues, issues about health and sexuality. Questions such as: from what you remember about your own experiences, how much time do you spend with your mobile phone; whether at home or with your friends? When you go online using mobile Internet, what is it that you look up for besides chatting with friends on social networks? Have you ever received health-related information through your mobile phone and if so, what is your attitude to those messages and do you think they helped you?

Whilst the researcher had an interview guide to ensure that all research questions were asked, these interviews were generally open ended, conversational and allowed respondents to provide explanations, and sometimes site examples of personal experiences. For example, the researcher wanted to know what youth use mobile Internet for in broad sense, but these questions were cascaded down to specific uses such as searching for health-related information. Questions also probed the kind of websites that youth visit when they look up for health-related information. These interviews were in the form of a series of multiple, lengthy sessions, sometimes repeated over more than one day after initial discussions so as to follow up on initial responses and emerging themes.

#### **4.6.2.1 Sampling and recruitment of individual interviewees**

Students who participated in the individual in-depth interviews were drawn from a small and admittedly non-representative sample. As already discussed above, selection of participants for qualitative interviews do not normally strive at drawing from a representative sample, but rather for purposes of inductively building theoretical propositions/hypotheses (Bryman 1988: 90). Primarily, respondents were purposively selected during the administration of the questionnaire were students who had shown

particular interest in issues raised in the questionnaire were asked to also participate in the individual in-depth interviews. In total, the researcher conducted 20 in-depth interviews, eight of them repeated over more than once and sometimes three times. Repeat interviews were mostly conducted with respondents who had more to say, had interesting insights or had particular experiences that resonate with the broader objectives of the study.

#### **4.6.2.2 My role as moderator**

To make the interviewees feel comfortable and thus freely express their experiences, the researcher conducted these interviews in more informal environments. For example, most of the interviews were conducted at the campus greens and open spaces. All the interviews were tape recorded on an MP3 audio recorder and with express consent from the interviewees. All data were transcribed verbatim by the researcher in Microsoft Word, and then sorted and scripted to identify main themes and patterns. Four students refused to have interviews recorded but were comfortable with the researcher jotting down notes instead. During interviews with female respondents, a female research assistant would also sit in during the interview to help ease the tension that can arise in interviews involving members of different genders (Fontana & Frey).

#### **4.6.3 Field observation**

Qualitative research is concerned with observing and interviewing people to learn about their social and cultural context, recording as much descriptive detail in the process as possible (Deacon et al. 1999). Observation involves systematically noting and recording events, behaviours, and artefacts in the chosen research setting and requires first-hand involvement in the social world chosen for study. The observational record is frequently referred to as *field notes*—detailed, non-judgmental, concrete descriptions of what has been observed.

The researcher spent a lot of time observing students and campus life, for example, as they engage in sport activities at the sports pavilion, visit the gym and the swimming pool, visit the canteens, move in and out of lecture rooms and visit the taxi rank (for none-resident students) or disperse to their respective halls of residents. Most of these observations took place in conjunction with the individual in-depth interviews, where

the researcher asked the research participant to demonstrate how they actually go about accessing online health information, noting the complex interactions between youth and technologies. Observations were more like a follow-up approach to cross-check and corroborate what youth would have reported during individual in-depth interviews to see whether indeed their personal mobile phones really had access to the Internet as reported during individual in-depth interviews, to check how these online practices were executed in a typical day, as well as to check their ability to use mobile Internet.

#### **4.7 Challenges in the field**

One challenge related to my positioning in the field as a research for a doctoral thesis, and thus students at first contact would regard me with high esteem and this tended to create 'distance' between me and them. However, after further explaining my purpose and after repeated encounters, this tension eased out and most of them felt comfortable and opened up during discussion.

However, in spite of these challenges, my fieldwork experiences taught me a number of important lessons regarding conducting research on health and sexuality. It became clear to me that ethnography provides a better way to access the 'everyday' phenomena as these often happen in spontaneous ways (Rangaswamy & Cutrell 2012) and thus requiring some level of continued presence. The research relationship yielded through these extended periods of encounter were rewarding in the sense that more information and 'discovery' increase over time as research participants become accustomed to the researcher.

#### **4.8 Ethical considerations**

The study respected freedom to participate by guaranteeing confidentiality and the option to stop the interview at whatever stage they felt so. Participants were asked to voluntarily consent to participate in the study without coercion and deception. Anonymity and confidentiality of participants was guaranteed by using pseudo names for all interview participants (for both in-depth individual interviews and the structured interview) during data transcription and during the thesis write-up. The survey

questionnaire was only identifiable through a coding system using numbers. The study participants were guaranteed equal treatment despite their race, gender, age and or ethnicity. No harm of whatsoever nature was inflicted to the study participants.

This study, at inception, received ethical clearance from Rhodes University Ethics committee and permission was requested from the participating students and the participating institutions' authorities.

#### **4.9 Conclusion**

In this chapter, the study described the methods used for data collection, and argued for an approach that mixes research methods from both quantitative and qualitative traditions. The key Research methods used in this study are the administration of a survey to a representative number of students, field observations *in situ*, and in-depth individual interviews. The study argues that in a mixed method research design, quantitative and qualitative methods are seen as distinct methods of examining the same research phenomena (Bryman 1988: 131) but they also offer an added advantage of compensating for the strengths and weaknesses of the other (Deacon et al 1999).

## CHAPTER 5

### ADOPTION, DOMESTICATION AND SOCIAL POWER: YOUTH AND EVERYDAY MOBILE TECHNOLOGY

#### 5 Introduction

As outlined in the introductory chapter, this study investigates the meanings that youth from three tertiary learning institutions in Harare, Zimbabwe, make out of using mobile phones and the mobile Internet for purposes of accessing health-related information online. Overall, the key research questions raised in this study are: How do online health-seeking practices differ across gender?, Do online health-seeking practices contribute to health-related identity formation? How do digital media technologies enhance young people's social agency? The overall aim of this study is therefore to understand the processes of adoption and uses of digital media technologies by youths so as to understand the lived realities that shape and constrain the deployment of these technologies in Zimbabwe. Particularly important in this study was to understand the significance of such emerging cultural practices on youth's knowledge repertoires *vis a vis* a constraining structural environment of a paternalistic political, social and cultural system. However, this chapter specifically answers two of the three research questions raised in this study: a) How do online health-seeking practices differ across gender? b) How do online health-seeking practices contribute to health-related identity formation?

To understand whether accessing health-related knowledge through the mobile phone and mobile Internet are 'empowering' young people requires a wider exploration of the contours of change made possible through the mobile phone. For this study, it necessitated an exploration of other adjunct lenses of social identity, in addition to health and sexual health/sexuality, including masculinities and femininities. Therefore, as will be reflected through empirical data, the study used a broader approach to understand the 'arenas' that mobile technologies might be changing in young people's lives, and whilst maintaining a specific focus on health and sexual identities, the subject of identity is applied in the broadest sense to capture a holistic picture of possible 'shifts' in young people's agency and resistance to social control and power.

To answer the research questions raised in this study, a survey, sustained in-depth individual discussions and field observations were deployed at three institutions of tertiary learning in Harare, Zimbabwe. Data collection began in February 2014 to September 2014 as well as in March 2015. In the sections that follow, the study presents the research findings, starting first with observational data to capture a typical everyday digital media assemblage and use practices for young people, and how such everyday practices point to emerging youth identities and experiences in modern Zimbabwe, but particularly among young college students. Whilst the observational material is admittedly not exhaustive (being only a snap view of what was accessible to the researcher at that particular time), they provide initial basis for understanding the research context as well as inform subsequent debates that follow in other sections of this chapter and the next chapter.

### **5.1 Technology and the everyday: some observations**

Building on my initial observations narrated in Chapter 1, I was struck by just how profound the technological transition had been compared to what I had experienced 14 years earlier, in the early 2000s, as an undergraduate student at the University of Zimbabwe. It was clear that there is a significant shift in youths' social experience of campus life, and most significantly, their identities (including sexual and social identities) as well as their forms of engagement with the everyday constraints of social power and campus authority. As I sat waiting for a male student, Tonde, with whom I had an interview, I engaged in a state of self-introspection (Finlay 2002), imagining what it might mean for my research subjects to have a mobile phone, with which it is possible to access unlimited access to health information, and with which to navigate everyday life. Whilst I had my own mobile phone and was now studying at Rhodes University with its very 'high tech' infrastructure, it was imperative to look at 'the other', the subjects of my research, with a critical eye, as the fleeting moments of technology use can easily go unnoticed even by the researcher.

Just as Tonde approached me and sat by my side, his Samsung smart phone rang. The ringing tone was that of a popular Zim dancehall<sup>15</sup> song called *Mhai* (Shona for *mother*) by one of the popular young artists in that music genre, and for me, this fleeting moment was already beginning to say something about Tonde's identity. Thus, whilst it is possible that a ringing tone might pass unnoticed (particularly because of the everyday and obdurate presence of the phone in our lives), on further and critical reflection we learn more about, for example, what the user is communicating to us through that particular ringing tone. Cell phone ring tones say a lot about the user's identity (Hjorth 2008).

As in Jamaica, Zim dancehall is known in Zimbabwe for its notoriety for sexually provocative lyrics that are also bent on promoting youth rebellious culture, violence, disobedience to authority and drug abuse. It struck my mind that Tonde might be subconsciously asserting his male youth identity in contemporary Zimbabwe characterised by high unemployment and general apathy in almost all spheres of life. In addition, the liminality of campus life create a conducive atmosphere for self-expression and imagined new identities.

As Masvaure (2010) puts it in reference to campus male identity: “regardless of where *chi-UBA* (see Chapter 2 for a better appreciation of the notion of *chi-UBA*) is enacted—on campus or off-campus; in a female residence room or in a public taxi—and regardless of the reasons for its enactment—to challenge a gerontocratic national politics or to reproduce gender, class and ethnic hierarchies—*chi-UBA* is not just about *doing* masculinity” (p 103), but is also about *enacting* masculinity which is predicated on anti-authority, rebelliousness, fearlessness, intelligence. My reflective introspection was that, because of the luminal nature of the campus environment, together with the creative choice of such mobile phone ring tone were already pointing to some sub-cultural practices associated with certain spaces (campus or collage life). I was also aware that the technological assemblage that included the Samsung smart phone and the ‘customised’<sup>16</sup> ring tone could not be taken for granted. They all communicated

---

<sup>15</sup> Zim dancehall, as it has become known, is a particular urban sub-cultural music genre borrowed by Zimbabwean young artists from Jamaican dancehall music.

<sup>16</sup> Even though smart phones come with encoded ring tones, they allow users to choose a load a ring tone of their choice so that it becomes the default tone for all incoming calls or messages.

strong messages about an on-going identity form that is very pertinent in this study. As I have already highlighted in the introduction above, I believed it to be important to look at identity in the more general sense, and later cascade it to more specific health-related identities which forms the core to this study. I will contextualise this observation within the frames of Cultural Studies theory in the next paragraph.

In the Cultural Studies research tradition, youth identity forms one central category for understanding subcultures, and particularly subcultures' resistive elements and struggles for autonomy. The notion of counter-hegemony (Gramsci 1971) raised earlier in this study thus assumes a very critical role in terms of analysing forms of resistive cultures and the spaces where Zimbabwean young people could be subtly registering their resistance to social and generational power and authoritarian political power.

It was thus imperative to locate and analyse Tonde's consumption of this type of music, given the context highlighted in Chapter two. In a society where political power is very constrained through the political 'crowding' of the public sphere on the one hand and arbitrary police power on the other, as well as a social environment where social power is also constrained by family and tradition, the dancehall movement in Zimbabwe (and its consumption by young people participating in this study) can be seen as an attempt to subvert social control and arbitrary authority.

Whilst the constraining environment of authoritarian university structures characterised by arbitrary squashing of student activism may be successful in muzzling outright protests, it also creates an environment characterised by youth "subcultures" aimed at resisting or opposing the imperatives of the parent culture, for example, through fashion, dance, music, and other cultural forms (Buckingham 2008; Gelder & Thornton 2005; McRobbie 1995; Hall & Jefferson 1975). Thus, these everyday cultural practices are forms of a counter-hegemonic diction to political authority and social power.

My encounter and subsequent discussions with Tonde, at least, heightened my curiosity about other arenas of young people's lives that might bring insights on issues of "resistance", "agency", "self-autonomy" and "identity", which are all central in bringing to light the extent to which the use of mobile phones might be seen as enabling young people to counter the hegemony of dominant structures of power and their

limitations on self-formation. These contribute to this study's understanding of how young people's identities are shifting as a result of the exposure to mobile technologies more broadly.

More specifically, my encounter with Tonde demonstrated that in spite of the structural limitations, young people have agency, 'will' and 'power' to negotiate these limitations, and that the use of mobile phones for constructing identities are in tandem with self-autonomy and efficacy. Thus, despite the "tactical" (De Certau 1984) nature of young people's response to the environment, they display elements of social agency. As would later appear in my individual in-depth discussions with him and other interview participants later, students creatively use the mobile phone to stay in contact with each other, particularly in times of trouble or to warn other students to be wary of the overzealous campus security officers who are known for harassing students, even during my time as a student at this institution. For example, Tonde mentions that during students' demonstration in March 2015 against poor food rations and in solidarity to the late-payment of salaries for university teaching staff, students had "used WhatsApp to co-ordinate and organise the strike" (interview with Tonde) and had also used this social media platform to notify each other to be wary of the campus security agents who might pounce on them.

In addition to the Samsung smart phone, Tonde had a Huawei tablet, and he tells me later that one of the mobile network service providers had entered into partnership with the University of Zimbabwe's College of Health Sciences to roll out a mobile learning pilot programme beginning in February 2014.

Through the mobile learning programme, students in the Faculty of Health Sciences had access to e-books on their Huawei tablets, at a subsidised mobile data rate offered by the network service provider, Tonde explains. As he explains to me how it works, Tonde, a final year Veterinary Science student, flips through a range of e-books on his tablet and he ends with '*zviri kufaya mudhara*' (things are working well, Mr!), we call it mobile learning'.

Through his phone tablet, Tonde can browse the Internet and can have access not only to a range of educational materials, but just anything else on the Internet including, as it

later turned out during our conversation, information around sexually transmitted infections (STIs). Tonde is particularly open about his experiences, telling me how some few months ago he had been using his mobile phone on a number of occasions to look up for information on sexually transmitted infections. It was “just to ward off my fears because I wanted to know how such diseases manifest” (interview with Tonde). A story in the local newspaper about rising cases of STIs at institutions of tertiary learning head made him get a bit unsettled, and he had been looking around for information around such diseases.

Through my encounter with Tonde, it was clear to me how young people ‘actively’ construct their health identities in ways that are different, and which was never conceivable 14 years earlier in 2000 during our student generation at university. Whilst as students we would visit the students’ clinic located on campus, we sometimes endured standing in a queue or being asked over the counter about how the nurses could assist us. In this era where campus wifi is available, and where smart phones can perform such functionalities like searching health information online, it is clear basic online that pre-consultation could allay a lot of fears or totally render unnecessary a visit to the clinic in the first place. I had thus began to relate with what one young man had made reference to when he had said his current generation of students is “more privileged” because they had “more control of our lives” and “we are more exposed to a lot of things” (interview with Anna).

When I made another appointment with Lungile, a second year student at Harare Poly, he did not show up and when I called him on his mobile phone, he mentions that he was in the downtown parts of Harare, at an Internet Cafe where he had taken his phone to install some applications. Out of curiosity, I decided to join him at the Internet cafe and when I finally saw him, he introduced me to a group of his friends from Harare Poly who had also wanted to install WhatsApp. The proprietor of the Internet cafe (like hundreds more of such shops sprouting on the open streets and in downtown Harare) sold an assortment of mobile phone electrical components and hardware, including CDs, earphones, memory cards, memory sticks, mobile phone covers, mobile phone screen guards and a range of accessories popular with youth in Harare. He was also in the business of installing WhatsApp on cheap Chinese Internet-enabled phones, which

are known for their incompatibility with WhatsApp, but had devised ways to install the application nevertheless.

Tonde had particularly wanted to install WhatsApp and Opera Mini browser as the current version installed on his smart phone would be expiring and he could not imagine living without it. In addition, the Opera Mini browser was an important resource for his research on the Internet, and through it he had access to information related health, sexuality and a range of music and information that helps shape his identity. They had a WhatsApp group for his class where they discussed assignments and he wouldn't risk missing out discussions with other members.

My observations above are reflective of typical 'everyday' cultural practices of youths' engagement with mobile technology. Playing music, browsing text books (albeit on a tablet), seeking health information, 'hooking up' through instant messaging technology for academic and other purposes. Whilst to my interviewees this was obviously 'ordinary', to me as a researcher, and particularly comparing current youths' experiences with what I had experienced 14 years earlier, there was a clear and marked transition of college experience, at least in the sense of the range of technological ensemble available to students and in terms of what they are now able to accomplish and the types of identities that they are able to construct for themselves.

In the sections below, and using empirical data from the field, the study explores what the everyday uses of the mobile phone and mobile Internet might mean to the users. Whilst for this study such everyday uses might not be obtrusively and overtly political in the sense articulated in Cultural Studies notion of 'resistance' (Hall 1990; Johnson 1986; Fiske 1986, 1987; Radway 1984), or of overtly overthrowing political and other centres of established power, they are, this study argues, suggestive of shifts in the discourse of resistance in Zimbabwe. As Wasserman (2011) puts it:

We need to find out what the domestication of mobile phones within a specific socio-cultural and politico- economic context in Africa tells us about people's engagement or disengagement with politics, how the popular relates to the political and everyday life links to democratic processes. We can expect an ethnographic approach to mobile phones to tell us more about the integration of

phones in the everyday life of Africans, that is, how they use phones to socialize, be entertained, organize their daily routines, and do their jobs... While (the) blurring of the private/public divide may seem disconcerting for observers who prefer their politics rational and deliberative, it may pose interesting new possibilities for an understanding of the private as political, and for the popular as having serious public implications (p. 151).

As has been developed in the cultural studies tradition, (discussed in chapter 3), a way in which power is contested has to do with individuals' ability to use cultural products and resources (for this study, digital media technologies) to resist their subordination by those with the means of cultural production (Fiske 1986; Hall 1978; 1980; Morley 2003; Kellner 2003; Morley 1996) and in this study, the state's control and manipulation of the media. In media studies, it also means having access to diverse views and contradictory discourses that enable individuals to make more 'independent' and informed decisions.

For example, during interviews and in-depth discussions, many respondents argued that they used their mobile phones to access information, and particularly health-related information on the Internet because they 'really wanted to know' something. And, on the Internet, they were often able to satisfy that curiosity. In addition, as will be shown below, some students posited that unlike the earlier generation of young people who grew before smart phones, the current modern generation of youth find the technology as making them "more adventurous, inquisitive, risk-taking and curious" (interview with Rumbi). This way, and through the global flows of information and knowledge(s), young people in Zimbabwe are aware of the structural limitations that impact on their self-autonomy, and through digital media technologies, they often become curious, inquisitive and desirous of new and alternative ways of perceiving social order, power and their identities which stand constrained (see Chapter 2).

In a repressive society like Zimbabwe, having this curiosity and having the ability to satisfy this curiosity, can both be seen as revolutionary acts or, at very least counter-hegemonic acts. In addition, it can be argued that this curiosity is indicative of some level of social agency on the part of the user, who does not only wait to consume what

is provided from limited choices (such as from traditional media in Zimbabwe, or from traditional sources such as entrenched social norms and belief systems), but rather is involved in an active process of searching for health information online where there are multiple perspectives and sources.

Respondents argued that they sometimes develop creative ways to get more information over and above what the doctor would have said. From their arguments, it would indicate that subsequent consultations with the doctor would be much more reciprocal owing to the patient having accumulated some degree of knowledge in particular health conditions and illness.

One respondent agrees that the reason why she visited the Internet was because she wanted to know more about her health condition because the explanation she got from the doctor was not satisfactory. In addition, she did not have the money and time to book for another appointment with the doctor, thus indicating how structural impediments of poverty limit young people from a fulfilling and healthy life:

“When I consulted online for information on cyst I did not have the time and money to go back and ask further details about this condition. The doctor didn’t tell me what the cause of this condition was. With the doctor you don’t get to talk to him (sic) over an extended period of time. Other patients are queuing outside. So I had to search on my own to try and understand this condition. I really wanted to know more about this condition. I got the information and it was really helpful. I was satisfied. At least I got some detailed explanations about what causes cyst. I now know more stuff than before, and even after visiting the doctor. With this experience, I think next time I get ill I may consult the Internet first” (interview with Susan).

Most respondents stated that they visited online resources after consulting a doctor about particular health conditions but having left without satisfactory explanations about the disease or condition. Respondents argued that doctors rarely have time to commit “to your individual problems” (interview with Susan). Doctors deal with a lot of patients in a given day, and so they rarely have enough time for more sustained interactions with patients. This is even worse in the context of Zimbabwe where the

health care sector suffers from massive brain drain, underfunding and a doctor patient ratio of just 1.6 doctors per 10,000 people (Newsday<sup>17</sup> 2015).

Tatenda, a male student argues that using his mobile phone to look for information about persistent chest pains was very helpful. He did not have the resources to visit the doctor and also did not have the time to do so since end of semester examinations were approaching. This is what he had to say:

“The first reason was; I really wanted to know but I didn’t have the money. And second, I had no time. We were close to exams and so I had no time to visit the doctor. So the easiest way for me was to at least get some basic information from the Internet. Yes, it was just basic information but it made me write the exam without a lot of anxiety. A lot of things were explained online. I also remember that the page that I visited had some question and answers. People with similar conditions were asking questions and other people gave answers. These were very helpful as some of the questions really addressed my concerns and so I did not have to go very far or to get worried. It made me feel a bit comfortable knowing that someone else was experiencing what I had been experiencing that time”  
(*Interview with Tatenda*).

It appeared that the lack of resources, in addition to curiosity, were the major factors contributing to young people visiting online resources to access health information. However, the connectivity enabled through social media not only increases social capital, but also empowers users by expanding knowledge repertoires because, as the respondent says, she “knows that someone else was experiencing what I had been experiencing that time”.

In domestication literature, the appropriation of media technology and their related contents shows how users are active agents involved in the global appropriation and exchange of ideas and information. Therefore, the idea of ‘active agents’, as opposed to passive consumers, constitutes a central theoretical contribution by the domestication theory. Both Susan (female respondent) and Tatenda (male respondent) are shown to be constrained by financial limitations, but also, as aware of the arduous process of

---

<sup>17</sup> See <https://www.newsday.co.zw/2015/01/27/six-horror-facts-zimbabwes-healthcare/>

queuing for a doctor who may be limited from providing satisfactory patient care because of an enormously unbalanced doctor-patient ration. As one student argues:

“Yes I did that (using mobile phone to search online for health information) many times. I just chose that for obvious reasons. Visiting a doctor can cost twenty dollars in consultation fees and that’s expensive for me. But with my mobile phone I can buy Internet credit just for a dollar (USD). It was more convenient to do that. I later went to the pharmacy and bought a certain drug that the pharmacist asked me to buy. I ask had been asking the pharmacist further and she helped me. It worked” (interview with Tatenda).

Another young woman student weighed in, citing lack of financial resources as the reason for visiting the doctor:

“I am anaemic so I remember visiting online information through my mobile phone a lot of times to look around for information about my condition. I remember that I didn’t want to visit the doctor because I did not have medical cover. Consulting a doctor costs twenty dollars per visit but as you know I am a student and I don’t have that money with me. But if you just go online with your mobile phone you use just USD50 cents. So that’s cheap. I did not want to bother my parents in the rural areas because I know that they also didn’t have such money at that time.” (interview with Alice).

As with all the other interview excerpts above, digital media technology users are seen as exercising some level of social agency by accessing online portals for health information, with the mobile phone facilitating expanded possibilities and offering affordable alternatives to accessing health knowledge. However, Susan says that she also shared the information that she had read around cyst with her sister who had a similar condition. She had also begun to read around cyst. This is what Susan had to say:

“Yes I shared with friends and particularly my sister. I have a sister who also had cyst like me but she had been hesitating to go up to the doctor fearing that she would hear the worst news. It was really helpful for her because when she finally went to the doctor she already had a lot of information with her. She said it was

helpful because the same thing that I had told her is the same stuff that the doctor told her later and she was already somehow prepared for it psychologically. There was nothing really shocking when she got the information” (interview with Susan).

In Cultural Studies and the domestication approach, social agency and the everyday are important categories for analysing how social actors use available resources (including for this study, media technology and related content) to negotiate the everyday life. Using smart phones to access health information thus becomes more than tactical practices to ‘get by’ as others would put it (Ukeje & Iwilade 2012). They are really socially situated practices involving some degree of agency and creativity to deal with real life problems. Ideas about social struggle and agency were popularised through seminal arguments articulated in Richard Hoggart’s (1956) *The Uses of Literacy*, which argued that the way in which people make use of media and related contents shows them not as passive victims, but as active makers of their own practices and identities.

When people deal with day-to-day problems, those who become victims of a dysfunctional system are usually the poor, youth and women even though, as this study will demonstrate, they are not helpless victims. The above mentioned everyday practices do not constitute overt political action, nor do they in any way constitute radical action against the limitations placed on them through structure and the government’s inefficiencies. However, when looked at from the domestication approach; a methodological and theoretical explanation of how social agents engage in appropriation and domestication of technology, it is possible to think of these practices as giving social actors the agency to ‘move’ beyond their limitations of impoverishment, poor health care system characterised by unequal doctor-patient ratio as well as a private health care system that is beyond the reach of the majority poor. These practices represent strategies for circumventing structural limitations.

Using the reflective metaphor of comparatively “moving back and forth” between the experiences of the generation of early 2000s students and the current generation of students narrated above, it can be seen that present generation of students have more options and are better equipped to resist the conditions that set limitations on their self-

autonomy. As one participant argues, the contemporary generation is much more adventurous and get to learn more and discover through the mobile phone:

“Yah there is a big difference between us and the older generation who did not grow with the mobile phone. The older guys think “apps” are not good for us. But for me mobile phones don’t have anything negative about them. With mobile applications I am more exposed to a lot of things. The phone itself sharpens my brains. When you use it you are actually learning through experience. It makes you to explore... something like adventurous. Technology ignites your brains to be more adventurous and risk taking. I once read that risk taking people are more successful. So when you use the mobile phone you get to know a lot of things. You are always looking for more stuff; you are more curious and adventurous. For example, when you download a new application and you don’t know how to use it, you learn until you know it. That is learning” (interview with Rumbi).

Another young man had this to say:

“These technologies are especially good for us young people because we are very inquisitive, people who need answers about things that trouble them.... You get what you want, when you need it, be it scholarships, job hunting...” (interview with Tonde).

As was highlighted in the context chapters and the theory chapter, the central focus of this study was to understand how young people and young women use technology to consume health-related information, with a particular focus on the meanings of such practices in a context of poverty, dysfunctional health care system, unequal distribution of social power and a politically crowded public sphere with limited opportunities for civic related issues such as public health education. It can be seen from the responses that youth clearly link technology with a sense of advancement, curiosity and adventure. Aspects of social agency relates to how individuals feel that they have the capacity to act with or without constraints. It relates to how individuals are able to exercise self-will.

It is also arguable that the cultural practices related to consuming health-related information online are strategic tactics, where social agency plays a critical role. The

theoretical lenses of Cultural Studies approach and the domestication theory both focus on social context, and they both provide a theory of how social actors have some level of agency as seen either in their appropriation and taming of technology to serve their individual contextual needs or through acts of consumption that are counter hegemonic and resistive to dominant cultures. In all instances, user agency is central.

However, in Africa, attempts to “empower” the marginalised often take the form of external donor funded initiatives (Chiumbu 2012), and this often has the effect of losing the power of agency and intentionality. This is, however, different from practices observed in this study, where health information search is user initiated, and where need and necessity (as opposed to advocacy and social mobilisation by external agents) is primary. Thus, most mobile health programmes have been coordinated by institutional and donor organizations through various technical assistance mechanisms. In the context of self-initiated health seeking practices where individuals engage in self-health seeking practices as this study demonstrates, our understanding of social power assumes a more nuanced meaning, and it is arguable that social actors have agency when they adopt mobile Internet and use it for a wide range of research purposes, including academic and personal health research.

In the above interview excerpts, there is evidence that social actors exercise their agency to transgress the limitations of poverty on the one hand, as well as the constraining limitations of time in addition to sheer curiosity, with which their health-related goals are often satisfied. The sociological notion of ‘agency’ (see Giddens 1984) relates to how social actors have the capacity to exercise individual will, action, intentionality, choice and means to resist the limitations of structures. In this study, there is evidence of the utilisation of “mobile phones in an organic and bottom-up manner” (Chiumbu 2012: 194).

In addition, as argued in the theory chapter, determinist approaches to the study of technology are often blind to the organic origin of social change by foregrounding technology and its instrumental utility (Golding 2000). Instead of applying this approach, this study demonstrates that the appropriation of mobile phones and mobile Internet by young people to suit their everyday realities such as academic research,

connecting with each other and searching for health-related information actually amplify their social agency.

## 5.2 Every day practices of technology use: online health consumption

One assumption underpinning this study was that a significant number of youths use their mobile phones and mobile Internet to access health-related information online. To explore this assumption, this study thus sought to ascertain, from the onset, the extent to which these practices are prevalent among the research community. A survey questionnaire was thus deployed to understand the popularity of these practices, with particular focus on the distribution of these practices between young men and young women.

The survey questionnaire solicited information about whether respondents' mobile phones are compatible with Internet access. Second, the survey also asked a question about whether respondents used their mobile Internet to search for health-related information as well as another question on whether respondents knew anyone who uses their mobile phone to look for health-related information online. The tables below show responses from these three questions.

Table 3. Mobile phone access to the Internet

	Yes	No
	%	%
Male	98.96	1.04
Female	96.88	3.13

As can be seen in the table above, the survey results show that 98.96% of male students have access to mobile Internet through their mobile phones whereas 96.88% of female students have access to mobile Internet through their mobile phones. There is a marginal difference between male and female students who have mobile Internet access. Only 3.13% of female students do not have access to the mobile Internet compared to 1.04% for male students who cannot have access to Internet through their mobile phones.

Whilst there has been critical scholarly concerns about the digital divide that tend to manifest along gender lines (Livingstone & Helsper 2007; Wyatt et al 2005), this study shows evidence of a relatively equitable distribution of mobile technology across genders.

In addition, and as will be shown in subsequent sections below and in Chapter 6, there is a substantial shift in gender role power and social expectations which was traditionally predicated on a strong patriarchal culture that tend to produce asymmetrical power relations between men and women. Interview discussions in subsequent sections below will give testimony to a generally softening patriarchal system in Zimbabwe, where women and man are more equal than before.

However, whilst this chapter only demonstrate what respondents see as their everyday experiences of softening patriarchal power, Chapter 6 looks at the question “how” this is happening, in what social axis is gender power shifting, how patriarchy locates itself in these developments overall as well as how interview participants see mobile phones as playing a role in this perceived transition. Chapter 6 particularly looks at identity in a broader perspective to encompass both health-related and social identity and argues that these are the axes through which mobile phones and mobile Internet are enabling shifts in social power and enabling young people to subvert structural limitations.

Both male and female students argued that the traditional social control and social institutions such as patriarchy are increasingly loosening and women’s autonomy is increasingly being recognised. Anita argues:

“These days women also know what is happening outside of Zimbabwe, they also go overseas to look for work and they compete equally with everyone. The mobile phone is playing a critical role in this. For example, in my mobile phone I have contacts of friends who left for the United Kingdom and Australia. We communicate every day and they tell me that there are more prospects that side. I am really considering going there after my studies” (Anita, Interview transcript).

From this interview excerpt, and as will also be shown in Chapter 7, the ability of women to determine their fate (through decisions on whether or not to go overseas) as well as the connectedness and resultant social capital available through mobile

connectivity is indicative of some level of social power and agency. Contextual chapters have shown that in traditional Zimbabwe, decision making rests male power, and more often women have to consult for permission from the immediate male authority in who has to make such decisions on her behalf. Institutions that usurp social autonomy (and particularly in women) from making decisions are marriage, the family and the extended family – all of which are underpinned by patriarchal inference. When asked if there is any significant shift in gender role power, another female student agrees:

“Yes, now things are changing. Women are no longer that disadvantaged. Especially with this global village thing and digital technologies. It is important for women to be connected. With a mobile phone women now can build more connections, and the contacts that you have on your mobile phone can just one day open up answers for your employment search and you can actually get a job. Just now I was telling you about searching for health information and I was telling you that women are the biggest beneficiaries not because technology favours women, but because women tend to have more health complications than men. Maybe men might not be that interested but women will be more enthusiastic because the Internet somehow closes an age long gap where those that needed more health information were treated equally with those that did not need it much” (interview with Shami).

These sentiments chime with contemporary literature raised in Chapter 1. The literature argues that whereas in Zimbabwe labour migration usually involved men moving into urban areas, or to South African goldmines and white settler farms, Zimbabwean women are now the core of recent migration flows to South Africa, Britain and Australia (Tinarwo & Pasura 2014: 521; Pasura 2008). These have resulted in an increased economic power and autonomy for many women who are now able to negotiate on fairly equal grounds with their partners and now have ‘voice’ in decision making.

In the context of this study, the mobile phone can therefore be seen as part of the conversations about ever changing identity socially, but also where the mobile phone

can give women agency and ‘voice’ to their experiences and realities as they decide and navigate their own destiny in global flow of information.

Whilst the above discussion shows a general shift in gender role power, as well as a more equal ownership of digital technologies between men and women (through the survey questionnaire), the study also sought to understand the patterns of online health information search between men and women. This analysis thus partly seeks to answer the research question: How do online health-seeking practices differ across genders?

The table below represents the findings to the question: How often do you use your mobile phone to search for health information on the Internet? Overall, 54.9%, (n = 211) of both male and female students ‘sometimes’ use their mobile phones to access health-related information online and 17.2% (n = 66) reported that they ‘usually’ do so. These figures show that online health seeking practices is popular among young people in Zimbabwe. With respect to gender distribution about whether young people actually search online for health information, the survey shows that there is a marginal difference between young man and young women who conduct research on health-related matters online.

Table 4. Mobile phone use for health information search

		Mobile phone use for health information search					
		Never	Remotely	Sometimes	Usually	Total	
Sex of respondent	Male	Count	25	35	103	29	192
		% of Total	6.5%	9.1%	26.8%	7.6%	50.0%
	Female	Count	36	11	108	37	192
		% of Total	9.4%	2.9%	28.1%	9.6%	50.0%
Total		Count	61	46	211	66	384
		% of Total	15.9%	12.0%	54.9%	17.2%	100.0%

The table below represents survey participants’ response to the question: Do you know someone who has searched on Internet for health information using their mobile phone. 75% of respondents reported that they know someone who had used their mobile phone

to search for health-related information online whilst only 25% of total respondents did not know someone who used their mobile phones to look for health-related information online.

Table 5. Do you know someone who has searched health information through mobile

		Someone searched health information through mobile			
		Yes	No	Total	
Sex of respondent	Male	Count	135	57	192
		% of Total	35.2%	14.8%	50.0%
	Female	Count	153	39	192
		% of Total	39.8%	10.2%	50.0%
Total		Count	288	96	384
		% of Total	75.0%	25.0%	100.0%

However, it was also important to understand youth's general perspectives on whether they would be interested in accessing health-related information in the future. This information is important in view of the fact that youth's projected views about whether or not they would be interested in using their mobile phones to access health-related information online would provide formative evidence about future indications of these practices. The table below show responses to the question: In future, will you consider going online to search for health-related information?

Table 6. Will consult Internet for health info in future

		Will consult Internet for health info in future				
		Yes	Maybe	Never	Total	
Sex of respondent	Male	Count	129	56	7	192
		% of Total	33.6%	14.6%	1.8%	50.0%
	Female	Count	138	47	7	192
		% of Total	35.9%	12.2%	1.8%	50.0%
Total		Count	267	103	14	384

Table 6. Will consult Internet for health info in future

		Will consult Internet for health info in future				
		Yes	Maybe	Never	Total	
Sex of respondent	Male	Count	129	56	7	192
		% of Total	33.6%	14.6%	1.8%	50.0%
	Female	Count	138	47	7	192
		% of Total	35.9%	12.2%	1.8%	50.0%
Total		Count	267	103	14	384
		% of Total	69.5%	26.8%	3.6%	100.0%

As can be seen from the table below, a significant percentage (69.5%) of youths answered in the affirmation that they would use their mobile phones to access health-related information whilst 26.8% indicated that they “may be” interested in doing so. Only 3.6% indicated that they didn’t think, at the time of the survey, that they would ever do so.

The survey also asked a question about respondents’ views about who would most benefit from using mobile technologies to search for health-related information. The aim was to gauge social sentiments with regards to the perceived benefits of the mobile phone as a tool for accessing health information. As can be seen from the table below, both male and female respondents thought female youth would benefit most from accessing health-related information using digital technologies, whereas earlier questions had shown a marginal differences between young men and young women who actually or in future would consider visiting online portals for health information.

The view that women would benefit from online health seeking was later confirmed during the interview process as there was a general view that female youth stand to benefit more from the use digital technologies. From the survey questionnaire, 68.2% of surveyed respondents were of this view compared to only 23% who thought that males would benefit by searching health-related information online.

Table 7. Which gender would benefit most from using ICTs for health information search

		(q308) Gender that benefit most from ICTs			Total
		Male	Female	Both	
Male	Count	60	114	18	192
	% of Total	15.6%	29.7%	4.7%	50.0%
Female	Count	29	148	15	192
	% of Total	7.6%	38.5%	3.9%	50.0%
<b>Total</b>	Count	89	262	33	384
	% of Total	23.2%	68.2%	8.6%	100.0%

Through the survey questionnaire, the study has demonstrated that the use of mobile phones and mobile Internet for searching health-related information online is popular among young people, both female and male. After administering the survey questionnaire, the researcher conducted 28 in-depth individual discussions. This was to verify data provided during the survey for consistency as well as to get detailed ‘think’ descriptions and accounts for their reported practices, as well as to probe and observe why respondents were of the view that women benefit more through the use of mobile phones and mobile Internet to search for health-related information. As will be shown in the next sections, individual interviews confirmed the general perception that women are the largest consumers of online health information compared to men.

### 5.3 Hegemonic identities and health seeking practices

In sociological terms, identities are normally produced within the play of power, representation and difference which can be constructed negatively as the exclusion and marginalization of others, or celebrated as a source of diversity, heterogeneity and hybridity (Koc 2006: 38; Butler, 1996; Hall, 1996). However, sexual identity plays a critical role in terms youth socialisation and peer acceptance.

But how accurate is this understanding in relation to this present study's participants? And how are such discourses that attribute health concerns with females and not males divorced from the language of power and dominance? Identity theorists (see Hall 1996; Laclau 1990; Butler 1996; Said 1978) argue that the construction of identity involves processes of persistently distinguishing one identity from others by means of discourse as a symbolic and representative meaning tool which contributes to the construction of identity out of difference, exclusion and subordination (Koc 2006: 38).

Most of the students interviewed took it for granted that women had "more health issues" than men, hence women are more likely to be interested in health-related issues than their male counterparts. However, it later appeared that men tend to strategically downplay their online habits related to health seeking for identity reasons – that is, for buttressing the idea that men are strong, protecting and do not need help or protection.

For this study, this observation raises a critical question about the relationship between health seeking behaviour and gender. For example, the argument that associates masculinity as a barrier for men to engage in health seeking (O'Brien & Broom 2013; Skovdal et al. 2011; Harwood & Sparks 2003: 150). In Zimbabwe, literature shows that the socially constructed gender expectation of masculinity prevented many men from using HIV services in Zimbabwe (Skovdal et al. 2011).

Gendered perceptions of health raise concerns about the lack of understanding of men's experiences of health and illness (Cameron & Bernardes 1998) and as such prompts calls for research into the largely unexplored relationship between masculinity, help and health seeking behaviour and disease experiences (Volkers 1999). Help-seeking is located in the complex socio-cultural contexts of men's sexualities, masculinities and health (Pearson & Makadzange 2008: 361) and is further explored in this study. However, as will be shown below, the mobile phone's affordance of being personal and that of mobility made the mobile phone a tool that men can use without necessarily coming out in public about health issues that might be considered more personal and intimate.

However, in the current study, discussions with women respondents also tended to be characterised with such assumptions and generalisations. Female respondents actively

participated in reproducing hegemonic discourses and ideas by actively legitimising it. For example, Gramsci (1982) suggests that hegemony masks the reality of domination through manufacturing or activity seeking consent from the dominated. For example, one woman responded argued that “women have a lot of issues, a lot of complicated minor things...” arguing that such issues (health-related issues) do not affect men “at all”.

Anita, a young woman studying Political Sciences had this to say about health-seeking and gender:

“Well (laughs), I guess women would most likely look up for health information online using their mobile phones. I think the reasons are that women are affected by a lot of things ... diseases and stuff like that. Well, it’s because we (women) are sought of..., I don’t know how to put it across. It’s like we are prone to be affected by diseases.... And us women, we are more intimate with our phones, and these are the issues that we will most likely look for on the Internet. We spend much of our time with the mobile phone. Men don’t really get such complications and even if they do, they don’t really get worried like us women. So you can see that guys can even ignore a very serious condition because they are afraid to ask or simply because they take a lot of things for granted. Plus they are not so intimately close with their phones. That is why sometimes you see the phone doesn’t look that good, it has scratches. It all starts from that lack of care.

When looked at from identity theories, the attribution that women would most likely be more interested in health than men may be seen as discourse produced within structures of power, where language and representation are used as discursive strategies to speak about the “other” (Hall 1996; 1997) who is prone to health seeking (and disease), as antonymic to the self sufficiency qualities of masculine identity (Harwood & Sparks 2003). Whilst this might not be true, or hard to prove, this research sought to explore the reasons why men (and women) largely attribute health seeking behaviours and attitudes to women and not to men.

In agreement with the above respondent’s remarks about why women would be more interested in health-seeking than men, a 24 year old male student argues:

“It is because they are always at home looking after children and as such they are likely to visit online to look for things that may be affecting the baby. My sister developed some rash all over her face when she was pregnant. She didn’t know whether it was the pregnancy or something else, but she was lazy to go to the clinic. I told her that she could find answers on Google and true, it was confirmed that it was pregnancy related. She ended up buying some facial cream that she applied. When women get married they become concerned about the family and get worried about their health and their children’s but men are not so much into that. They go outside to have fun with fellow men and not stay in the house with women. But since men will be socialising out with other men, they also get information among their circle of friends. But obviously its more to do with sex (interview with Tonde).

On the other hand, a male student argues that he is not really concerned about health issues himself, as women would be:

“Although health is important to me, I don’t really go online to look for health information, perhaps women would do so more than men. I know that my girlfriend does that quite often. The other time she had swollen feet and she thought she might have heart problems. I don’t know how she linked swollen feet to heart problems but she was giving me possible reasons for that after she had been searching online. For me even if I have money to buy mobile data I use the data to look for something else more interesting but not anything to do with health. I do however value a man who is concerned about health because these days there are a lot of health issues – cancer AIDS etc.” (Interview with David).

From the perspective of social identity theory and health awareness, Harwood and Sparks argued that when a social group is associated with a certain illness (e.g. the association between lung cancer and smoking), smokers tend to be more predisposed towards health seeking in the same vein as women will be more predisposed to regular pap smears (Harwood & Sparks 2003: 150). Basically, their argument was that when one belongs to a social group that is prone to certain ailments, they are more likely to become self-conscious of their proneness to that ailment and thus actively practice

health seeking. In this study, the belief that women are prone to diseases produced stereotypes that associate women as active health seekers than men.

The argument is that women have generally been more inclined to search for more information, including information about food, diet child bearing and beauty. One participant argued that he knows a lot of women who are actually subscribed on social media pages, for example Facebook; where groups share views on information related to food, breast cancer, cervical cancer and child bearing:

“Women are more into health issues than men because from the experience that I have with a female friend and the way she is afraid about things like breast cancer and cervical cancer because it is being talked about a lot these days. She tells me that she joined a Facebook page where through her mobile phone; she regularly reads comments and discussions on Facebook when she has some free time at in her residence on campus. My sister also joined the page because this friend of mine is also my sister’s friend. It started one day when my friend received a ribbon from some people as we were walking in town together. These people were campaigning and raising public awareness on breast cancer. But again, the fact that women carry children makes them vulnerable generally so that they tend to be health conscious (Interview transcript).

In addition, it also became apparent in the individual discussions that male students’ strategic justification for lack of interest in using media for health-related issues is captured in audience research’s debates about how media preferences are gendered (Fiske 1991). The dominant view is that men prefer watching sport and hard news as contrasted to women’s preferences for ‘softer’ beats of cultural products such as soap operas, drama and health and beauty (see Ang 1991; Morley 1992; Fiske 2002; Radway 1991). One male student argues:

“I normally go online using my mobile phone just to be updated on political issues, like the influence of politics on the economy. I am not really interested in politics though, but the idea is just to know what is happening, and what the impact of Zimbabwean politics is on the economy. And also I just get online to know more about what is happening elsewhere or even in our country. For

example, I have been seeing news about the abduction of school girls in Nigeria<sup>18</sup>, it's important for me to just know what is happening in those areas" (Interview transcript with Eddy).

Another young man argues from this hegemonic masculinity position by arguing that it is a "biological fact" that women are more prone to diseases than men:

"Women are interested in health issues more than men, even though men may also be interested in such issues. I think the ratio is more women than men. I think this is because biologically women are more prone to be affected by diseases. In addition, as mothers, and the fact that they live with children who are also prone to diseases, women would naturally be expected to check more for health information. It's not a father's burden especially in our society. It is the role of a woman; it's expected of a woman to do that" (Interview transcript).

However, upon further probing during in-depth interview discussions, some male students admitted that going online to look for health information is actually also prevalent among young men. The interview transcript below is from a participant who had earlier refuted associating himself with using the mobile phone to look up for health information. As he argues:

"Honestly, I do look for health information online too. And I know a lot of guys who do that. We guys are scared of STIs, and I have searched for such information myself. These days it's even worse with prostate cancer and this concerns men. I hear that it is getting worse these days, and even though it's common in older man, I get so worried about the food that we eat and whether this will not affect me also when I become old later. I don't know whether it can be caused by food also but you never know. For me these days when I see or hear that so and so has cancer, usually someone who is close to me or to the family, I get so worried. So I tell myself that let me start looking for information about how these things work. The idea is that if there is anything that I need to know as a preventive measure I go online using my mobile phone to look around for such information when i am relaxed at home. It's more convenient, easy and private

---

<sup>18</sup> This reference relates to the abductions of more than 200 school children in Nigeria in 2014.

using my mobile phone. At least you get somewhere to start from and then move on towards getting professional help from the doctor (Interview with David).

I had a repeat interview with Eddy, who had also earlier highly attributed online health-seeking to women. This is what Eddy had to say:

“One day I was discussing with my friends about what was coming out in the papers. It was the growing concern about STIs in universities and colleges. We all wanted to know how these things work and if they can be cured etc. And we were debating about the names of STIs and how they show signs. One friend told us that we did not need to go far. Everything is there on Google. We both agreed that it was true, but we were watching intervarsity games at the sports field and none of us had a laptop. I remember taking out my mobile phone and we all gathered around it, browsing stuff on the net. We eventually agreed that one person was right....There are many STIs that we all didn't know and we got knowledge about how early treatment is necessary as well as their symptoms. We all laughed at how important the mobile phone is. After that, I found that my mobile phone is my friend and I use it many times when I need to know things I doubt, even on health issues that we are discussing right now. You can get soccer news even, news in general, just everything that you need to know about”. (Interview with Eddy).

As I probed further during repeat interviews, more young men began to open up, conceding that they actually do search online for health information also. Bryan, a final year Sociology student had this to say:

“It's difficult to go to the clinic when you have a funny sickness that you don't really know how to explain it. Yes you will eventually go (to see a doctor) but you start by looking for information around, asking from friends even. But for me asking friends was not an option because I did not want to raise the embarrassing issue. I sat the whole day in my campus residence using my mobile phone to look search for information online. I did not see how the weekend passed by since I really had to know. I got leads online and I eventually went to the local clinic. Surprisingly the nurse was very good because she did not laugh at me at all. One

of my friends does like going to these private clinic because one day he had a mole on his inner thigh and the nurses were asking him over the counter what his problem was because she wanted to write him a health card for him before seeing the nurse” (Bryn, Interview transcript).

Another male respondent argues that he plays rugby and so he is interested in general fitness and body shape:

“I use it to look for information related to the gym and general fitness. In am a rugby player, so I am concerned about Energy Drinks and their effect on your health since I play rugby. They say you are what you eat. For me it was quite a helpful experience. It is good when you have some background information and you need to look for more information to reinforce or disprove what you are not sure about. If you have previous misconceptions you will then be able to address them basing on what you would have read on the Internet.

As it appeared during interviews, it was more to do with the general feeling that getting worried about health was a more feminine quality, and so men would rather conceal it at any cost just to look ‘normal’, or like a ‘real man’. This is what Tendai had to say:

“I should admit that what I said during my previous discussion with you was not really true. I also go online with my phone to look for health information, but not many times. I am only afraid to be caught or else people will start suspecting a lot of stuff. For example, when I am at home my young younger brother can just pick up anyone’s phone and play games on it. What about if he goes to the browser and I left it open. Even my girlfriend, she could see it” (Tendai, Interview transcript).

From the above excerpts, it could be argued, at least to some extent, that male youth tend to downplay online health-seeking practices for various reasons. One reason is that the camouflage of using a personal mobile phone could motivate men to do so surreptitiously as online health seeking is outside the purview of public of the public gaze at a clinic. In addition, the fear of public ridicule at a public health institution drives away male youth from attending those facilities.

Of course, identity is constructed socially. In Butler's terms, identity is a descriptor enacted, reinforced and reproduced to the larger social spheres. He argues that gender descriptors are fundamentally shaped through discourse whilst in Goffman's terms identity involves repeatedly acting in the presence of a watching audience (1956). In relation to mobile phones and social media, the performativity aspect of identity involves young people's posting of their images on their phone profiles, body postures and general concerns with appearance and impression management. The media, and particularly social media (especially the mobile phones and online social networks such as Facebook, Twitter and others) are spaces where people manage their public identities. These issues also came out from research participants for this study.

During interview discussions, it was clear that young people are concerned about their health identities, including sexual health identities. They argued that it was important to make public impressions, something akin to Goffman's sense of front stage and back stage appearance management (1956). As a result, they were concerned about their body shapes and the food that they consumed as influencing their physical appearances. The argument was that one's impressions or appearance is important in terms of peer group interaction, interpersonal relationships, emotional life, sexual identity and presentation of self (Castells 2007; Ito 2005).

As one female student argues, accessing information related to food and diet was important in building her identity and taking control of her life. She argues that as a young woman, this is particularly important for her public image and impressions:

“Yah I use the mobile phone to search online for health information. This is because I realise that issues to do with my appearances affect my self-esteem and the way I am viewed and treated by others. If I feel that my body is overweight, this will weigh me down and impact on my confidence. But if I feel that my weight is ok, and that I am good as I am, it helps me to live confidently and positively. So I always keep in check because I do not want to have such things affecting my confidence” (Interview with Daphne).

On one of my other meeting with her, she argued that she is now aware of the dangers of not watching what one eats:

“Recently I was talking to my friend who stays in residence. She was just talking about the meat that they eat from the canteen. They eat meat twice a day and I was Googling<sup>19</sup> (sic) that on my phone and I realised that it’s not worth it so right now I haven’t been eating meat. I have reduced taking beef. In fact, whether it is beef or chicken as long as it has a meat substance, it is not good for my health. I may not see the effects now but eventually those things will catch up and that is why I am mostly concerned with diet. So I managed to deal with that issue” (Daphne, Interview transcript).

The transcripts above show that both the interview respondents are critically conscious of health-related issues, and that they use their mobile Internet to expand their knowledge repertoires about the dangers of consuming lot of meat. The respondent shows how she actively creates her sexual health identity by being consciously aware of her body shape by checking her food intake. After searching through her mobile phone, she is consciously aware that too much meat products are not good for her health. The mobile phone is used for purposes of identity and impression management practices by young people as they seek to model their preferred identities. Again, the digital media technologies are shown as expanding youth’s agency to manage their everyday lives, and often giving them tools with which to creatively deal with the limiting influence of structure on agency.

Another young female student was also of the view that one’s appearances are important in terms of acceptance among peers. She says that her circle of friends is particular about such things as appearance, so much that they are very critical about dressing and food. She argues:

“I happen to have a very nosy bunch of friends. They can even police your dressing. After the vacation in December, I had put on some weight and they were all over me, telling me how I looked old like a ‘mother of two’. I didn’t like it and so there was a lot of pressure. But you know losing weight is not easy. I have been seeing the Herbex advert on television about losing weight, but I was

---

<sup>19</sup> During individual discussions, the notion of “googling” appeared frequently in respondents’ answer. Basically, googling is the process of searching online using the Google search engine. Google is one of the common search engines in Zimbabwe and it is taken for granted that searching for information should be called ‘googling’

also worried that these may just be quick fix solutions that have side effects. I have been using my mobile phone to Google so that I can see the side effects of using such remedies. Sometimes the information is confusing, but I chose to do nothing about it. I will be okay soon especially with school work pressure (interview with Tari)

Another female student informant argues strongly that she gets surprised by other women who do not watch their weight. She argues that she wouldn't want to gain too much weight as people will think that she is old:

“Yaa I do I always tell my friends whatever new things that I discover on the Internet. I go and tell them, you guys there is this that can help you lose weight ... that can help you keep in shape blah blah blah stuff like that. Yaa though I think its subjective because there are some people who realise that they are too fat and they do not like it and still they do nothing about it. Some like me would make that extra initiative to find out how I can reduce such negative effects so that I can go back to that body shape that I want. Very few people would do that. Some would just stay in that shape whether it's good or not (interview with Elizabeth).

From the above interview excerpts, it is clear that whilst respondents tended to align themselves in what I called “hegemonic positions” which tend to naturalise disease and illness as associated with women and to portray men as not, what was interesting was that respondents (as will further be shown in subsequent sections below) expressed some level of confidence about certain health conditions after visiting online resources. Respondents argued that they often felt more confident and less worried about some health conditions that had been a source of immense worry for them, but which they often were not able to solve as a result of a number of constraints such as lack of money, time and resources to consult a doctor (see section above in: *Technology and the everyday: some observations*).

The section has also demonstrated that mobile media technology is implicated in health-related identities. For example, whilst women are more open about how they partly build their health-related identities about being a young woman, or about

growing up, men tended to downplay the role play every day technological practices such as online search for information. Overall, it later came out clear that both young men and young women construct their sexual identities through their online practices. Young men actively fashion their health and sexual identities through the type of music stored in their mobile phones, their membership to online groups for academic discussions, the type of mobile phone they own as well as how they also searched online for information related to STIs and food.

Whilst respondent's perspectives tended to be hegemonic, it was clear that young people actively represent the type of identity they prefer and how they would like to be viewed as young man or young woman. For example, the use of online resources to access information on how to maintain an acceptable body shape among peers among young women, or young men's chime with the Butlerian performativity (of identity) which involves repetition or citation of gender norms, which unfolds under conditions of cultural constraint about being a man (Brickell 2005) are all indicative of how youth manage their sexual identities.

However, whilst digital media technologies have revolutionised the information and communication technology sector by allowing rapid connectivity and increased information flows, they have also raised critical questions about their "social impact"; particularly on contemporary youth. For example, there has been moral panic concerns raised around the nature of content that young people (particularly young girls) are exposed to through the Internet (Eden & Hargittai 2010; Uski & Airi 2014; Marwick 2011), issues of online bullying as well as the isolating and psychological impact of social media addiction, among other such negative outcomes of technology.

In addition, and in relation to this study, some critical scholars have also warned against celebrations of technological affordances as empowering women, choosing rather to posit that the potential offered by digital technologies proverbially re-inscribe and reproduce unequal gender balances that characterise the capitalist world (Golding 2000; Harding 1986). Their argument also feeds into more critical debates around the politics of the production of online content and related issues of cultural imperialism (Golding 2000; Hall 1992; Morley & Robins 1992) and how production practices re-produce dominant (mainly Western) ideologies.

On the other hand, others choose to assume moderate position, arguing that the impact of communication technologies in the developing world can only be understood within a web of contingences, and that neither a naive celebration of ICT potential nor condemnation as a new digital colonialism adequately captures the situation in Africa because even well-intentioned initiatives to prop up female representation on the cyber-world can be seen as somehow compromised by capitalist motives in search for new markets (Robins 2002).

The debates summarised above have been central to critical scholarly concerns around the social and cultural impact of media technology and the discourses it mediates. For this study, these issues also took a centre stage given the study's interest in understanding whether the mobile phone disrupts socio-cultural relations; particularly generational power, the state's hegemonic dominance in the media as well as the entrenched patriarchal relations that characterise Zimbabwe's social fabric (Tinarwo & Pasura 2014; O'Brien & Broom 2013).

Empirical data from interviews pointed to the view that youth are not passive and uncritical consumers of online information. Interview respondents acknowledged both the negative and positive aspects attributable to the consumption of online content, whilst maintaining the fact that they are active agents who are aware of these. For example, a young woman had this to say:

“But also, I wouldn't trust the Internet that much anyway. Yes, I search for information on the Internet but sometimes the information that is on the Internet may not be accurate or correct. But I still go online to look up for this information because most of the times it is just to get to know something that I am not clear about. If it is an emergency, I wouldn't go online, it's obvious I will visit a doctor (interview with Kuda)”

Another participant argued that she is careful to look up for referenced and reviewed information online:

“In fact I do not always trust information from the Internet all the times. What I usually do is that when I search for school stuff or health information I type my question then I write PDF. I will be looking for something that was reviewed or

recommended. I do not just bump into information and say this is from the Internet so it is true. I don't do that" (interview with Rumbi).

Another male respondent argues that he is careful of the people that he associates with online, especially on Facebook:

"The online world has its disadvantages. It depends with the type of people that you get connected with online; for example on Facebook, or the content that you read. That is where the trick is. But most people already know this, and I do not accept anyone's friendship request if I do not know them" (interview with Allen).

Yet another young female respondent agrees that whilst the online world can be dangerous, this has mostly to do with the type of people and content that one chooses to consume:

"What makes the Internet dangerous is the type of people that you socialise with. Like if you go on Facebook and you join with types of friends who are into drugs, who are into stuff that is illegal, obvious the information they will be sharing is not good you know. So I only socialise with people that I know and those that I trust" (interview with Anita).

As can be seen from these interview transcripts, it was clear that the interviewed youth are not necessarily cultural dupes who do not have agency. They acknowledged that the online world can be dangerous, and is home to information that is not always good. They actively choose the friends that they socialise with.

More interesting were responses by many participants was that whilst they looked for information online, they did not really do anything much with the information. For them, the information search served to give them initial ideas about what would be going on in their bodies or that they searched for such information out of sheer curiosity. Thus, most respondents argued that they really wanted to know, and for this study, such curiosity is linked to the theme of self-autonomy and agency espoused by both the Cultural Studies and the domestication theories. As was already highlighted in interview excerpts in sections above, as well as in the present section, the desire to access online health information was specifically for purposes of getting more

knowledgeable over and above general clinical diagnosis and prescription of drugs. One female respondent; Susan had this to say:

“Well, I didn’t do anything about it (information about cyst that she accessed online). I just got the knowledge about what causes it and other important stuff about the condition. I didn’t really seek do anything after that. But it was important that I know what was really happening in my body, it makes you feel like you are on top of the situation. You also need to know if there is any precautionary measures that you need to take to prevent further complications. These days sometimes people die because of lack of knowledge when what they are suffering from is not really that much of a complicated disease (interview with Susan)”.

Youths’ agency was also shown as respondents argued that they sometimes encountered contradicting answers from multiple sources online, but were often able to sift through what is good for them:

“I just googled up the search words and answers came up even though they are often so many. Yes there was a lot. Sometimes it’s a lot that you get confused, especially when there appear to be contradicting answers. But in my case, I felt more confident with the answers because there were a lot of questions that people were asking on the website and most of the answers were almost the same so I kind of got my own answer in the end” (Interview with Rumbi).

Another respondent had this to say:

“Well, I read just about everything that came up. It was difficult though. I think I read about six pages and finally they were repeating the same stuff. So I felt like I was not going to get anything new because the answers were beginning to repeat the same stuff” (interview with Tatenda).

Thus, from this study, it was clear that the domestication of a given technology - and in this case mobile phones and mobile Internet - is not only for the intended purpose originally conceived by its designer, but it is also a matter of function and need arising out of particular contexts (Auter 2007; Katz & Aakhus 2002; Silverstone & Haddon

1996: 46). Motivated by purely pragmatic reasons, both young women and young men turn rationally to ICTs for their functional use to solve very pragmatic everyday problems.

As seminal research in Cultural Studies demonstrate, there are many instances in which media users (particularly women and soap operas) appropriates the meaning of material for their own purposes, which might include inflecting patriarchal meanings of the capitalist worldview (see Morley 1992; Fiske 1987; Ang 1985). This is also captured in Hall's (1980) ideas about negotiated readings of cultural texts, or as demonstrated in the domestication theory's *conversion* stage of technology appropriation where meanings from the wider public sphere are converted to suit local meanings and needs.

Whilst both theories and evidence from field work data argue for and demonstrate high levels of user agency, it is arguable that the mobile phone's instantaneous connectivity allows for the intrusion of voices from the larger public sphere to insert themselves into a community's consciousness and world views potentially disrupts existing local norms and world views. With the intrusion of micro discourses into local ontologies and world views, there is more with which to compare and question existing local beliefs and practices, leading to what the study views as the disruptive effects of the mobile phone. The idea of the mobile phone as a disruptive technology is dealt with in more details further in Chapter 7.

#### **5.4 In the safety of the home: mobile online health search practices**

Most interview respondents use their mobile phones to search for health information online within domestic spaces and in campus residences, outside the purview of the public eye. In domestication of technology literature, the bedroom represents an important space for youth exploration, experimentation and play (Miller 2009; Bloustein 2003; Bovill & Livingstone 2001). In the same vein, campus residence, with its privacy and complete with bedroom furniture, simulates a domestic unit, even though housing a single occupant.

Elsewhere in the United States of America, current work on girls' identity development also shows the salience of bedrooms in girls' lives, where girls use their bedrooms to express and develop a sense of who they are through the organization and decoration of

walls and surfaces (Horst 2009; Clarke 2008; Kearney 2006; Mazzarella 2005; McRobbie & Garber 2000). Even though I could not have access to girls' campus rooms of residence on campus, most of the girls interviewed argued that they often find the comfort of the campus residence ideal for exploring on a number of health related issues online. The bedroom and the campus residence are seen as providing temporary protection from the public gaze, hence their popularity as sights for self-exploration.

Even though the growth in portable ICTs, particularly the mobile phone, require scholars in the domestication of technology tradition to consider how this approach could be expanded to consider interactions with wider social networks outside the home (Haddon 2007, 2003, 2004), the centrality of the household remains important even in the age where technology has the affordance of 'mobility'. The notion of the moral economy of the household looks at how public meanings from wider social networks are mediated into the house and interact with meanings generated in the household by its members. As Silverstone and others put it, the moral economy "refers to the capacity of households to actively engage with the products and meanings of the public, formal, commodity and individual-based economy and to produce something of their own as a result of that engagement" (1992: 45-48).

From those meanings, the household (or in the case of this study, campus residence) is seen as a space where 'agency' is enhanced as occupants 'interact' or 'negotiate' with public meanings so as to make sense of the worldview. These issues will be raised further in chapter 6, where the study focuses on the notion of counter-hegemony, resistance and how mobile technologies are seen as "disruptive" of social and generational power and local ontologies.

The Cultural Studies approach also uses the notion of 'negotiated readings' (see Hall 1980) to explain how the interpretation of meanings is never in the dominant (ideological) sense, but that members of the public are able to negotiate (and inflect) meanings in their own terms. Whilst the domestic space and the family setting provide initial socialising institutions, they are, according to this study's findings, a space where youths question, experiment and explore new identity paths that may sometimes confront long standing traditions and beliefs.

As one respondent argues, health issues are ‘sensitive issues’. For her, her room in campus residence, or the domestic space at home is removed from public view (and possible public censure) where normative conduct and social norms are expected. It is a space where self-autonomy and agency is easily exercised:

“With such sensitive issues (such as health information), I prefer doing that (searching online) whilst I am in my room on campus. I can ‘bury’ (sic) myself in all that stuff and read as much stuff that I have questions about. I get a lot of information that I need because there is so much stuff online. Even with Facebook, I get to see what other guys are doing, what clothes they are wearing who they are dating etc.” (Interview with Emma, 7 May 2014).

As can be seen from this excerpt, the domestic setting is not only a space for the development of some sense of identity, but also a space where youth get to know more about the world outside their bedroom walls (through interacting with virtual information from the outside world). The larger social sphere is a world that also shapes young people’s identities, including health and sexual identities and ideas about growing up. It gives these students a view of the world through the ‘window’ of technology (symbolically, but physically shielded from their reach through the constrictions of domestic work).

Another student agrees, stating that he finds the bedroom (as she commutes to campus from home) as a safe space to explore a lot of issues related to health. The respondent argues that he has access even to issues that would normally be considered taboo in conservative societies such as Zimbabwe:

“It’s because I like doing these things (searching online for health information) whilst I am at home. I mostly do this from my bedroom because it is where I feel comfortable in my privacy and I can learn a lot of things about myself other than searching for such stuff in public or at college. There are so many distractions from friends etc. Even though we don’t have wifi at home, I can purchase data for my mobile phone with which I can access the Internet. At home I can close myself in my bedroom, especially during sleeping time. No one knows what I will be doing there. Even health-related things that my parents would not talk to

me about, they are easy to find. I think it's a phase of growing up. There are a lot of things that you have questions about, and you don't normally get to trust everyone to talk to you about. You sought of figure out on your own, and life goes on" (Interview with Andrew).

Another student states that at least the fact that she now has her own room on campus means that she is "finally free". She argues that because her family has been living in rented quarters, they didn't have enough rooms for everyone. Unsurprisingly for her, when visitors came, the bedroom she used to share with her older sister would be given away to visitors and they would have to content with sleeping in the kitchen corner. Angie argues:

"I used to live at my aunt's place and I shared a room with my cousin. There are health issues that I would not talk to her about, even my aunty because I was afraid of her. I wish I had known Internet back then but I was young. I could have been able to find answers to my problems. Now I have my own room on campus. So sometimes people like me are not good at talking face to face about health issues. This is what I did myself, I was not open that much to talk such things with them. A lot of girls hide such things because they cannot disclose certain information especially private information to everyone. So I think with your phone there is nothing to be afraid of. It gives you privacy and that is what people need; privacy. For example if I wanted information on say sexual reproductive health but I can't face someone I can go online and research on anything that I want. So I think I somehow it helped me quite a lot" (Rumbi, Interview transcript).

Another young female student had this to say:

"After supper, I close myself up in my bedroom at home, play my music and chat with my friends. I have joined some Facebook pages, especially those that have cancer information. This page has stuff on alternative medicine that can help cure cancer. I don't really know if these things work but I really check and compare a lot of information from elsewhere. My concern is that I lost my mother to cancer and so it means that the disease is in the family. What if I am the next victim? It's

sad but I really want to know more about how to prevent cancer and these days they are talking about the food that we eat and stuff like that. Lucky we don't have GMOs in the country. There are a lot of debates on the Internet about these GMO foods" (Emma, Interview transcript).

From the above interview transcript, the symbolic escape into the virtual sphere under the shield of the bedroom is an important theoretical contribution to domestication literature of mobile phones and health communication in Zimbabwe. It brings to light issues about how social norms and ideas of decency are built in the uses of mobile technology in conservative societies such as Zimbabwe, but also ideas about how social control systems have powerful implications on self-autonomy and personal growth.

In the transcripts above, reference to "stuff that you don't normally get to trust everyone to talk to you about ... You sought of figure out on your own" makes the temporal virtual escape not only a space for learning and identity development, but also a space where social power and generational control are contested, resisted and possibly weakened. Figuring stuff "on your own" and getting accessing information that one doesn't normally get to talk about are all in themselves indicative of youth sub-cultural practices which involves getting knowledge around knowledge considered taboo for people of their age. In some way, it shows resistive and subversive elements to rigid and enduring social norms and generational control systems. Elsewhere, literature has argued that in Africa, the mobile phone potentially "disrupts" social power (Sanya 2014) and that it largely represents part of the growing attempts for "empowering" women and young people more generally.

The idea of social disruption is particularly important in this study as it amplifies the domestication theory's ideas of social "agency", and Cultural Studies' notions of everyday "resistive" practices of youth sub-cultures. Thus, whilst with traditional media it is possible to control content through regulation and censorship of content, or (at a household level) determine the content that young householders can consume (mostly on moral grounds), this is hard in the digital era. Digital media technologies can therefore be seen as disrupting and breaking such boundaries as people have access to media content of their choice, and outside the purview of authority and surveillance. As

one respondent argued above, no one really knows what she will be doing and reading from behind the closed walls of her bedroom.

Through its encyclopaedic function, especially as it relates to everyday ordinary health information search as shown in this study, the Internet is potentially a source of important information. It thus acts as disruptive to social and generational power in conservative societies where important public knowledge may not be accessible to the sections of society, especially among youths, who need most.

This is particularly important in the Zimbabwean context as highlighted in Chapter 1, where recent studies found that in Zimbabwe adolescents lack access to essential reproductive health information and services (Remez et al. 2014). The report also showed that fewer than half of all 15–19-year-olds have comprehensive knowledge about HIV and AIDS, and one-third of all births to adolescents are unplanned (Remez et al. 2014). The interview transcripts above thus demonstrate that mobile phones and mobile Internet can thus be seen as opening up more spaces for youth to learn more about issues about growing up, sexuality and adolescents that a conservative society such as Zimbabwe traditionally consider as inappropriate for youth consumption. Yet the inaccessibility of such information to young people often result in them “finding out on our own” and often making costly mistakes that impact on their health.

## **5.5 Conclusion**

Through the observational transcript in the first section of this chapter, the study was able to establish a typical day technology assemblage and mobile use practices of youth in Zimbabwe. In surprising ways, this transcript was able to reveal how identity formation takes place in the most unobtrusive everyday routines such as mobile phone ring tone, listening to music and particularly, the selection of music that youth consume.

Through this observational transcript, much of the initial themes that came out ‘spoke’ with resonance to the conceptual and theoretic focus informing this study. For instance, through the Cultural Studies approach, the notions of ‘subaltern resistive cultures’, ‘counter-hegemony’ and seminal theories of identity had clear resonance with the way

young people appropriate dancehall music and fashion their mobile ring tones as cultural practices that are resistive to authority.

In addition, the particular selection of dancehall music together with later discussions during which youth argued that they used their mobile phones to access information which their parents “would not talk [to me] about... things that you have questions about” had clear resonance with the notion of individual agency that is central to the domestication of technology theory. Mobile phone enhance youth’s agency to get round the conservative cultural limitations that curtail self-formation and self-growth because certain subjects are viewed as beyond the bounds of normative conduct.

The observational transcript therefore provided some critical reflexive thoughts and insights that would later become amplified through verbal interaction with research participants. It also provided a nuanced conceptual connection with the main theories used to investigate youth’s experiences with the mobile phone and how these experiences link to (the transgression of) social power in the wider Zimbabwean society.

Overall, the chapter was able to answer the first two research questions: a) How do online health-seeking practices differ across gender? b) How do online health-seeking practices contribute to health-related identity formation? The first question was mainly answered through the survey questionnaire, through which the study established that the use of mobile phones and mobile Internet by youth to seek out for health information is more common among young women. In addition, the popular opinion was that the social group that benefit most from online health information are young women, compared to their male counterparts.

However, this finding was later contradicted when upon further probing, young men in began to open up in relation to how they fashion their health and sexual –related identities, arguing that they indeed use their mobile phones to access health information online. It can be argued therefore, that there was a desire by young men to hold on to, and bolster hegemonic expectations about being a man and its perceived ideas about health seeking. The influence of patriarchal hegemony persists, albeit (as will be shown in the next chapter and its conceptualisation of the mobile phone as ‘disruptive of social

order) evidence of increasing compromises and the evidence that young men and women increasingly find common ground. Therefore, the mobile phone, in addition to other formal structures such as legislation and education, increasingly disrupt the traditional social order in Zimbabwe where traditional social authority and knowledge systems are under threat from emerging identities and cultural practices enabled by mobile technologies.

But however, the factors informing online health seeking practices are basically the same between young men and young women. It is precisely for the following reasons: First, it is for reasons of identity formation and peer acceptance. For both young men and young women, online health searches involved the desire to gratify identity related gratifications such as concerns with maintaining an 'acceptable' body shape in relation to their peer expectations or as a way to conform to the expectations and conventions of a sporting body.

Second, youth engage in online health seeking practices as convenient and strategic practices to circumvent the limitations of poverty and an expensive health care system or the general curiosity associated with growing up. Respondents argued that the mobile phone and mobile Internet provide cheaper and convenient means to accessing basic health-related knowledge (before visiting a doctor) and with which it is possible to strategically deal with immediate pressing problems. Third, it is for purposes of constructing health-related identities and fashioning such identities in relation to the wider social expectations about growing up and the desire for young people to wean themselves from parental authority and advice from aunties. As Paterson asserted, young people have two developmental needs: one, to create their own self-identity or individuation away from parents (i.e. through friendship/peer connectedness); and two, the fundamental need to communicate and to be connected with peers (J-F 2014; Peterson 2010). The mobile phone and the mobile Internet are seen as playing an expansionary role of enabling young agency in their attempts to assert their own sexual and health-related identities.

## CHAPTER 6

### MOBILE TECHNOLOGY, IDENTITY AND 'DISRUPTION' OF SOCIAL POWER

#### 6 Introduction

This chapter answers the third research question: How does the use of digital media technologies help young people (if ever it does) to transgress socio-cultural borders and social hierarchies of power? Using the metaphor of 'disruption', the chapter demonstrates how the mobile phone and mobile Internet allow youth to forge new and desired identities (i.e. a form of postmodern identity which is 'open, contradictory, unfinished, fragmented' (Hall 1992: 291)) to disrupt and resist entrenched socially constructed belief systems and practices that assign and sustains asymmetrical generational and gender role power.

In this chapter, the study begins by demonstrating where in traditional Zimbabwe, asymmetrical power relations are bred and exercised, and later demonstrates how digital technologies open up alternative worldviews and identities that help young people to disrupt and question generational and gender social power. In a context where the media environment is constricted (see Chapter 2), and where the strictures of social control are increasingly being questioned, youth use digital media technologies for self-expression and identity formation in ways that are constitutive of counter-hegemonic and subversive to the survival and sustenance of such hegemonic practices.

Mobile technologies afford social agency, opens up alternative world views through the variety of information accessible online and youth are seen as using this information to question embedded norms and beliefs systems and social hierarchies of power. But how does the use of digital media technologies come into play in these processes?

Through interview excerpts from the field, the chapter attempts to empirically answer this question. But first, this chapter begins by illustrating how social hierarchies of power are built and maintained through practices and social norms. In the section that follows, the chapter illustrates how these social structures and belief systems are

challenged, questioned and how female youths see themselves to be in a better position to question and negotiate with social power.

### **6.1 Struggle for autonomy: politics of the moral economy, surveillance and control**

Research on technology and gender celebrate the technological affordances of “individual autonomy”, “independence”, “connectivity” and “freedom” as gratifications that potentially empower users, particularly youths (Cumiskey & Brewster 2012; Gregg 2011). The argument is that armed with the mobile phone, and particularly the Internet, young women are able to expand their social networks, and thus are able to participate in wider social activities beyond the domestic confines. Therefore, ‘connecting women’ is seen as a vehicle for increased access to social capital (Pillsbury & Mayer 2005).

However, as will be show in this section, despite the positive attributes of social capital, connectivity and personalised experience afforded by the mobile phone, the mobile phone sometimes is a source of conflict in the home, particularly between married partners, or in the case of this study, between unmarried partners even. It is also a space where generational and patriarchal authority is exercised (even though, as the next section will show, this social power is not immutable). In Zimbabwe, as indeed literature elsewhere in Africa (see Archambault 2011), the mobile phone has in some instances created an enabling environment for elicit relationships, often resulting in men exercising authority over their wives and girlfriends by constant surveillance of their wives’ social networks.

As a result, privacy becomes a contested arena, with women being forced to show their subservience to their partners by allowing them access to their mobile phones. Therefore, the idea of self-autonomy or agency becomes curtailed by such practices, and this is more pronounced when it relates to the privacy of personal issues such as health-related matters.

This section therefore specifically highlights how patriarchal and generation authority works in Zimbabwe, with emphasis on the theoretical lenses of the “moral economy” (Silverstone et al. 1992). However, in the section that follows, the study demonstrates how generational and patriarchal control is resisted by both young people and women.

The study will thus draw data from individual in-depth discussions to demonstrate that youth and women are not hapless and passive ‘victims’ in the moral economy of the household per se, but rather deploy a range of strategies to counter social control and domination. Before moving into this section, the present section begins by illustrating the sites where power is traditionally exercised and legitimated through traditional norms and practices.

To begin with, some questions in the survey questionnaire sought to understand differences between young men and young women respondents’ perception about their confidence in the privacy of their mobile phones and related contents without possibilities for intrusion by anyone. The results showed that young women compared to young men are less confident that their mobile phones are private and should only be accessed by themselves. This could be attributed to the fact that men generally expect to have unhindered access to their girlfriends’ mobile phones whereas the reverse may not be expected to be so.

Table 8. Mobile phone privacy

		Extent of mobile phone privacy				
		To a larger extent	To large extent	To a lesser extent	Not at all	Total
Male	Count	70	41	61	20	192
	% of Total	18.2%	10.7%	15.9%	5.2%	50.0%
Female	Count	48	41	77	26	192
	% of Total	12.5%	10.7%	20.1%	6.8%	50.0%
Total	Count	118	82	138	46	384
	% of Total	30.7%	21.4%	35.9%	12.0%	100.0%

Through the survey questionnaire, the study also tested whether or not people are comfortable to share their mobile phone with friends or close family members. Here, ‘sharing’ was conceived of in the most general sense of entrusting anyone with one’s mobile phone whilst not present. The aim was to understand whether young people are comfortable with sharing their mobile phones with other people, including access to personal information saved on their phones (for example, photos, messages, web page

browsed, music, contacts etc). The majority of respondents; that is, 24.2% of young men and 25.3% of young women stated that they would prefer not to share their mobile phone (including content and images saved) with anyone.

Table 9. Phone sharing

		Phone sharing							Total
		No one	Friend/s	Boy friend	Girl friend	Spouse	My children	Other	
Male	Count	93	43	0	29	20	6	1	192
	% of Total	24.2%	11.2%	.0%	7.6%	5.2%	1.6%	.3%	50.0%
Female	Count	97	35	16	1	35	3	5	192
	% of Total	25.3%	9.1%	4.2%	.3%	9.1%	.8%	1.3%	50.0%
Total	Count	190	78	16	30	55	9	6	384
	% of Total	49.5%	20.3%	4.2%	7.8%	14.3%	2.3%	1.6%	100.0%

The personalised experience and mobility affordances provided by the mobile phone means that it satisfies the attributes for self-autonomy and individual agency. However, in Zimbabwe, where familial ties are strong, and where patriarchal values and norms usurp a lot of power from women, the relationship between women and men remain asymmetrical. Drawing on the work of Thomson (1971; 1991), the notion of moral economy had popular use in studies exploring how traditional societies are bound together by ‘obligatory’ relations, which are reinforced through sharing and reciprocity (Peterson & Taylor 2003). These relations are tied by familial obligations (Peterson & Taylor 2006). For this study, the researcher adds, this reciprocity is bound in power and authority. This is acknowledged in literature elsewhere where parents use the mobile technology as a way for surveillance of their children to keep them away from mischief, but also from possible danger (Ling (2004; Ito 2005).

During in-depth individual discussions, it came out that there are emotions laden with both the ownership and use of media technologies (Schofield-Clark 2014), and this does not apply to married couples only. Even young women in unmarried relationships are subject to patriarchal power through their boyfriends. Some married young women participants, or those in unmarried relationships, stated that whilst the mobile phone was handy in terms of maintaining constant connection with the outside world and

particularly with friends, family and relatives, the mobile phone can actually be a source of serious family squabbles and misunderstandings. Reasons attributed for these misunderstandings were purely jealousy and mistrust.

Grace, a 24 year old married young woman studying towards a BA at the University of Zimbabwe argued reveals that:

“Whilst I agree that the mobile phone is a great tool for securing my independence, it has its own disadvantages as well. But it’s mostly because people refuse to understand. My husband is very jealousy. Whenever he gets the opportunity, he goes through every contact in my mobile phone. I suspect in his mind he will be saying to himself “I will catch her today”. So when one day I caught him out browsing through my contacts, I laughed, I really laughed at him and he was embarrassed and ended up threatening me. But still he never stops doing that. But I always leave my phone anywhere in the house, I don’t hide it and so this should tell him that I have nothing to hide in my phone” (interview with Grace).

When probed further if she would consider her husband’s constant surveillance as a hindrance to searching for health-related information online using the same mobile phone, she argues that she “will never be safe to do that without his knowledge”. She argues that if she was to search online for health information using her mobile phone without first talking to her husband, and even if this applies to minor ailments, it would be suicidal because her husband would suspect that she is trying to hide some disease she contracted from her “lovers”. It thus brings to the fore how women’s identities and roles are undermined and how patriarchal subservience remains in force. In the transcript below, she argues that:

“I will never be safe to do that without his knowledge. I will need to consult him before doing something like that or else I will put my marriage in danger. He will think that I got some disease from my ‘lovers’ and that I am trying to hide that from him” (interview with Grace).

When asked if she thought her husband would also consult her if he had any health issues, she dismissed the idea saying:

“Forget it, men will never tell you such a thing. Men keep such things away from their wives until you discover it yourself. That is when they eventually open up to talk about such issues. It’s because they have too many secrets” (interview with Grace).

In agreement, Cindy; an unmarried young woman states that she has nothing to hide in her mobile phone but she is conscious of her husband’s watchful eye every time she leaves her phone unattended. When asked whether she is comfortable giving her mobile phone to someone else she states:

“No I won’t give it to anyone. Not that I have private stuff that I don’t want anyone to see. There is nothing that is funny saved on my phone. But I once saw my boyfriend peeping through my photos and contact list. I am sure he saw everything. When I saw him he was really embarrassed at first but he insisted that he has the right to check on my phone contacts. Who am I talking with, what photos do I have saved in my phone etc? Well, even though I don’t have anything to hide, I think this is one of the things that I really don’t like about him. What right does he have to search through my phone, anyway? What is it with men? My friend told me that she knows her boyfriend peeps through her phone so she makes sure she deletes all recently called numbers that might cause suspicion” (interview with Cindy).

The argument about the lack of women’s autonomy in decision making and cultural practices that limit women’s self-autonomy has been cited as the major drawback in the development of mobile health, particularly in Africa where patriarchal practices are prevalent, and where women are expected to show subservience to their husbands. Joseph, a 23 year old young man argued that his girlfriend loses her power over to him once they in a relationship. Joseph matter-of-factly stated that “these women need to be watched every time otherwise *unoiruza*” (lit. *otherwise you will be the loser*). He argues that:

“I personally think that a man has the responsibility to watch over his women. I will not be happy if my girlfriend does things her own ways. Her mobile phone

should never be hidden away from me unless she needs to hide something from me” (Interview with Joseph).

Eddy, a 24-year-old male student held similar views about his girlfriend. Whilst he admitted that he sees many girls in his neighbourhood, there is only one ‘genuine’ girlfriend whom he considers to be seriously in a relationship with.

“Why would you not have access to your girlfriend’s phone? If she is faithful to you she doesn’t need to think twice. These things start before you get married. You need to assert your authority as a man otherwise no one will respect you” (interview with Eddy).

Thus, whilst these quotations are indicative of the power dynamics at play with the integration of mobile technologies into individual youths’ everyday lives, they are reflective of the larger social and cultural belief systems that characterise patriarchal societies such as Zimbabwe. These power dynamics raises critical questions about the potential efficacy of digital technologies to transform women’s social position in the face of entrenched social norms.

In a paper examining the dilemmas faced by female Community Health Workers (CHWs) equipped with the mobile phones to assist rural midwives in rural Indonesian province of Aceh, Chib and Chen (2011) found that more often women were caught in the struggle between autonomy versus subordination, economic independence versus constrained earning capacity and the accumulation of social power versus hierarchical control.

For this study, the above transcripts also noted the dilemmas that pit women’s emancipation *vis a vis* social pressure to conform to authority. In traditional patriarchal society, women’s subservience and dependence is rewarded whilst independent is discouraged.

In addition, power struggles in the moral economy do not only relate to spousal relations, nor is it only about control over the appropriation of technologies in the house. In patriarchal societies such as Zimbabwe, the father commands authority over the use of media technologies in the house (for example, the television and the radio).

The paternalistic nature of patriarchal culture is not experienced and felt by members of the opposite sex, but also even by other 'younger' men. In a typical Zimbabwean household, the elderly male takes responsibility of deciding what to watch on television, whilst the younger male members have to content with such decisions. Elsewhere in the USA, in an ethnographic study of domestic leisure, Walker (2004; 1996) concluded that when heterosexual families with children watch television together, fathers dominate in program selection and in the use of the remote control device.

Sons are active as well, "using the remote control more than either their mothers or their sisters" (see also Green & Haddon 2009). However, control is not only exercised in relation to the use of media technologies, but rather in terms of ascribing rules that maintains stability and order in the house. As one respondent argues, the domestic setting remains an important site where power is exercised through parental authority:

"It depends again with one's family structure. The rules in the family. For example, my dad says that at 8pm we all sit at the table as a family and have dinner together. No one must be on the phone. But in some families, where the rules are not that tight, you see the mum is on the phone, the dad is on the phone, you and your siblings are on the phone... It breaks the family ties. Your family life is affected because you don't have time as a family. You are always on your phone. So again I think it depends with the family rules (interview with Rumbi).

In addition, whilst one of the mobile phone's most powerful attribute is its ability to offer personalised experience, as well as offer synchronised and unlimited access to distant connections, results from in-depth interviews showed that familial rules, norms and sensibilities take precedence over such independence. As argued above, the obligatory relations of household kinship reigns supreme over one's independent. One respondent argues:

"However, when I am at home with my family; that is my dad, mum, my siblings, and relatives we get so too busy with family activities. Most of the times I visit my mother's sister and there would be a lot of things to do at her house like helping out with cooking, washing etc. So at these times I am rarely on

WhatsApp. Because of this, some of my friends sometimes complain that during college vacations I am not contactable on my mobile application. But the thing is I will be occupied elsewhere with family” (Interview with Tari).

Another respondent agrees:

“So when my dad is there and there is an issue that he needs to discuss with the family he switches the TV off. We all sit and listen. Because of this, my mother often misses her favourite programme: *Muvhango* but she catches up the following morning when they show it again. Or she waits for Saturday when the repeat the whole week’s episodes” (interview with Ellen).

Therefore, whilst women may have the be finding the mobile phone opening up possibilities for their empowerment, these possibilities, at least for this study, remain in contradictory tensions of autonomy versus conformity to social hierarchy. However, as will be shown in the next section, the “contradictory tensions” represent sites for resistance and struggle over self-autonomy, and through the theoretical lenses of identity, this autonomy finds expression in changed gender role perceptions, sexual identities and the problematising of certain traditional practices by youth and women.

In the previous chapter, the study has explored and demonstrated how the moral economy of the household is gendered and fraught with power (Bakardjieva 2011; Berg 1999). To further explore these issues, a more critical exploration of a typical Zimbabwean household and its structures of power may be required. Empirical results from in-depth interviews revealed that the need to maintain established family relations supersedes the ‘self’, and therefore, the idea of self-autonomy cannot be conceived of without considering the power structures that define a particular family. That is, there are certain familial obligations (for example, a wife allowing her husband access to her mobile phone) which regulate the conduct of household members so much so that the affordances of the mobile phone as personal and private are renegotiated and boundaries re-drawn. This study argues that such familial obligations are fraught with power (Bakardjieva 2011; Berg 1999).

However, this does not mean that women are hapless “victims” of male power, or that Zimbabwean youth lack agency in the context of limited power and enduring poverty.

Despite the seeming enduring cultural and traditional practices, there are evident progressive changes in women's self-autonomy in Zimbabwe, and women are active agents in these changes. However, respondents argued that media technology should not be seen as the only driving force for women's emancipation. They play an expansionary role of opening up more possibilities, increased exposure to global cultural mores, increased consciousness about fair and equal opportunities alongside other formal structures advocating for women's empowerment such as legislation and education. In this regard, Alice had this to say:

“In addition, here at college, there are more women also in Civil Engineering unlike a long time ago. Even in workplace environments, women also work in same high positions with men. Even if you look at our parliament, there are more women. We have 60 seats for women in our parliament. Maybe in the next ten years things would have changed. Long back women did not go to work. They would just stay at home, bear children, look after them and do household chores. But now we all leave home together in the morning with men going to work” (interview with Alice).

Together with increased urbanisation, education and gender friendly policies, the conditions of women in Zimbabwe increasingly improve in most spheres of life and literature elsewhere argues that digital technologies form part of the growing conversations about women's changing self-identity and social autonomy where they can now give voice to their experiences, lived realities and identities (Sanya 2013).

## **6.2 Inflecting traditional authority, selective media consumption and emerging identities**

In the section above, the study has argued that the moral economy is fraught with power, where women are subordinate to men. However, during subsequent discussions with participants, it was evident that the moral economy is not entirely fraught with immutable male power as women and youth are able to negotiate their identities through counter-hegemonic strategies that involve constantly negotiating with distant 'voices' and values mediated into the local through digital media technologies such as the mobile phone and the mobile Internet. For this study, the invocation of the notion of

economies relates to how the household is involved in dialectical exchanges of ideas, values as well as the exchange of economic activities on the market of exchange of goods and services. It is therefore in constant interaction with the external world, with which resources it actively tapes into constructing its own autonomy.

Thus, to view the household as an 'economy' does not only end with the exchange of material goods such as media technologies and financial resources. Rather, and as this study demonstrates, it is also about considering the household as a local site for the exchange and negotiation with values, worldviews and identities – including health-related identities. It is a space where power is contested and where young people resist dominant ideologies and social control.

The domestication literature also argues that the moral economy is an “economy of exchange” (of ideas and values) specifically because whilst householders are recipients of discourses from the micro public sphere through the media and other social discourses, household members are also “active” participants in that they stand in a reciprocal relationship with this economy in which they are able to appropriate but also inflect meanings to suit their needs, and thus in the process shaping out and recalibrating their own identities and their sense of the world at large. Therefore, members of society arguably have agency. Thus, whilst householders' ideas about the world, as well as their place in it (that is; their identities) are mediated through the media, they refashion such discourses to suit their (individual) household needs and contexts.

Although identity management has been a staple discourse of scholars for decades (Rambe 2013; Goffman 1956; Butler 1996; Hartley 2002; Deuze 2006), research in Africa has not necessarily explored identity constructions that are mediated through social media such as mobile phones, particularly in the context of mobile health consumption in developing countries such as Zimbabwe. The use of mobile phones and mobile Internet for leaning purposes is becoming socially entrenched in Africa (Bosch 2009, Butgereit & Botha 2012; Rambe 2012) and for this study; its use in online health information search is becoming popular.

This section thus sought to understand how individuals are using mobile technology to negotiate their own identities in a moral economy where traditional norms impose supposedly ‘reciprocal’ but asymmetrical and hegemonic obligations based on generational and gender role power. In addition, the fact that traditional media (e.g. television, radio and newspapers) played a key role in health communication in Zimbabwe, but are less able to do so as these media tend to be crowded by political elites, the study sought to understand the role of mobile technology in this perceived transition to digital media, where consumers have more autonomy over access, consumption, and distribution of a variety of information including health-related information.

The study therefore explored young people’s relationship with the media in Zimbabwe, particularly broadcast media where the state enjoys hegemonic dominance, but also in a context where access to digital media technologies means that young people have more ‘agency’ in consuming the media of their choice and through which they also actualise their identities and self-formation.

Research participants argued that they actively shun the only television broadcaster (Zimbabwe Television – ZTV) because they do not relate with its ideologies. Asked about whether she likes watching local television, Anita had this to say:

“No I don’t watch local television. But my dad does, he likes watching local programmes. I personally don’t really see anything that is of my liking. Much of what you see on our television does not really concern me. If it is not politics, they are showing some old drama which I personally think must have been shown during the time our mothers and fathers grew up. There is nothing that attracts me to watch ZTV. If ever there are health-related programmes, I bet you I miss them because I am rarely on ZTV. At home we have access to DSTV which my brother in South Africa subscribes for us from that side. Because of that, I see a lot of foreign programmes and soaps. I find them more interesting” (interview with Anita).

Because the state has complete monopoly over television broadcast, and the fact that ZTV is has a public service mandate, most of its programming tend to be nationalist in

ethos, lack in diversity as there is limited production funding and as a result, most programmes tend to be repetitive. The ruling elite also patronise television content as a channel through which to purvey its propaganda (Mabweazara 2013; Mare 2013; Moyo 2010), and this alienates youth who identify less with such discourses. Because of the connectivity afforded by mobile phones and mobile Internet, most Zimbabweans can “see through” the ruling elite’s propaganda, and have developed means of subverting it by shunning state broadcast media. Literature argues that societies under repressive regimes – such as Zimbabwe - have always come up with alternative forms of communication as tools of subversion, and traditionally the most common forms have been underground newspapers and ‘pirate radio’ (Mabweazara 2013; Moyo 2010).

However, the advent of new communication technologies in recent years in Zimbabwe has brought new forms of alternative media with greater possibilities for transnational and even wider citizen participation and empowerment (Mare 2013; Moyo 2009, 2010). During in-depth interview discussions, youth argued that they actively shun away from consuming local media:

“No, I don’t watch ZTV. There is nothing interesting there. It repeats stuff. I only see it if I visit and I find that the people are watching it in their homes, which is also very rare. But personally I don’t really like it. My father likes it so I know that when he is at home I may watch it but I don’t really follow it. And now that we are discussing health issues, I do not remember seeing such stuff (health advocacy) on ZTV. Even if they showed health programmes, I obviously miss out” (interview with Shami).

The excerpts above show that young people feel disenchanted by local media, and as such, have developed mechanisms such as watching South African beamed DSTV to avoid watching local content. In Cultural Studies, the ability to selectively consume media represents sub-cultural tactics for resisting dominant ideologies (Buckingham 2008; Gelder & Thornton 2005), where users exercise their choices by selecting to consume what suits their particular needs.

This chimes with Hartley’s (2002) conceptualisation of digital identities, which he characterises as a bricolage (hybridity) as young people assimilate, repackage and

(re)construct new tastes from their consumption of foreign music and borrowed cultures, tastes and ways of constructing the world (see also Deuze 2006). As raised in the observational data in Chapter 6, the growth in Dancehall music in Zimbabwe is partly young people's disenchantment with dominant political discourses as well as attempts to foreground their voices in the midst of competing and powerful discourses such as political propaganda.

Particularly interesting in this study is the evidence that young people and young women negotiate these structural limitations and social control, and that they express their discontent and attempt to construct their preferred identities through digital media technologies and their affordances. It came out that in addition to accessing foreign television content through subscription television; young people use digital media such as mobile phones and mobile Internet to construct their own identities. They do this through a number of mobile phone practices such as downloading music that they feel correctly portray their identities, connect with and exchange videos, music and images with friends and family in the diaspora. A young woman with aspirations of becoming a model had this to say:

“I want to become a model, a beauty pageant. So I take pictures of myself. I have the Instangram application on my mobile phone so that I take photos and crop them and do whatever in need. Plus this is a tablet and it has a lot of storage memory so I can store as much photos as I want. I also share photos, or just keep them ‘just to feel myself when I look at myself’. I really want to become a model (interview with Rumbi).

When asked what else she uses her mobile phone and mobile Internet, she argues that she likes listening to music and reading about international celebrities, which the local television does not show:

“Sometimes when I am bored I just listen to music saved on my phone, reading online news where I get to see celebrity stuff like musicians, movie actors etc. I

can buy Opera<sup>20</sup> data bundles which are cheap just to go online using my phone the whole day. With our local ZTV, you don't find this type of news. Of course they show our local celebrities but I also have my international favourites" (interview with Tari).

Another female respondent agrees:

I use my phone for taking pictures. I take 'selfies', creating photo grid videos, chatting on WhatsApp, voice calling, music, downloading videos. If I have an assignment, my phone is the most helpful thing for me. I just buy Opera Mini bundles for a day or three days. I also have a number of applications, including those that crop and store photos. Sometimes when I am lonely, I like playing music. When I am walking a long distance, I put on my earphones and listen to music. I listen to music of my choice which I download on my phone" (interview with Rumbi).

In the context of health information search, the mobile phone was seen by most female respondents as providing a critical role in disbanding the patriarchal power and its enormous influence in the socialisation of women and the development of their health-related identities and sexuality. As raised in the introductory chapters, the traditional role of aunts and uncles was that of initiating young adults into adolescence and adulthood. However, whilst such practices played a critical role in educating young people about growing up, there were sentiments among interview respondents (particularly young women) that such practices may not necessarily serve their interests.

Abigail, a young woman who stays at her elder brother's home argues that she is self-autonomous and does not depend on her aunties to initiate her into adulthood and getting knowledge about her sexual identity:

"No. Not at all. These days aunties can sometimes actually be jealousy of you instead. They may not want to see you doing well in life, or get married for

---

<sup>20</sup> The largest mobile network provider; Econet Wireless, runs a promotion where it offers cheap data to access mobile Internet through the Opera Mini browser. This promotion is popular with youth as it offers affordable data services

example. They might give you biased advice when you ask for their help. Or sometimes aunts can even end up selling you out by telling people what you asked about, and even either misinterpret or deliberately lie to people about you. So these days it's actually good to search on your own to look for information either from peers, mothers or the Internet. These days young people use the Internet because there is now a gap between us and our aunts. The Internet teaches these days" (interview with Abigail).

Another young woman concurs, arguing that she shapes her own sexual health identity and that aunts might not be in a good position to know her wishes and ambitions because they share different world views. In addition, and in keeping with the idea of emerging identities, loosened social ties and authoritarian power, the mobile phone is seen as freeing up youth's subjective social experience as well as broadening out arenas for self-discovery and identity formation. This way, it can be argued that mobile technology in some ways loosens social control from traditional authority to an emerging "bottom-up" power predicated on free will and self-discovery. As one young woman argues:

"We learn a lot online these days. You see, you don't really have to feel obliged to explain every problem that you have to anyone. Aunts can be biased, and sometimes their interests can be questionable. Sometimes it is only you who knows what is in your best interest and you should follow that other than letting someone prescribe to you about growing up when in fact you are generations apart. Do aunts really know what your internal feelings and ambitions are? Sometimes it's good to find solutions on your own without asking from someone. So with Internet you don't really go through that bureaucracy of asking elders or even take a lot of time to get information. With Internet, you will get stuff very fast that you need, and you will find your way through" (interview with Anita).

In the interview quotes above, young women are seen as actively constructing their health and sexual identities outside parent authority and control. Their agency is also shown in the ways they question the power of extended family members in defining their identities, arguing that extended family members may have interests that might not necessarily be in agreement with their needs as self-autonomous individuals.

In the previous section, the study demonstrated how patriarchy operates through asymmetrical and obligatory relations of domination between woman and men. However, as indicated in this section, the permeation of social power in the moral economy is not immutable nor does it operate unchallenged. Thus, the view that moral obligations entail women losing control of and privacy over their mobile phones and decision-making took a new twist. Most of the young women argued that they are able to negotiate with patriarchy in more equal terms, and thus showing evidence that the modern youth has more voice to resist hegemonic patriarchy. In-depth interviews reviewed an on-going constellation of power relations which is characterised by constant negotiations, concessions and compromises. As one respondent argues:

“For me, some stuff in my mobile phone are private and I won’t let my boyfriend have access to everything just like that. This is my life. These days the phone is our lives, and it’s important that I maintain my privacy. We are different with people who grew up in the era before the Internet for example. We are much more informed.” (interview with Grace).

Another young woman had this to say:

“A mobile phone is private and people should respect that. If my boyfriend wants to know who I am talking to every time that I am on the mobile phone, I think that is controlling and I will not allow that. If he just wants to use my phone to call someone then its fine. I cannot have him going through my phone like a security search” (interview with Tendai).

Another young woman agrees:

“I personally will tell him it doesn’t work that way. Even if you bought it for me, don’t expect me to give you my phone to conduct a search of whatever imaginations you have whenever you like it. You bought that phone to help me and not to police me” (interview with Tari).

Through the interview transcripts above, it is clear that some obligatory relations embedded in patriarchy and which impose limitations on women’s autonomy are increasingly challenged. Young women argued that their conditions as modern women

in Zimbabwe changing. They argued that the conditions of contemporary women can never be the same with those of earlier generations. From the in-depth interviews, it came out clear that there is some qualitative shift in social attitudes, which seem to pose trouble to real power in the sense of Gramsci's (1971) hegemony and men feel threatened and uncomfortable with this. As one young man responded:

“I think it is now a reality that these things (mobile phones) are somehow changing the rules. With these mobile phones, men should know what their women are doing. As I was saying earlier, one person can be physically in one place but actually be somewhere else. As a guy, insecurities in relationships increase. There are rules and norms about how to behave in relationships, especially with regard to the conduct of women. But these days it's hard to have control over them because like I said earlier, she doesn't need to be physically with someone to share intimate stories. She can be doing it in your presence and you won't see it. So it's hard to control them” (interview with Farai).

One young woman asserted that she feels that as a modern woman in contemporary Zimbabwe, she has more say in terms of decision making and life choices, and her boyfriend is comfortable with this:

“Personally, my boyfriend does not control me. I am able to say what I want. We meet halfway and we agree or disagree on certain issues equally. Personally I make much of the decisions than him, and I feel like I am more powerful. I think he gives me more room to say things and make decisions more independently. I don't always depend on his decisions” (interview with Stella).

Another young woman argued that a lot has changed in terms of gender power and gender relations in Zimbabwe. Most women are now educated and able to make financial decisions because they also go to work like men. For her, there seems to be more equality and women's autonomy:

“These days it is almost equal 50-50. You find that more women are educated and are going to work also. In terms of money they can also made financial decisions. Even though they still ask for the father's final decision. But generally women are also getting more empowered” (interview with Tatenda).

Another young woman had this to say:

“I think the difference between us and our mothers is a result of increasing changes in social norms as men and women increasingly recognise and agree that there is need to improve the welfare of all. People are more informed these days. Long ago if a young woman completes Ordinary Levels, the advice was always *chiroorwa* (get married), and I think what this does is handing you over to some kind of slavery where you are told what to do and where you are not allowed to think for yourself because mostly you are young and not educated. This is also because when you marry early you are barely old enough to know what is right or bad. It was always ‘my daughter has finished school, but we are worried that she is not married’ or if you are married, our mothers would go around saying ‘my daughter completed school and she is married’. Marriage was the ultimate peak of a woman’s success” (interview with Vimbai).

Another respondent argues that the contemporary woman in Zimbabwe is markedly different from earlier generations

“I think my generation is much better than my mother’s, by far. In the case of my mother, it’s like what my father says is the gospel truth, and there can be no other way of thinking or saying things. They were powerless. Even for us children, my mother trained us to listen to what our father says and that we are not allowed to think otherwise, to argue or to ask the question why?. It is disrespectful to ask an elder the question “Why?” (interview with Anita).

As stated earlier in this study, the emancipation of women in Zimbabwe, as elsewhere across Africa, occurs in multiple fronts including, policy and education. As Chapter 6 argues, media technology plays an “expansionary” role of enabling social agency for members of society who are marginalised from participating in the public sphere and whose voices remain submerged by a patriarchal global capitalism. Because of its convergence with the Internet, the mobile phone offers possibilities for accessing alternative world views and discourses which help users to fashion their identities in ways that tend to disrupt established ones and their power base.

During in-depth interviews with women, most young women argued that the mobile phone and mobile Internet partly play a critical role in their identity formation, including health-related identities in ways that are augmentative to other efforts aimed at women's emancipation. As Anita argues:

“These days women also know what is happening outside of Zimbabwe, they also go overseas to look for work and they compete equally with everyone. The mobile phone is playing a critical role in this. For example, through my mobile phones I have contacts of friends who left for the United Kingdom and Australia. We communicate every day and they tell me that there are more prospects that side. I strongly feel that I may have to try my lucky that side very soon” (interview with Anita).

From a gender perspective, such affordances essentially allow women into spheres that had been the preserve for men (Hungwe 2006), as more and more women now travel overseas to look for better employment opportunities. Through this connectivity, women are able to move into spaces (including virtually) out of the domestic bounds where patriarchy ascribes as suitable for women. In these changes, the mobile phone plays an expansionary role of enabling the choices and self-autonomy of young people and women. There was a general feeling among young people that there is a way the mobile phone represents not only new experiences and sensibilities, but also that the knowledge competencies enabled by mobile technology differentiates them from previous generations.

### **6.3 Conclusion**

In social and cultural studies, research around identity increase in response to the global, postmodern and information era in which the notion of identity is becoming more problematic and complex than ever before (Koc 2006). Information and communication technologies are seen as increasingly complicating originally stable sociological notions of identity in preference for more unstable, fragmented identities that youth have access to through a multiplicity of virtual relationships spurred by the global flow of cultures and information (Geser 2006; Hall 1992: 291; Castells 1997, 1997, 1998).

This chapter looked at how digital media technologies contribute to the destabilisation and disruption of enduring socio-political and traditional hegemonic order through allowing the emergence of new identities and social consciousness. Whilst the chapter begins by locating the spaces where traditional power is subsumes its shape in the 'moral economies' and its embedding in patriarchy, it concludes by citing the emergence of power contestation and emerging forms of consciousness actualised through the global flows of information on the one hand, and increased formal advocacy through policy and education. The idea of social and cultural disruption is actualised when we understand that through digital media technologies, myriad voices from far-flung locales enter the realms of local sensibilities and norms, and they allow youth to challenge, question and refashion local and immediate perceptions and belief systems.

## CHAPTER 7

### CONCLUSION

#### 7. Introduction

Building on the theoretical standpoints of the domestication theory and the Cultural Studies theories, the study explored the role of digital media technologies in the lives of modern Zimbabwean youths, particularly female youth. Largely borrowing from the Marxist thoughts on class struggle, the Cultural Studies approach (Hall 1980, 1982) was used in this study to explore how power struggles are played out in everyday cultural practices, where dominant groups (for example, in Zimbabwe; political elites and state power as well as hegemonic patriarchy) use their ideological and hegemonic dominance to determine public discourses and power relations in society. In addition, Cultural Studies was also used to understand how ordinary members of society use digital media to widen their knowledge and cultural capitals (Bourdieu 1991, 1986) as well as to broaden their generational, gender and health-related identities in ways that expand their agency to resist structural and economic limitations.

On the other hand, the domestication theory (Silverstone et al. 1992) was used in this study to explore the ways in which individuals appropriate mobile media technology and give it meaning in their everyday social spaces (Haddon 2011). The domestication approach was used to understand if these technologies give users 'agency' to shape their identities, including for this study; health-related identities. For this study, the domestication theory was used to understand how social agents are actively involved in the 'domestication' process of appropriating and using technology to serve particular everyday needs (related to knowledge acquisition and health-related identities) in familiar everyday settings such as on campus (Haddon 2011). Domestication is thus seen as an active process directed at purposeful particular ends.

Overall the study employed a critical theoretical approach to problematise, question and attempt to locate the social 'spaces' and circumstances under which the perceived 'emancipatory' potential of technology could be seen as working in society. Dominant theories of modern digital media technologies such as the mobile phone and mobile

Internet are characterised by optimism about the transformative potential of social media which are seen as capable of challenging power structures (for example, hegemonic patriarchy that sustains the subordination of women under male power in diverse areas of life, including decisions such as health, sexuality, childbearing etc). However, in such studies, empirical evidence is hard to come by. This study agrees with Goggin's (2006) evocation for the cultural treatment of the mobile phone as a communication tool. This is because, according to this study, the mobile phone has developed its own 'little' cultures of consumption and thus necessitates the need to grasp and debate its place in our larger cultural settings (Goggin 2006: 3) where they are used and where they are given meaning by their users .

To investigate these theoretical arguments, the study used a mixed-method research design comprising of a survey, a series of in-depth individual interviews and field observations. As no previous study of this nature has been carried out in Zimbabwe, the study used the survey to provide empirical and initial baseline data about the prevalence of mobile online practices among youth looking up for health-related information.

Second, in-depth individual discussions were used to elicit contextual and 'thick' descriptions (Geertz 1973) of youths' experiences with digital media technologies. These discussions employed a critical exploratory approach to understand the perceived role of digital technology and its ability to open up more avenues for accessing information – and thus new identities - in an environment characterised by excessive state media control and strangulation of civic sphere as well as hegemonic patriarchal tradition that sustains asymmetrical relations based on gender and age.

## **7.1 Key research findings**

This study has demonstrated that the global flows of knowledge and information allow new forms of consciousness, social and health-related identities among Zimbabwean youth with which they are able to negotiate with social and generational power. Through empirical data from the field, the study has demonstrated that the mobile phone and the mobile Internet expand young people's knowledge repertoires and social agency in ways that helps them rise above the strictures of social power and tradition (particularly patriarchal power) as well as arbitrary state power and its hegemonic

dominance in the public sphere. The study has shown that youth are able to skirt arbitrary social and political through using mobile phones and mobile Internet to construct new and preferred identities, consume information and media content of their choices and get more knowledge about their sexual identities outside the purview of social authority. The study sought to answer three main research questions: How do online health-seeking practices differ across gender?, How do online health-seeking practices contribute to health-related identity formation? How do digital media technologies enhance young youths' social agency?

To answer these research questions, it was necessary that the study explores other adjunct lenses of social identity, in addition to health and sexual health/sexuality, including masculinities and feminities. This way, the study was able to use a broader approach to searching the 'arenas' that mobile technologies might be changing in young people's lives overall, but still maintaining a specific focus on health and sexual identities. In this study, the notion of identity is applied in the broadest sense to capture a holistic picture of possible 'shifts' and emerging ways youth acquire agency and resist social control and power.

To begin with; the main research question for this study was: Is the use of digital media technologies transgressive, allowing young people to skirt socio-cultural borders and social hierarchies of power? The study demonstrated that digital media technologies such as the mobile phone and mobile Internet disrupt social relations, traditional norms and established habits as youth and young women access alternative worldviews and other discourses that stand counter to established hegemonic social order. Access to alternative discourses and viewpoints about what it means to be a young man or a young woman destabilises socially constructed modes of being. The idea of social disruption melds with Gramsci's notion of counter-hegemony (see Chapter 3 on these theories).

It allows this study to analyse how youth creatively use digital media technologies to acquire knowledge and information outside from traditional authority and how such knowledge sometimes stand opposed to hegemonic notions of being. This notion also allows us to think of how entrenched hegemonic power (for example state power, and patriarchal power) are disrupted by emerging new identities and how such disruption

introduces new sensibilities and are used by youth to negotiate and contest for power and their self autonomy.

In more general terms, disruption connotes disorder, confusion or deviation from the status quo, and for this study, implies the possibility of emerging technology related youth cultures with potential to redefine social norms and ideally, re-structure social power so that subordinate members of society (in this study youth and women) have increased social agency and self-autonomy.

The study demonstrated that overall, the most significant site of social change (disruption) relates to how digital media facilitates emerging new identities (i.e. identity in the broader sense as well as health-related and sexual health identities). In this study, these were illustrated by the ways young people, particularly young women, expressed resistive discourses that pose real threat to generational and patriarchal authority by claiming autonomy over their socialisation through digital media technology and away from the traditional extended family institution and its patriarchal subtexts. In addition, more young women argued that they do not rely on their partners in decision making, but rather that they regard themselves as equal to their male counter-parts, or as one respondent argues “...these days it is almost equal 50-50”. Drawing on postmodern literature, these emerging identities are predicated on volatility, unpredictability and refusal to fixation and conformity to conventional identities about being a youth, or being a young Zimbabwean woman or man, for example

Young women participants argued that through the mobile phone and the mobile Internet, they are able to circumvent the traditional structures of authority represented by aunties as patriarchal symbols of female youth socialisation. Because more information related to growing up, gender and sexual identity, courtship and relationships is increasingly easy to access through digital media technologies, young women argued that they no longer feel compelled and subservient to patriarchal conformity in terms of shaping their sense of selves and health-related identities.

Thus, the study argues that there is empirical evidence that women respondents felt that because of the exposure to a wide array of discourses and alternative worldviews allowed through participation and access to the global flow of information, they

increasingly feel more in control of their identities and self-autonomy. There is therefore evidence that the modern young woman in Zimbabwe feels that this increased awareness (through access to a variety of information online, in addition to formal education and legislation), increases their traction towards negotiating for gender power and particularly, patriarchy.

A number of interview excerpts showed evidence of how women increasingly identify themselves as much better (in terms of gender power and self-autonomy) compared to the older generation of Zimbabwean women. For example, respondents argued that “Personally, my boyfriend does not control me... We meet halfway and we agree or disagree on certain issues equally. Personally I make much of the decisions than him, and I feel like I am more powerful. I think he gives me more room to say things and make decisions more independently. I don’t always depend on his decisions” (interview with Stella). Another female respondent argued: “These days women also know what is happening outside of Zimbabwe, they also go overseas to look for work and they compete equally with everyone. The mobile phone is playing a critical role in this. For example, through my mobile phones I have contacts of friends who left for the United Kingdom and Australia. We communicate every day and they tell me that there are more prospects that side... (interview with Anita).

On the other hand, young men also recognise the inevitability of change, and are mostly uncomfortable with such change as they feel they no longer wield power to control their women: “I think it is now a reality that these things (mobile phones) are somehow changing the rules... But these days it’s hard to have control over them because like I said earlier, she doesn’t need to be physically with someone to share intimate stories. She can be doing it in your presence and you won’t see it. So it’s hard to control them” (interview with David). From this observation, it can be argued that with young men, hegemonic identities endure, albeit emerging forms of resistance, particularly from women (as highlighted in the research question about whether digital media technologies are helping young people to transgress hegemonic and social power).

Thus, there is evidence of shifts in social consciousness and attitude towards gender roles and identities. Social connectedness, the availability of a wide array of information online from which young people are able to fashion their identities as well

as increased formal education and gender sensitive legislation increase shifts in social attitudes and beliefs about gender role power.

In addition in a context where political elites patronise local media to advance narrow propaganda and self-aggrandisement, interview participants argued that they actively dissociate themselves from the national television (ZTV) in preference for foreign subscription content on the one hand, and on the other, they increasingly use digital media technologies to access a variety of information with which they actively develop a sense of selves, their locale, and their place in the wider world. Specifically, the mobile phone and mobile Internet provide spaces through which Zimbabwean youths forge new identities and through these practices, in some ways, pose a counter-hegemonic discourse of resistance of anti-establishment. For example, through the observational narrative in Chapter 5, as well as empirical narratives from research participants, young people use their mobile phones to consume music that not only contest the propagandist and nationalist hegemony of national consensus and peace, but also as a counter-hegemonic reinvention of this discourse to foreground social discontent and anarchy through rebellious cultural forms such as dancehall music.

Second; the other two research questions: a) How do online health-seeking practices differ across gender and b) How do online health-seeking practices contribute to health-related identity formation elicited responses about youth sexuality and identity formation? These research questions elicited interesting responses about the power of identity in general terms, but particularly also about youth's health-related identities and online health information search. This is because these questions partly speak to the largely unexplored relationship between masculine identities *vis a vis* help and health seeking behaviour of young men and women (Pearson & Makadzange 2008: 361; Volkers 1999). Overall, the study established that both young men and women are concerned about their health-related identities.

To begin with, through the survey questionnaire, the study established that the use of digital media technologies differ across gender, at least in terms of the distribution of online health seeking practices between young women and young men. According to the survey results, more women tend to use their mobile phones to access health-related information. However, on further probing through individual interviews, there emerged

an interesting pattern about how young people reverted to subjective identities and socially constructed stereotypes of gender and health seeking.

For example, whilst there appeared to be apparent gendered tones suggesting that women are likely to look for health-related information online (sentiments that feed strongly from the socially constructed gender roles of women as caring, nurturing and therefore as more health conscious), it also appeared that men generally downplay their online health seeking practices to bolster the stereotype that associates femininity with health-seeking and on the other hand, to strategically engender and justify the superiority of hegemonic masculinity that feeds off the ideal that “Real men don’t need help!” (Harwood & Sparks 2003; Gascoigne et al. 1999).

This observation chimes with the Butlerian performativity (of identity) which involves repeated performance, citation, enactment and reinforcement of gender norms, which all unfold under conditions of cultural constraint, and which compel some appearances of masculinity and femininity while prohibiting others (Rambe 2013: 317; Brickell 2005).

However, when probed further, young men increasingly opened up, revealing interesting comments regarding their health seeking practices in general, but also with particular reference to the use of mobile technologies and mobile Internet to access health-related information online.

It was clear that the factors informing online health seeking practices are basically the same for men and women:, that is, it is precisely for image management, peer acceptance and the desire to define respective femininities and masculinities. For example, one young man had this to say: “I use it to look for information related to the gym and general fitness. In am a rugby player, so I am concerned about energy drinks and their effect on my health since I play rugby. They say you are what you eat” (interview with David). Another young man argued that: “I like going to the gym so I need to know the type of food to eat” (interview with Tonde). Thus, there can be noted the desire by young people to appear acceptable among peers as well as to identify with the stereotypes of sporting bodies.

Young women also reported the use of digital media technologies to search for health-related information so as to make sure that they “look acceptable” among their peers: “Yah I use the mobile phone to search online for health information. This is because I realise that issues to do with my appearances affect my self-esteem and the way I am viewed and treated by others. If I feel that my body is overweight, this will weigh me down and impact on my confidence” (Interview with Daphne). Another young woman agreed, stating that at some point she suffered a lot of peer pressure from her friends about her body size: “I happen to have a very “nosy” bunch of friends... After the vacation in December, I had put on some weight and they were all over me, telling me how I looked old like a ‘mother of two’... So I have been using my mobile phone to Google so that I can see the side effects of using such remedies” (interview with Tari).

For both young men and young women, online health searches involved the desire to satisfy identity related gratifications such as concerns with body shape, food and general ailments. In addition, young women and men engage in online health seeking practices to expand their knowledge repertoires in a context of a constrained and expensive health care sector. Online health seeking practices precisely reflect attempts towards negotiating with and circumvent the structural limitations of either an expensive health care system or the general curiosity associated with growing up and the desire for young people to wean themselves from parental authority and advice from aunties. As Paterson asserted, young people have two developmental needs: one, to create their own self-identity or individuation away from parents (i.e. through friendship/peer connectedness); and two, the fundamental need to communicate and to be connected with peers (J-F 2014; Peterson 2010). The mobile phone and the mobile Internet are seen as playing an expansionary role of enabling young people some level of agency in their attempts to assert their own sexual and health-related identities.

Interview participants (both young women and young men) also argued that digital media technologies not only expand their experiential spheres (i.e. by facilitating connectivity and loosening sociability experiences), but also allows them to forge new forms of identities that refashion their gender role power, for example. Because of this, young women feel more as ‘global citizens’ as they see a qualitative shift in gender roles and attitude among the younger generation. Most young men and young women

argued that they sometimes go online to look for information to quench their curiosity about changes related to growing up vis a vis their subjective position in the midst of these changes as active agents. They argued that mobile Internet helps them to access “even health-related things that my parents would not talk to me about, they are easy to find. I think it’s a phase of growing up. There are a lot of things that you have questions about, and you don’t normally get to trust everyone to talk to you about. You sought of figure out on your own, and life goes on” (interview with Andrew).

In domestication literature, the appropriation of media technology into human spaces involves not only a negotiation and exchange with messages and information from the outside world, but also a refashioning and contextualisation of these discourses to suit individual needs. Therefore, and as illustrated in Chapter 3, the domestication of technology theory foregrounds the role of humans as agents as active appropriators of technology and its discourses, but not as passive recipients. In this study, youth actively appropriate digital media technology and the information mediated through it to fashion their health-related identities. Most respondents argued that they get ideas about growing up through socialising with peers as well as the information that they access online using their mobile phones.

## **7.2 Significance of study**

This study makes a pioneering and empirical contribution to academic literature specifically focused on emerging online everyday digital media practices among Zimbabwean youths. A significant contribution made by this study is that it deviates from literature on the study of technology in Africa which is generally embedded in the modernization and ‘leapfrogging’ paradigm and equating the use of technology with economic growth and development (Chiumbu 2012: 193; Aker & Mbiti 2010; Wasserman et al. 2005, Williams 2005). Such literature often valorises technology whilst assuming that social actors are without agency. However, this study assumed a more critical cultural treatment of technology (Goggin 2006) so as to understand the multi-faceted nature of technology society relations in ways that recognises social actors as active agents and technology as bearing social consequences.

Through this study, youth are shown to be purposive actors with clear and self-directed will towards finding solutions to the wider structural limitations that impede their self formation. However, digital media technologies are also shown to have diverse social and cultural consequences as they allow a multiplicity of voices, perspectives and sensibilities that young people use to challenge, question and refashion their local belief systems and world views. Using the theoretical lenses of both the Cultural Studies approach and the domestication, the idea of social agency was also used in this study to in the debates around the perceived undesirable social consequences of technology. The study thus demonstrates a dialectical relationship between technological affordances (i.e. the mobile phone's 'mobility' and unlimited access to information) and self-directed users with purpose driven intentions to rise above the structural limitations of poverty, constraining social power and sheer curiosity (which they are often able to satisfy).

In addition, whilst current and emerging research on digital media use in Zimbabwe focuses on the practices of media practitioners and online media production in Zimbabwe's restrictive media environment (Mabwezara 2013, Atton & Mabwezara 2012, Moyo 2009, 2010), there is dearth of literature focusing on social categories such as women and youth who purposively engage with these digital media technologies in the wider context of identity formation. In addition, whilst there has been a proliferation of research around digital media technologies and youth identity formation, there have not been many studies particularly focusing on gender, health and sexual identities. The notion of identity formation is particularly important in the Zimbabwean context where powerful institutions such as the state, traditional practices and social norms exert enormous control that structure society and its worldviews. This study sought to fill this gap.

What is also absent in most of contemporary research in Zimbabwe is an examination of the sociological shifts in the manner in which different social demographics engage with social power in the flux of information and technological revolution. The embedded nature of the mobile phone in everyday life as well as the unprecedented social connectivity and ready access to information enabled by the mobile phone has had a profound effect on social relations. The study thus makes an empirical

contribution to an understanding of the axes of social categories that might be shifting as a result of the technological and information revolution.

In spite of the evident widespread adoption and use of the mobile phone and mobile Internet by youth in Zimbabwe (Atwood 2010), there is not much literature that empirically examines the emerging social and cultural practices related to society's immersion into the mobile virtual world, social connectivity and ease of access to information in unprecedented ways and what these practices entail on the youth's identities, self-formation and agency. For example, the last decade has seen a proliferation of studies focusing on how Zimbabweans in general respond to the state's repression of the media and its stifling of the flow of alternative political information (Mabweazara 2013; Moyo 2009, 2010). Much of these studies examined the citizens' response to the dearth of alternative political discourse gaps.

However, according to this study, citizens' quest for more alternative political discourses may not be the only ways through which society negotiates and or resist dominant ideologies and their related institutions. This study recognises that in addition to the more political institutions, there are other social institutions (for example traditional institutions such as marriage, patriarchal authority, traditional social norms and cultural practices) which exert social control, and which the youth engage with every day as they purposefully shape their social realities. This study was particularly interested in such institutions because whilst they are not overtly political, the ways in which society engages with them may pose interesting new possibilities for understanding how the popular relates to the political or to our understanding of how individual online practices such as searching health information online constitute political engagement (Wasserman 2011).

In addition, this study makes a contribution to our understanding of what it means to become a man and become a woman as a young (elite) Zimbabwean in the midst of both a political/economic crisis and a technological revolution. Thus, it creatively melds themes around how young people (and particularly young women) use digital media technologies to increase their agency and engage with constraining traditional and political institutions of power from a more privileged position of a generation growing up in an age filled with information. The ease of access to information and

diverse global discourses has a bearing on youth identity formation. The study therefore contributes an understanding of how digital media technologies are influencing and shaping not only sexual health identities, but the broader understanding of how Zimbabwean youth perceive themselves. One key research finding from this study is that among other formal measures such as policy and education, the use of digital media technologies to access a range of information play a critical role in the evident shifts in gender role power and loosening of generational and gender control.

### **7.3 Study limitation, weaknesses, and strengths**

The predominant focus of mobile phone and mobile Internet consumption by students at three institutions of tertiary learning in Zimbabwe could be seen as one limitation for this study. This is because there are other more socially diffuse practices outside campus environments that could elicit interesting findings about the use of digital media technologies by Zimbabwean youth. In addition, and as already highlighted in the context chapters, the campus environment tends to be conceived as a space characterised by liminality and permissive to resistive and anti-establishment cultures.

However, as this study has demonstrated, the selected youth constituency provided enriching insights about growing up using the lenses of a selected social segment geographically and symbolically removed from the wider Zimbabwean social milieu. In addition, this study was predominantly qualitative, and in keeping with the assumptions underpinning qualitative research, the study's main concern was to understand particularities of contexts rather than to generalise to universals (see Maxwell 1992; Bryman 1988; Denzin & Lincoln 1998). According to this study, youth experiences across Zimbabwe could not easily be lumped as identical, but are bound to be context specific and are also influenced by a number of prevailing conditions and circumstances.

### **7.4 Scope for further research**

The predominant focus of the study on three institutions of tertiary learning in Harare leaves more room for further research on the wider social context of the Zimbabwean population to access more varied opinions about mobile phone related practices. More research is needed to explore the patterns of differences and similarities between

mobile phone and mobile Internet use for purposes of health information consumption from the larger Zimbabwean population. Such studies will help contribute knowledge for the development of policy for stakeholders interested in health advocacy, but with a particular interest in young people in Zimbabwe and Africa at large.

In addition, as has already been highlighted, despite the high penetration of both mobile Internet and the mobile phone in Zimbabwe (and in Africa in general), there is limited research that looks at how young people situate themselves within these technological fluxes. Certainly, there are nuanced shifts in terms of how young people socialise with each other and how they experience the everyday, and research needs to capture these issues in detail.

## APPENDICES

### APPENDIX A: Interview guide

Good morning/afternoon/day, my name is Stanley Tsarwe. I am a Zimbabwean student from Rhodes University, South Africa. I am carrying out a study to understand young people's experiences with the mobile phone in general, and particularly their daily/occasional practices of going online for various reasons including, for example, researching, social networking, and looking up for health-related information.

This study is only for academic purposes and no name of respondents is required. Your answers and participation will be anonymous – I will not write your name on any part of the questionnaire and the findings of this study will be used to generate initial insights to an emerging field of mobile health. You reserve the right to opt out at any point during the process of completing the questionnaire without coercion. Your views are very important and your participation in this study will be much appreciated.

#### A. MOBILE PHONES, IDENTITY, SOCIAL POWER AND GENDER

---

##### *General introductions*

- Do you own a personal mobile phone?
- On an ordinary day what would you do with your phone?
- Does your mobile phone access the Internet?
- On the Internet, what do you really look up for?
- Can you give me a description of your experiences with the mobile Internet?

##### *Health-related online searches*

- Have you ever received or accessed health information on your mobile phone?
- Have you ever had a personal experience where you had to get information on a personal health problem that was bothering you before consulting the Doctor? Why?
- What is your opinion about accessing health-related information online?
- What were your experiences when you accessed inline health-related information and did you use this information?
- What do you see as the advantages of using mobile Internet to access health information?
- In your opinion who do you think is more interested in health issues, young men or young women?

- In your own opinion, and from your experience, between male and female youth, who do you think would most likely go on the Internet, or would benefit by looking up for health information?
- Are men comfortable about sharing health issue?
- Did you ever share the information you found on Internet with anyone?

*Mobile phone privacy, gender, age, and social power*

- Do you mind giving or leaving your phone with someone else, maybe for a day in your absence?
- Do women have control over the privacy of their mobile phones?
- About your aunties. Do you ever talk to them about health-related issues?
- Do you think women's lives are any better as a result of owning a mobile phone?

*Social power and technology*

- Do you think women are disempowered?
- Do you think women have control over their lives and their health?
- Do you think technology empowers women, and in what way?
- How much power and 'say' do you have in your relationship?
- If I compare you and your mother, do you think you have the same of power in your relationships and in decision making generally?
- Would you be comfortable being "equal" with women; i.e. in terms of gender roles and decision making?
- If the Internet is a source of health information, what kind of information would you like to see most and why?
- What health information do you think women lack most, and how do you think they can be helped?

*Sources of health information/Media preferences*

- Do you watch ZTV?
- How would you compare new media and traditional media? From your own preferences and experiences which do you prefer most?
- As youths there are some health issues that you face, where would you be most comfortable discussing or looking up for such information for example issues to do with STIs, pregnancies etc
- What other media have you had access to health-related information?

- In future, would you consider going online to look up for health-related information?
- When you used mobile Internet to look up for health-related information, was there any particular website that you visited?
- Most people nowadays think that social media brings with it undesirable things and information, do you think you can also be affected by such content?
- Is it true that these days what young people know is not through what their parents tell them but mostly what they bump into through social network?

## **B. DOMESTICATING ICTS, INFORMATION ABOUT MEDIA APPROPRIATION AND USAGE**

---

### *Appropriation (possession and ownership)*

- What applications did you use most (Internet, messaging, games, music, photos etc.) and which ones did you not use?
- What features did you add to the mobile phone? For example, ring tones, pouch, face cover etc.

### *Objectification (creating sense of self/status/identity gender/culture)*

- Where exactly (physical place) would you feel most comfortable accessing health information using your mobile phone and would you mind someone seeing what you would be doing?
- How do you carry and where do you keep your mobile phone (display) at home, in public, with friends. Does this change when it is new/old?
- Do you ever take photos of yourself using your mobile phone? If so, why and what do you do with the photos?
- How would you differentiate yourself with someone of an older generation and who grew without the mobile phone?

### *Incorporation (actual use of object in social space, alignment to individual's time, space and routines)*

- What time, were and with who do you most use your mobile phone?
- What other use do you make of the mobile phone, besides the normal usage such as calling, texting, browsing Internet, games?

- Were there some changes in your lifestyle as a result of owning a mobile phone; for example the way you related with others (including members of the family and friends)?

*Conversion (relationship with outside world)*

- Do you sometimes borrow your mobile phone to none-household members, if not why?
- What do other people say about your mobile phone?
- How do you know about what's happening elsewhere outside of Zimbabwe?

## APPENDIX B: Survey Questionnaire

### Mobile phones and the mediation of health information: Gender and everyday experiences of young Zimbabweans

Good morning/afternoon/day, my name is Stanley Tsarwe. I am a Zimbabwean student from Rhodes University, South Africa. I am carrying out a study to understand young people's experiences with the mobile phone in general, and particularly their daily/occasional practices of going online for various reasons including, for example, researching, social networking, and looking up for health-related information.

This study is only for academic purposes and no name of respondents is required. Your answers and participation will be anonymous – I will not write your name on any part of the questionnaire and the findings of this study will be used to generate initial insights to an emerging field of mobile health. You reserve the right to opt out at any point during the process of completing the questionnaire without coercion. Your views are very important and your participation in this study will be much appreciated.

**NB. Please start at question number 100**

**Screening question:** do you own a mobile phone? If **YES** continue and if **NO** discontinue.

Qns No.	Questions	Coding categories	Code	Skip Rule								
	Interviewer's name											
	Results of interview	Completed	1									
		Partly completed	2									
		Refused	3									
		Not eligible	4									
	Date of interview	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td> </tr> </table>	d	d	m	m	y	y	y	y		
d	d	m	m	y	y	y	y					
<b>Section 1: Demographic characteristics</b>												
100	Sex of respondent	Male	1									
		Female	2									
101	Age of respondent in completed years											
		Orthodox (Catholic, Anglican, Methodist)	1									
		Pentecostal	2									

102	Religion	Apostolic	3	
		Muslim	4	
		Protestant	5	
		Other (specify).....		

103	Marital status	Never married	1	
		Married	2	
		Widow/er	3	
		Divorcee	4	
104	Which year of study are you currently in?			
105	Is any of your parents employed?	Yes	1	
		No	2	
		Self Employed	3	
106	How would you describe the area in which you reside during school terms?	College Residence	1	
		Low Density		
		Medium Density	2	
		High Density	3	
107	How would you describe the area in which you reside during school	Urban	1	
		Rural	2	
108	Approximately, how much is your family's total monthly income?	Less than US\$200	1	
		US\$200 – US\$800	2	
		US\$801 – US\$1,500	3	
		US\$1,501- US\$3,000	4	
		More than US\$3,000	5	
<b>SECTION 2: INFORMATION ABOUT MOBILE PHONE OWNERSHIP/USE (DOMESTICATION)</b>				
200		My own	1	
		Mother	2	

	Who is the owner of the mobile phone that you use every day?	Father	3	
		Brother	4	
		Boyfriend	5	
		Girlfriend	6	
201	For how long have you owned a mobile phone?	.....months	1	
		.....years	2	

202	To what extent do you consider the information stored in your mobile phone private?	To a larger extent	1	
		To large extent	2	
		To lesser extent	3	
		Not at all	4	
203	Who do you share your mobile phone with?	No one	1	
		Friend(s)	2	
		Boyfriend	3	
		Girlfriend	4	
		Spouse	5	
		My children	6	
		Other (specify).....		
204	Which features do you like most on your mobile phone? <b>(Multiple responses). Tick as many as you can</b>	Camera	1	
		Chatting	2	
		Internet	3	
		Games	4	
		Phoning	5	
		Texting	6	
		Music	7	
		Other (Specify).....		
205	Approximately how much (US\$) are you prepared to spend on your mobile phone Internet PER DAY ONLY?	\$.....		
206		Yes	1	

	Does your mobile phone have access to the Internet?	No	2	
--	---	----	---	--

207	On average, how much time ( <b>in minutes</b> ) do you spent on the following mobile phone features per day. Please provide an answer for ALL the mobile phone features <b>selected in question 204 above</b>	Camera		
		Chatting		
		Internet browsing		
		Games		
		Phoning		
		Texting		
		Music		
		Other (Specify).....		

**Section 3: USES OF MOBILE PHONES FOR HEALTH INFORMATION SEEKING**  
*NB. Reference to health in this questionnaire refers to any health-related issues such as diseases, illness, food, nutrition, body weight, fitness, pregnancy, sexual health, psychological wellbeing, gym etc.*

300	How often do you use your mobile phone to search for health information on the Internet?	Never	1	
		Remotely	2	
		Sometimes	3	
		Usually	4	
301	I have received a health information message through my mobile phone?	Yes	1	
		No	2	
302	I know someone who receives/has received health information through mobile phone text messaging	Yes	1	
		No	2	
303	I know someone who has	Yes	1	

	searched <b>on Internet</b> for health information <b>using their mobile phone</b>	No	2	
304	Before I visit the doctor when not feeling well, I consult for more information on the Internet <b>using my mobile phone</b>	Never	1	
		Always	2	
		Sometimes	3	
305	In future, I may consider going online to search for health-related information	Yes	1	
		Maybe	2	
		Never	3	

306	<b>PLEASE RANK (in ascending order) IN THE SPACE PROVIDED the TOP THREE</b> places/sources you would be <b>most comfortable</b> to consult about health, for example about HIV/AIDS, cancer, diabetes, diet, body weight, sexual health, illness and any other health information that concerns you?			<b>Your ranking ↓</b>	
		Hospital	1		
		Clinic	2		
		Private doctor	3		
		Internet	4		
		Parents	5		
		Sibling/s	6		
		Friend/s	7		
		Faith healer	8		
		Traditional healer	9		
	Other (Specify.....)				
307	About what <b>THREE (3)</b> health issues would you be happy to receive information on, or would you personally look up for its information online through your mobile phones?	HIV/AIDS	1		
		STIs	2		
		Cancer	3		
		Diabetes	4		
		Cholera	5		
		Typhoid	6		
		Other (Specify)			

308	Between male and female <b>youths</b> , who do you think will benefit most by searching for health information using their	Males	1	
		Females	2	
<b>SECTION 4: SOURCES OF HEALTH INFORMATION AND GENERAL HEALTH COMPETENCIES</b>				
400	How often do you use the following to know more about issues such as <b>health, sexuality, illness, food and diet, body weight etc</b>			
	<b>a) Newspaper</b>	Always	1	
		Sometimes	2	
		Never	3	

	<b>b) Television</b>	Always	1	
		Sometimes	2	
		Never	3	
	<b>c) Radio</b>	Always	1	
		Sometimes	2	
		Never	3	
	<b>d) Internet</b>	Always	1	
		Sometimes	2	
		Never	3	
	<b>e) Friends</b>	Always	1	
		Sometimes	2	
		Never	3	
	<b>f) Parents</b>	Always	1	
		Sometimes	2	
		Never	3	
	<b>g) Health worker</b>	Always	1	
		Sometimes	2	
		Never	3	
401	What <b>TOP THREE (3)</b> health issue do you think youths are most worried about? Health issue here	HIV/AIDS	1	
		STIs	2	
		Cancer	3	

refers to disease, illness, food and diet, fitness, pregnancy, sexual health, etc.	Diabetes	4	
	Cholera	5	
	Typhoid	6	
	Other (Specify).....		

**Thank you for your collaboration**

## BIBLIOGRAPHY

- Aguero, JM & Bharadwaj, P. 2014. Do the More Educated Know More about Health? Evidence from Schooling and HIV Knowledge in Zimbabwe. Economic Development and Cultural Change. 62(3):489–517.
- Aker, JC & Mbiti, IM. 2010. Mobile Phones and Economic Development in Africa. Journal of Economic Perspectives. 24 (3):207–232
- Althusser, L. 1971. Ideology and ideological state apparatuses. In Althusser, L. (Ed.). Lenin and Philosophy, and Other Essays. London: New Left Books
- Amend, E & Secko, DM. 2011. In the Face of Critique: A Metasynthesis of the Experiences of Journalists Covering Health and Science. Science Communication. 34(2): 241–282
- Ang, I. 1985. Watching Dallas: soap opera and the melodramatic imagination. London: Methuen.
- Appadurai, A. 1996. Modernity at large. Cultural dimensions of globalization. Minneapolis: University of Minnesota Press
- Archambault, JS. 2011. Breaking up ‘because of the phone’ and the transformative potential of information in Southern Mozambique. New media & society. 13(3): 444–456
- Atwood, A. 2010. Kubatana in Zimbabwe: mobile phones for advocacy. In Eskine, S. (Ed.) SMS Uprising: Mobile Phone Activism in Africa. Cape Town, Dakar, Nairobi & Oxford: Pambazuka Press. pp: 86-104.
- Bakardjieva, M. 2011. The Internet in Everyday Life: Exploring the Tenets and Contributions of Diverse Approaches. In Consalvo, M & Ess, C (Eds.). The Handbook of Internet Studies. Malden, MA: Wiley-Blackwell
- Barter, S.J. 2012. Unarmed Forces: Civilian Strategies in Violent Conflicts. Peace and Change. 37 (4): 544–69
- Bastell, J. 2005. Aids, politics and NGOs in Zimbabwe. In Patterson, AS. (Ed). The African State and the AIDS Crisis. Ashgate
- Berger, G. 2000. Grave New World? Democratic Journalism enters the Global Twenty-First Century. Journalism Studies. 1(1): pp81-99

- Borzekowski, DLG., Fobil, JN. & Asante, KO. 2006. Online Access by Adolescents in Accra: Ghanaian Teens' Use of the Internet for Health Information. Developmental Psychology. 42 (3): 450–458
- Bosch, T. 2009. Using online social networking for teaching and learning: Facebook use at the University of Cape Town. Communicatio. 35(2): 185–200
- Bourdieu, P. 1986. The forms of capital. In Richardson, JG. (Ed.). Handbook of theory and research for the sociology of education. (pp. 241–258). New York: Greenwood
- Bourdieu, P. 1989. Social space and symbolic power. Sociological theory. 7(1): 14-25.
- Bourdieu, P. 1991. Language and symbolic power. Harvard University Press.
- Bourdillon, M. 1987. The Shona peoples. Gweru, Mambo Press
- Bryman, A. 1984.** The Debate about Quantitative and Qualitative Research: A Question of Method or Epistemology? **British Journal of Sociology**. **35(1): 75-92**
- Bullock, C. 1927. The Mashona. Cape Town: Juta.
- Buckingham, D. 2008. Introducing Identity. In Buckingham, D. (Ed.). Youth, Identity, and Digital Media. The John D. and Catherine T. MacArthur Foundation Series on Digital Media and Learning. Cambridge, MA: The MIT Press, 2008. 1–24. doi: 10.1162/dmal.9780262524834.001
- Butler, J. 1996. Gender as performance. In: Osborne, P. (Ed.). A critical sense: Interviews with intellectuals. pp. 109–25. Routledge: London.
- Cameron, E., & Bernardes, J. 1998. Gender and disadvantage in health: Men's health for a change. Sociology of Health and Illness. 20 (1): 673-693
- Carbone, S., Burney, S., Newton, F & Walker, G. 2009. The Symptom Recognition and Help-Seeking Experiences of men in Australia with Testicular Cancer: A Qualitative Pilot Study. Accessed on 15 January 2015 from: <http://ahsri.uow.edu.au/content/groups/public/@web/@chsd/documents/doc/uow134543.pdf>
- Castells, E. 2000. The rise of the network society. Oxford: Blackwell
- Castells, M. 1997. The power of identity. Oxford: Blackwell Publishing.
- Castells, M. 2004. The network society: A cross-cultural perspective.

- Castells, M. 2007. Communication, power and counter-power in the network society. International Journal of Communication. 1(1): 238-66.
- Chirisa, I & Muchini, T. 2011. Youth, Unemployment and Peri-Urbanity in Zimbabwe: a snapshot of lessons from Hatcliffe. International Journal of Politics and Good Governance. 2(2): 1-15
- Chitando, A. 2011. Narrating gender and danger in selected Zimbabwe women's writings on HIV and AIDS. A doctoral thesis submitted in accordance with the requirements for the degree of Doctor of Literature and Philosophy in the subject of English. University of South Africa. Department of English Studies
- Chiumbu, S. 2004. Broadcasting and the National Agenda: media and identity challenges of building a new Zimbabwe. In Henning, M. (Ed.). Media, Public Discourse and Political Contestation. Uppsala: Nordic Africa Institute. 29-35.
- Chiumbu, S. 2012. Exploring mobile phone practices in social movements in South Africa – the Western Cape Anti-Eviction Campaign. African Identities. 10 (2): 193-206
- Chiweshe, MK. 2013. Social networks as antirevolutionary forces: Facebook and political apathy among youth in urban Harare, Zimbabwe. Accessed on 15 February 2015 from:  
[http://codesria.org/IMG/pdf/manase\\_k\\_chiweshe\\_zimbabwe.pdf](http://codesria.org/IMG/pdf/manase_k_chiweshe_zimbabwe.pdf).
- Connell, R. W., & Messerschmidt, JW. 2005. Hegemonic Masculinity: Rethinking the Concept. Gender & Society. 19 (6): 829–859.
- Conole, C., Gráinne, de Laat, M., Dillon, T. Darby, J. 2008. Disruptive technologies', 'pedagogical innovation': What's new? Findings from an in-depth study of students' use and perception of technology. Computers & Education. 50(2): 511-524.
- Courtenay, WH. 2000. Constructions of masculinity and their influence on men's well-being: a theory of gender and health. Social science & medicine. 50(10): 1385-1401.
- Cumiskey, KM & Brewster, K. 2012. Mobile Phones or Pepper Spray? Feminist Media Studies. 12 (4): 590-599

- Dahlberg, L. 2006. Internet research tracings: Towards nonreductionist methodology. Journal of Computer Mediated Communication. 9(3): 1-18
- David, M. 1999. Christians and chiefs in Zimbabwe: a social history of the Hwesa people c. 1870s-1990s. Vol. 20. Edinburgh University Press, 1999.
- Deacon, D., Pickering, M., Golding, P. & Murdock, G. 1999. Researching communications: a practical guide to methods in media and cultural analysis. London: Edward Arnold
- Dehne, KL., & Hubble, J. 1993. Health education services in developing countries: the case of Zimbabwe. Health education research. Theory & Practice. 8 (4): 525-536
- Derzon, JH. & Lipsey, MW. 2002. A meta-analysis of the effectiveness of mass-communication for changing substance-use knowledge, attitudes, and behaviour. In Crano, WD. & Burgoon, M. (Eds.). Mass media and drug prevention: Classic and contemporary theories and research. (pp. 231–258). Mahwah, NJ: Erlbaum
- Deuze, M. 2006. Participation, remediation, bricolage: Considering principal components of a digital culture. The Information Society. 22(2): 63–75.
- Finlay, L. 2002. Negotiating the swamp: the opportunity and challenge of reflexivity in research practice. Qualitative research. 2 (2): 209-230
- Fiske, J. 1987. British cultural studies and television. In Allen, R.C. (Ed.). Channels of discourse. London. Methuen.
- Fiske, J. 1992. Journalism in popular culture. In Dahlgren, P. & Sparks, C. (Eds.) Journalism and popular culture. California: Sage.
- Fiske, J. 2002. Television culture. London: Routledge.
- Fong, MWL. 2009. Digital divide: The case of developing countries. Issues in informing science and Information Technology. 6 (2): 471-478.
- Garnham, N. 1993. The mass media, cultural identity, and the public sphere in the modern world. Public Culture. 5 (1): 251-251.

- Gascoigne, P., Mason, MD & Roberts, E. 1999. Factors affecting presentation and delay in patients with testicular cancer: Results of a qualitative study. Psycho-Oncology. 8 (2):144–154
- Gaventa, J. 1980. Power and Powerlessness: Quiescence and Rebellion in an Appalachian Valley. Urbana, IL. University of Illinois Press and Oxford: Clarendon Press
- Geertz, C. 1973. The interpretation of cultures. New York: Basic Books
- Gelder, K & Thornton, S. 2005. Subcultures Reader. (2nd Edition). London: Routledge.
- Giddens, A. 1984. The Constitution of Society. Polity Press: Cambridge
- Goffman, E. 1956. The presentation of self in everyday life. New York: Doubleday.
- Golding, P. 2000. Forthcoming Features: Information and Communications Technologies and the Sociology of the Future. Sociology. 34 (1):165-184
- Goldstuck, A. 2010. Internet access in South Africa. Johannesburg, South Africa: World Wide Worx.
- Goneos-Malka , A., Grobler, A. & Strasheim, A. 2013. Suggesting new communication tactics using digital media to optimise postmodern traits in marketing. Communicatio: South African Journal for Communication Theory and Research. 39 (1): 122-143
- Gramsci, A. 1971. Selections from the Prison Notebooks. London: Lawrence & Wishart
- Gramsci, A. 1979. Letters From Prison. Selected and translated by L. Lawner. Quartet Books: London
- Green, N & Haddon, L. 2009. Mobile Communications: An Introduction to New Media. Berg New Media Series
- Grusky, DB. & Takata, AA. 1992. "Social Stratification". The Encyclopaedia of Sociology. Macmillan Publishing Company. pp. 1955–70.
- Haddon, L. 2005. Empirical Studies using the Domestication Framework. In Berker, T., Hartmann, M., Punie, Y. & Ward, K. (Eds). Domestication of Media and Technologies. Open University Press, Maidenhead. pp. 103-22
- Haddon, L. 2006. The Contribution of Domestication Research to In-Home Computing and Media Consumption. The Information Society. 22 (4):195-203.

- Haddon, L. 2011. Domestication Analysis, Objects of Study, and the Centrality of Technologies in Everyday Life. Canadian Journal of Communication. 36 (2): 311-323
- Hahn, P.H. & Kibora, L., 2008. The domestication of the mobile phone: oral society and new ICTs in Burkina Faso. Journal of modern African studies. 46 (1): 87–109
- Hall, S. 1997. The work of representation. In Hall, S. (Ed.) 1997. Representation, cultural representations and signifying practices. London. Sage.
- Hall, S. 1982. The rediscovery of ‘ideology’: return of the repressed in media studies. In Gurevitch, M, Bennett, T, Curran, J., & Woollacott, J. (Eds.). Culture, Society and the Media. New York: Methuen
- Hall, S. 1980. Encoding, decoding. In During, S. (Ed.). The cultural studies reader. London: Routledge
- Hall, S & Jefferson, T (Eds.). 1975. Resistance Through Rituals: Youth Subcultures in Post-War Britain . London: Hutchinson
- Hansen, KT. 2014. Cities of youth: Post-millennial cases of mobility and sociality. World Institute for Development Economics Research
- Harding, S. 1986. The science question in feminism. Ithaca and London: Cornell University Press
- Hargittai, E. 2010. Digital Na(t)ives? Variation in Internet Skills and Uses among Members of the ‘‘Net Generation’’. Sociological Inquiry. 80 (1): 92–113
- Harwood, J & Sparks L. 2003. Social Identity and Health: An Intergroup Communication Approach to Cancer. Health communication. 15(2): 145–159
- Hervish, A & Clifton, D. 2012. Status Report: Adolescents and Young People in Sub-Saharan Africa: Opportunities and Challenges. United Nations Population Fund (UNFPA)
- Hine, C. 2005. Internet Research and the Sociology of Cyber-Social-Scientific Knowledge, The Information Society. An International Journal. 21 (4): 239-248
- Hjorth, L. 2008. Mobile media in the Asia-Pacific: Gender and the art of being. London: Routledge.

- Holleman, JF. 1953. Accommodating the spirit amongst some north-eastern Shona tribes. The Rhodes-Livingstone Papers. London, Oxford University Press.
- Honwana, AM. 2013. Youth, Waithood and Protest Movements in Africa. International African Institute.
- Horst, HA. 2009. Aesthetics of the Self: Digital Mediations. In Miller, D (Ed.). Anthropology and the Individual A Material Culture Perspective. Oxford, New York: Berg. Pp. 99-114
- Hungwe, C. 2006. Putting them in their place: “respectable” and “unrespectable” women in Zimbabwean gender struggles. Feminist Africa. 6 (1): 33–47.
- Hynes D. & Richardson, H. 2009. What use is domestication theory to information systems research?' In Dwivedi, Y.K., Williams, M., Schneberger, S. & Wade, M. (Eds). Handbook of research on contemporary theoretical models in information systems. Hershey, PA: Ideas Publishing Group, pp.482-494.
- Hynes, D & Rommes, E. 2006. “Fitting the internet into our lives”: IT Courses for disadvantaged users. In Berker, T., Hartmann, M., Punie, Y & Ward, K. (Eds.). Domestication of media and technologies. Open University Press, Berkshire
- Ito, M. 2005. Mobile phones, Japanese youth, and the re-placement of social contact. Mobile Communications. Springer: London. 131-148.
- Jick, TD. 1979. Mixing Qualitative and Quantitative Methods: Triangulation in Action. Administrative Science Quarterly.24 (4): 602-611
- Johnson, R. 1986. What is cultural studies anyway? Social Text. 16 (1): 38-80
- Kambarami, M. 2006. Femininity, sexuality and culture: Patriarchy and female subordination in Zimbabwe. Africa regional sexuality resource centre: University of Fort Hare.
- Kaplan, WA. 2006. Can the ubiquitous power of mobile phones be used to improve health outcomes? Globalization and Health. 2(9): 1-14
- Katz, JE & Arkhus, M. (Eds). Perpetual contact: Mobile communication, private talk, public performance. Cambridge: Cambridge University Press
- Kellner, D. 2003. Media culture: Cultural studies, identity and politics between the modern and the post-modern. London: Routledge.

- Kersby, M. 1999. Locating and Dislocating Gender in Rural Zimbabwe: The making of space and the texturing of bodies, *Gender, Place & Culture. A Journal of Feminist Geography*. 6(1): 27-47
- Kesby, M., Gwanzura-Ottmoller, F & Chizororo, M. 2006. Theorising other, 'other childhoods': Issues emerging from work on HIV in urban and rural Zimbabwe. *Children's Geographies*. 4(2): 185-202
- Kim, YM., Kols,a., Nyakauru, R., Marangwanda, C., & Chibatamoto, P. 2001. Promoting Sexual Responsibility among Young People in Zimbabwe. *International Family Planning Perspectives*. 27 (1): 11-19
- Klasnja, P., & Pratt, W. 2012. Healthcare in the pocket: Mapping the space of mobile-phone health interventions. *Journal of Biomedical Informatics*. 45, 184-198.doi:10.1016/j.jbi.2011.08.017
- Koc, M. 2006. Cultural identity crisis in the age of globalization and technology. *The Turkish Online Journal of Educational Technology*. 5 (1): 37-43
- Kreutzer, T. 2009. Online and Digital Media Usage on Cell Phones among low-Income Urban Youth in Cape Town. A minor dissertation submitted in partial fulfilment of the requirements for the award of the degree of M.A. in Media Theory and Practice. Centre for Film and Media Studies. Faculty of the Humanities. University of Cape Town
- Kriem, M., 2009. Mobile telephony in Morocco: a changing sociality. *Media, culture & society*. 31 (4): 617–632.
- Latour, B., & Woolgar, S. 1986. *Laboratory life: The construction of scientific facts*. Princeton, NJ: Princeton University Press
- Lefebvre, H. 1991. *Critique of Everyday Life Volume I. Introduction*. Translated by John Moore With a Preface by Michel Trebitsch. Verso: Londo, New York
- Ling, R. 2004. *The mobile connection: The cell phone's impact on society*. San Francisco, CA: Morgan Kaufman.
- Ling, R. & Yttri, B. 2002. "Hyper-coordination via mobile phones in Norway." In Katz, JE & Aakhus, M. (Eds). *Perpetual contact: Mobile communication, private talk, public performance*. Cambridge: Cambridge University Press. Pp. 139-169

- Livingstone, S & Helsper, E. 2007. Gradations in digital inclusion: children, young people and the digital divide. New media & society. 9 (4): 671-696.
- Mabweazara, HM. 2015. African journalism in the ‘digital era’: Charting a research agenda. African Journalism Studies. 36 (1): 11–17.
- Mabweazara, HM. 2013. ‘Pirate’ radio, convergence and reception in Zimbabwe. Telematics and Informatics. 30 (1): 232–241
- Mabweazara, HM. 2011. Between the newsroom and the pub: The mobile phone in the dynamics of everyday mainstream journalism practice in Zimbabwe. Journalism 12 (6): 692-707
- Atton, C & Mabweazara, HM. 2011. New media and journalism practice in Africa: An agenda for research. Journalism 12(6): 667-673.
- Mabweazara, HM. 2010. Researching the use of new technologies (ICTs) in Zimbabwean newsrooms: an ethnographic approach. Qualitative Research. 10 (6): 659-677.
- MacKenzie, D., & Wajcman, J. 1999. Introductory essay: The social shaping of technology. In MacKenzie, D & Wajcman, J. (Eds.), The social shaping of technology. Buckingham: Open University Press.
- Makoe, M. 2010. Exploring the use of MXit: A cellphone social network to facilitate learning in distance education. Open Learning. 25(3), 251–257
- McRobbie, A. 1991. Feminism and Youth Culture: From “Jackie”to “Just Seventeen”. London: Macmillan
- Mafunda, E., Albin. & Hjelm., K. 2012. Differences in health and illness beliefs in Zimbabwean men and women with diabetes. The open nursing journal. 6(1): 117-125.
- Makahamadze, T., Isacco, A & Chireshe. E. 2012. Examining the perceptions of Zimbabwean women about the Domestic Violence Act. Journal of interpersonal violence. 27(4): 706-727
- Malleus, R. 2011. Whose TV is it Anyway? An Examination of the Shift towards Satellite Television in Zimbabwe. In Ndirangu Wachanga, D. (Ed.). Cultural Identity and New Communication Technologies: Political, Ethnic and Ideological Implications. University of Wisconsin-Whitewater, USA

- Mano, W. 2005. Press Freedom, Professionalism and Proprietorship: behind the Zimbabwean media divide. Westminster Papers in Communication and Culture. Special Issue: 56-70
- Mare, A. 2013. New media, pirate radio and the creative appropriation of technology in Zimbabwe: case of Radio Voice of the People. Journal of African Cultural Studies. 25 (1): 30-41
- Masvaure, T. 2010. 'Low-risk Youth?': Students, Campus Life and HIV at a University in Zimbabwe. Unpublished Dissertation submitted to the Department of Anthropology and Archaeology in fulfilment of the requirements of a Doctor of Philosophy degree University of Pretoria, South Africa.
- McGuigan, J. 2005. Towards a Sociology of the Mobile Phone. The international journal on human in ICTS Environments. 1 (1): 45-57
- McRobbie, A. 2004. Post-feminism and popular culture. Feminist Media Studies. 4(3): 255-264
- Miller, D. 2009. Individuals and the Aesthetic of Order. In Miller, D (Ed.). Anthropology and the Individual A Material Culture Perspective. Oxford, New York: Berg. Pp 3-24
- Miller, LM & Bell, RA. 2012. Online health information seeking: the influence of age, information trustworthiness, and search challenges. Journal of Aging Health. 24(3):525–541
- Ministry of Health and Child Welfare. 2013. Health service delivery. Accessed on 12 March 2013 from: <http://www.mohcw.gov.zw/index.php/health-system-delivery>
- Morley, D. 2007. Media, modernity and technology: The geography of the new. London: Routledge
- Morley, D. 1989. Changing paradigms in audience studies. In Seiter, E., Borchers, H., Kreutzner, G., & Warthy, E.M. (Eds.) Remote control: television, audiences and cultural power. London: Routledge
- Morley, D. 1992. Television, audiences and cultural studies. London: Routledge
- Morley, D. 2003. Television, audiences and cultural studies. London: Routledge.

- Morley, D. 2006. What's "home" got to do with it? Contradictory dynamics in the domestication of technology and the dislocation of domesticity. In Berker, T., Hartmann, M., Punie, Y & Ward, K. (Eds.). Domestication of media and technologies. Open University Press, Berkshire
- Morozov, E. 2011. The Net Delusion: The Dark Side of Internet Freedom. Public Affairs: New York
- Moyo, D. 2004. From Rhodesia to Zimbabwe: change without change? Broadcasting Policy Reform and Political Control. In: Henning Melber (Ed.). Media, Public Discourse and Political Contestation. Uppsala: Nordic Africa Institute. p. 12-28
- Moyo, D. 2005. The Independent Press and the Fight for Democracy in Zimbabwe: a critical analysis of the banned Daily News. Westminster Papers in Communication and Culture. Special Issue: 109-28.
- Moyo, D. 2007. Alternative media, diasporas and the mediation of the Zimbabwe crisis. Ecquid Novi: African Journalism Studies. 28:1-2. 81-105
- Moyo, D. 2009: Citizen Journalism and the parallel market of information in Zimbabwe's 2008 election. Journalism Studies. 10 (4): 551-567
- Mude, T. 2014. Political Violence: Major Socio-Political Consequence of Urban Youth Unemployment in Zimbabwe. Review of History and Political Science. 2 (1): 107-139
- Mugweni, E., Pearson, S & Omar, O. 2012. Traditional gender roles, forced sex and HIV in Zimbabwean marriages, Culture, Health & Sexuality. An International Journal for Research, Intervention and Care. 14(5): 577-590
- Murinda, E. 2014. Zimbabwe country report for the 2014 ministerial conference on youth employment. How to Improve, Trough Skills Development and Job Creation, Access of Africa's Youth to the World of Work. Abidjan, Côte d'Ivoire
- Muturi, N. 2004. Gender Empowerment through ICT's: potential and challenges for women in the Caribbean. Accessed from: <https://dialnet.unirioja.es/descarga/articulo/3664681.pdf> on 15 January 2016

- Napoli, PM & Obar, JA. 2013. Mobile Leapfrogging and Digital Divide Policy: assessing the limitations of mobile Internet access. Fordham University Schools of Business Research Paper 2263800. Accessed on 20 December 2014 from: <http://ssrn.com/abstract=2263800>
- Nelkin, D. 1995. Selling science: How the press covers science and technology. New York, NY: Freeman
- Ngoshi, HT & Mutekwa, A. 2013. The female body and voice in audiovisual political propaganda jingles: the Mbare Chimurenga Choir women in Zimbabwe's contested political terrain. Critical Arts: South-North Cultural and Media Studies. 27 (2): 235-248
- Nguyen, HQ., Carrieri-Kohlman, V., Rankin, SH., Slaughter, R., & Stulbarg, MS. 2004. Internet-based patient education and support interventions: a review of evaluation studies and directions for future research. Computers in Biology and Medicine. 34 (2): 95–112
- Noar, SM. 2006. A 10-Year Retrospective of Research in Health Mass Media Campaigns: Where Do We Go From Here? Journal of Health Communication: International Perspectives. 11 (1): 21-42
- Nurullah, AS. 2009. The Cell Phone as an Agent of Social Change. Rocky Mountain Communication Review. 6(1): 19-25
- Nwagwu, WE. 2007. The Internet as a source of reproductive health information among adolescent girls in an urban city in Nigeria. BMC Public Health. 7 (1):1-13
- Nyamnjoh, F. 2004. Globalisation, Boundaries and Livelihoods: Perspectives on Africa. Identity, Culture and Politics. 5 (1 & 2): 37-59
- Nyika, A., Wassenaar, DR & Mamotte, N. 2009. The effect of relationships on decision-making processes of women in Harare, Zimbabwe. Ethics & Behavior. 19(3): 184-200.
- O'Brien, S & Broom, A. 2013. Gender, culture and changing attitudes: experiences of HIV in Zimbabwe, Culture, Health & Sexuality. An International Journal for Research, Intervention and Care. 15(5): 583-597
- Ozidalga, EAO & Ahuja, N. 2012. The smartphone in medicine: a review of current and potential use among physicians and students. Journal of medical Internet research. 14(5):

- Pasura, D. 2010. A gendered analysis of land reforms in Zimbabwe. Women's Studies International Forum. 33 (1): 443–454
- Pearson, S. & Makadzange, P. 2008. Help-seeking behaviour for sexual health concerns: a qualitative study of men in Zimbabwe. Culture, Health & Sexuality. 10 (4): 361-376
- Percheski, C. & Hargittai, E. 2011. Health Information-Seeking in the Digital Age. Journal of American College Health. 59(5):379-386
- Peterson, N & Taylor, J. 2003. The modernising of the indigenous domestic moral economy. The Asia Pacific Journal of Anthropology. 4 (1-2): 105-122
- Pillsbury, B & Mayer, D. 2005. Women Connect! Strengthening Communications to Meet Sexual and Reproductive Health Challenges. Journal of Health Communication: International Perspectives. 10(4): 361-371
- Piotrow, PT., Kincaid, LD., Hindin, MJ., Lettenmaier, CL., Kuseka, I., Silberman, T., Zinanga, A., Chikara, F., Adamchak, DJ., Mbizvo, MT., Lynn, W., Kumah., OM & Kim, YM. 1992. Changing Men's Attitudes and Behavior: The Zimbabwe Male Motivation Project. Studies in Family Planning: Population Council. 23(6): 365-375:
- POTRAZ. 2014. Postal and telecommunications Regulatory Authority of Zimbabwe (POTRAZ): Abridged postal and telecommunications sector performance Report third quarter 2014
- Racine, E., Gareau, I., Doucet, H., Laudy, D., Jobin, G., & Schraedley-Desmond, P. 2006. Hyped biomedical science or uncritical reporting? Press coverage of genomics (1992–2001) in Quebec. Social Science & Medicine. 62: 1278-1290
- Radway, JA. 1987. Reading the romance: Women, patriarchy, and popular literature. Berlant Modern Philology: University of North Carolina Press.
- Rambe, P. 2012. Social media-enabled mobile phones for productive learning of university students. International Journal of Mobile and Blended Learning. 4(2): 49-66.

- Rambe, P., & Ng'ambi, D. 2011. Towards an information sharing pedagogy: A case of using Facebook in a large first year class. Informing Science: the International Journal of an Emerging Transdiscipline. 14 (1): 61-89
- Rambe, P. 2013. Converged social media: Identity management and engagement on Facebook Mobile and blogs. Australasian Journal of Educational Technology. 29(3): 215-336
- Rambe, P. 2009. The impact of using social networking sites on academic relations and student learning in university setting. (Unpublished doctoral dissertation). University of Cape Town, South Africa
- Randolph, W. & Viswanath, K. 2004. Lessons learned from public health mass media campaigns: marketing health in a crowded media world. Annual Review of Public Health. 25:419-37.
- Rangaswamy, N & Cutrell, E. 2012. Anthropology, development and ICTs: Slums, Youth and the mobile internet in Urban India. Accessed from [http://research.microsoft.com/en-us/um/people/cutrell/ICTD2012-Rangaswamy\\_Anthropologists\\_and\\_ICTD.pdf](http://research.microsoft.com/en-us/um/people/cutrell/ICTD2012-Rangaswamy_Anthropologists_and_ICTD.pdf) on 13 June 2014
- Remez L, Woog V & Mhloyi, M. 2014. Sexual and reproductive health needs of adolescents in Zimbabwe, In Brief. New York: Guttmacher Institute. 3 (1): 1-8.
- Robins, MB. 2002. Are African Women Online Just ICT Consumers? International Communication Gazette. 64(3): 235–249
- Rogers, ER. 1962. The Diffusion of Innovations. Glencoe, ILL: The Free Press.
- Runganga, AO., Sundby, J. & Aggleton, P. 2001. Culture, identity and reproductive failure in Zimbabwe. Sexualities. 4: 315–332
- Sackey, EKA. & Kasilo, OMJ. 2010. Intellectual property approaches to the protection of traditional knowledge in the African Region. The African health monitor. Accessed on 14 March 2013 on: [indexmedicus.afro.who.int](http://indexmedicus.afro.who.int). p.89-101
- Sanya, BN. 2013. Disrupting patriarchy: An examination of the role of e-technologies in rural Kenya. Feminist Africa. 18(1): 12-24

- Scanlon, E., Jones, AC & Waycott, J. 2005. Mobile technologies: prospects for their use in learning in informal science settings. Journal of Interactive Media in Education. 25(25): 1-17 (2005).
- Schofield-Clarke, L. 2014. Mobile Media in the Emotional and Moral Economies of the Household. in Goggin, G. & Hjorth, L. (Eds.). The Routledge Companion to Mobile Media. Abingdon, Routledge, pp, 320-332.
- Schoon, A. 2012: Dragging young people down the drain: the mobile phone, gossip mobile website Outoilet and the creation of a mobile ghetto. Critical Arts: South-North Cultural and Media Studies. 26 (5): 690-706
- Schramm, W. 1964. Mass Media and National Development, The role of information in developing countries. Urbana: University of Illinois Press.
- Secko, DM. & smith, WA. 2010. Health Journalism: Fracturing Concerns and Building Reflective Capacity with a Deliberative Lens. Canadian Journal of Communication. 35 (2): 265-274
- Sehume, J. 2013. Transformation of cultural studies into transdisciplinarity. Critical Arts: South-North Cultural and Media Studies. 27(2): 163-181
- Sidanius, J & Pratto, F. 1999. Social Dominance: An Intergroup Theory of Social Hierarchy and Oppression. Cambridge University Press
- Silverstone , R., Hirsch, E & Morley, D. 1994. Information and communication technologies and the moral economy of the household. In Silverstone, R & Hirsch, E. (Eds.). Consuming Technologies: Media and information in domestic spaces. Routledge: London and New York
- Silverstone, R & Hirsh, E. 2005. Introduction. In Silverstone, R & Hirsh, E (Eds.). Consuming technologies: Media and information in the domestic spaces. London, New York: Routledge
- Silverstone, R., Hirsh, E & Morley, D. 1992. Information and communication technologies and the moral economy of the household. In Silverstone, R & Hirsch, E. 1992 (Eds.). Consuming Technologies Media and information in domestic spaces. Routledge: London, New York
- Skovdal, M., Campbell, C., Madanhire, C., Mupambireyi, K., Nyamukapa, C. & Gregson, S. 2011. Masculinity as a barrier to men's use of HIV services in Zimbabwe. Globalization and Health. 7 (13): 1-14

- Snyder, LB. & Hamilton, MA. 2002. A meta-analysis of U.S. health campaign effects on behavior: Emphasize enforcement, exposure, and new information, and beware the secular trend. In Hornik, RC. (Ed.). Public health communication: Evidence for behaviour change. (pp. 357–384). Mahwah, NJ: Lawrence Erlbaum
- Solomon, R. 2008. Health in ruins: A Man-Made Disaster in Zimbabwe. An Emergency Report by Physicians for Human Rights. Cambridge: Massachusetts
- Sparks, C. 2009. South African media in transition. Journal of African Media Studies. 1(2): 195–220.
- Spivak, G.C. 1988. Can the subaltern speak? In Nelson, G. and Grossberg, L. (Eds.). Marxism and the interpretation of culture. 271–314. London: Macmillan.
- Spicer, N. 2004. Combining qualitative and quantitative methods. In Seale, C. (Ed.). Researching society and culture. 2nd edition. London: Sage
- Stald, G. 2008. Mobile identity: youth, identity, and mobile communication media. In Buckingham, D. (Ed.). Youth, identity and Learning. Cambridge, MA: The MIT Press. 143–164
- Terry, PE., Mhloyi, M., Masvaure, T & Adlis S. 2006. An examination of knowledge, attitudes and practices related to HIV/AIDS prevention in Zimbabwean university students: Comparing intervention program participants and non-participants. International Journal of Infectious Diseases. 10 (1): 38—46
- Thomassen, B. 2009. The Uses and Meaning of Liminality. International Political Anthropology. 2(1): 5-28
- Tinarwo, MT & Pasura, D. 2014. Negotiating and Contesting Gendered and Sexual Identities in the Zimbabwean Diaspora. Journal of Southern African Studies. 40 (3): 521-538
- Tomaselli, GK. & Shepperson, A. 2010. All the world's a brothel: metaphysics of the text and cultural economy in the information age. Critical Arts: South-North Cultural and Media Studies. 24 (1): 51-74
- Tomaselli, KG & Shepperson, A. 1999. The Poverty of Journalism: media studies and science. Continuum: Journal of Media & Cultural Studies. 13 (2): 237-253

- Tsarwe, S. 2014. Voice, alienation and the struggle to be heard: a case study of community radio programming in South Africa. *Critical Arts: South-North Cultural and Media Studies*. 28:2: 287-310
- Tsarwe, S & Mare, A. 2015. Mediating electoral conflict in a politically fragile society. A comparative study of the public and private press in Zimbabwe (forthcoming)
- Tsokota, T & von Solms, R. 2013. 'ICT and the Turning Around of the Zimbabwean Economy'. Paper presented at the International Conference on ICT for Africa. Harare, Zimbabwe
- Turner, V. 1965. Liminality and Communitas. In Turner, V. (Ed). The Ritual Process: Structure and Anti-Structure. New Brunswick: Aldine Transaction Press
- United Nations Foundation and Vodafone Foundation. 2009. mHealth for development: The opportunity of mobile technology for health care in the developing world. Retrieved from:  
<http://www.globalproblemsglobalsolutions-files.org/unfwebsite/assessments/publications/technology/mhealth/mHealthforDevelopmentfull.pdf>
- Ukeje, U. & Iwilade, A. 2012 A Farewell to Innocence? African Youth and Violence in the Twenty-First Century. International Journal of Conflict and Violence. 6 (2): 338–50
- USAID. 2010. Zimbabwe health system assessment. 2010. Accessed on 27 May 2013 from:  
[http://www.google.co.za/url?sa=t&rct=j&q=&esrc=s&source=web&cd=8&cad=rja&ved=0CFAQFjAH&url=http%3A%2F%2Fwww.healthsystems2020.org%2Ffiles%2F2812\\_file\\_Zimbabwe\\_Health\\_System\\_Assessment2010.pdf&ei=8E6jUZXHJOvQ7Aa1wYHwDA&usg=AFQjCNEtHFNXKfCs660sP\\_oKtC44O5TPsQ&bvm=bv.47008514,d.ZGU](http://www.google.co.za/url?sa=t&rct=j&q=&esrc=s&source=web&cd=8&cad=rja&ved=0CFAQFjAH&url=http%3A%2F%2Fwww.healthsystems2020.org%2Ffiles%2F2812_file_Zimbabwe_Health_System_Assessment2010.pdf&ei=8E6jUZXHJOvQ7Aa1wYHwDA&usg=AFQjCNEtHFNXKfCs660sP_oKtC44O5TPsQ&bvm=bv.47008514,d.ZGU)
- Van Dijk, J.G.M. 2005. The deepening divide: Inequality in the information society. London: Sage.
- Volkers, N. 1999. In Coping with Cancer, Gender Matters. Journal of the National Cancer Institute. 91: 1712–14.

- Wafawaora, R. 2014. Politics and the neurotic economy. *New Zimbabwean*. Accessed on 8 January 2014 from <http://www.newzimbabwe.com/opinion-19289-Politics+and+the+neurotic+economy/opinion.aspx>
- Waite, G. 2000. Traditional medicine and the quest for national identity in Zimbabwe. *Zambezia*. XXVII (ii): 235-368
- Wajcman, J. 2002. Addressing Technological Change: The Challenge to Social Theory. *Current Sociology*. 50(3): 347–363
- Wajcman, J. 2010. Feminist theories of technology. *Cambridge Journal of Economics*. 34 (1): 143–152.
- Walker, AJ. 1996. Couples Watching Television: Gender, Power, and the Remote Control. *Journal of Marriage and the Family*. 58 (1): 813-823
- Warner, M. 2003. Styles of Intellectual Publics. in Culler, J and Lamb, K (eds). *Just Being Difficult? Academic Writing in the Public Arena*. Stanford University Press, Stanford, CA. p. 116.
- Wasserman, H. 2011. Mobile phones, popular media and everyday African democracy: transmissions and transgressions. *Popular communication*. 9 (2): 146–158.
- Webb, EJ., Campbell, DT, Schwartz, RD & Sechrest, L. 1966. *Unobtrusive Measures: Non-reactive Research in the Social Sciences*. Chicago: Rand McNally.
- Webster, F. 2002. *Theories of the Information Society*. London: Routledge.
- Wilsnack, WR., Wilsnack, SC. & Obot, IS. 2004. Why study gender and culture? In Obot, IS. & Room, R (Eds.). *Alcohol, Gender and Drinking Problems: Perspectives from Low and Middle Income Countries*. Department of Mental Health and Substance Abuse. Geneva: World Health Organisation.
- Woelk, GB. 1994. Primary health care in Zimbabwe: Can it Survive? An exploration of the political and historical developing affecting the implementation of the PHC. *Ser. Sci. Med.* 39 (8): 1027-1035
- Woolgar, S. 1987. *Science: The very idea*. Chichester: Ellis Horwood.
- Wyatt, S., Henwood, F., Hart, A, Smith, J. 2005. The digital divide, health information and everyday life. *New Media & Society*. 7(2): 199-218.
- Ybarra, ML & Bull, SS. 2007. Current trends in Internet-and cell phone-based HIV prevention and intervention programs. *Current HIV/AIDS Reports*. 4 (4): 201-207.

- Ybarra, ML., Emenyonu, N., Nansera, D., Kiwanuka, J & Bangsberg, DR. 2008. Health information seeking among Mbararan adolescents: results from the Uganda Media and You survey. Health education research 23.2 (2008): 249-258.
- Ybarra, ML., Kiwanuka, J., Emenyonu, N. & Bangsberg, DR. 2006. Internet Use among Ugandan Adolescents: Implications for HIV Intervention. PLoS Medicine. 3 (11): 2104-2112
- Zhang, W. 2013. Redefining youth activism through digital technology in Singapore. The International Communication Gazette. 1–18
- ZNFPC 2000. Zimbabwe National Family Planning Council (ZNFPC) and United Nations Population Fund (UNFPA), Prospective Changes in Desired Family Size and Contraceptive Use: Main Findings and Policy Implications of the Zimbabwe Socio-Cultural Study, Harare, Zimbabwe: ZNFPC

